

2412 HOME INSTRUCTION DUE TO HEALTH CONDITION (M)**M**

[See **POLICY ALERT Nos. 96, 108, 147, 177 and 203**]

The Board of Education shall provide instructional services to an enrolled student, whether a general education student in Kindergarten through grade twelve or special education student age three to twenty-one, when the student is confined to the home or another out-of-school setting due to a temporary or chronic health condition or a need for treatment that precludes participation in their usual education setting, whether general or special education.

A parent's request for home instruction shall include a written determination from the student's physician documenting the projected need for confinement at the student's residence or other treatment setting for more than ten consecutive school days or twenty cumulative school days during the school year. The written determination from the student's physician shall be forwarded to the school physician, who shall either verify the need for home instruction or provide reasons for denial. The parent shall be notified concerning the school physician's verification or reasons for denial within five school days after receipt of the written determination by the student's physician.

The school district shall be responsible for the costs of providing instruction in the home or out-of-school setting either directly, or through online services, including any needed equipment, or through contract with another district Board of Education, Educational Services Commission, Jointure Commission, or approved clinic or agency. The school district shall provide instructional services within five school days after receipt of the school physician's verification or, if verification is made prior to the student's confinement, during the first week of the student's confinement to the home or out-of-school setting.

The home or out-of-school instruction shall meet the minimum standards as required in N.J.A.C. 6A:16-10.1(c). The school district shall establish a written plan for delivery of instruction and maintain a record of delivery of instructional services and student progress. The teacher providing instruction shall be a certified teacher. The teacher shall provide instruction for the number of days and length of time sufficient to continue the student's academic progress and dependent upon the student's ability to participate.

For a student with disabilities, the home instruction shall be consistent with the student's Individualized Education Plan (IEP) to the extent appropriate, and shall meet the Core Curriculum Content Standards. When the provision for home instruction for a student with

disabilities will exceed thirty consecutive school days in a school year, the IEP team shall convene a meeting to review and, if appropriate, revise the student's IEP.

For a student without disability, the home instruction shall meet the Core Curriculum Content Standards, and the requirements of the Board for promotion to the next grade level. When the provision for home instruction for a student without disability will exceed sixty calendar days, the school physician shall refer the student to the Child Study Team for evaluation, pursuant to N.J.A.C. 6A:14.

The Board reserves the right to withhold home instruction when the reason for the student's confinement is such as to expose a teacher to a health hazard or dangerous home situation; when a parent or other adult twenty-one years of age or older, who has been designated by the parent, is not present during the hours of instruction; or when the condition of the student is such as to preclude benefit from such instruction.

Students on home instruction will be accounted for on the attendance register as required by the Department of Education. The name of a student on home instruction will not be released at a public Board meeting or placed in a public record.

N.J.S.A. 18A:38-1 through 18A:38-25

N.J.A.C. 6A:14-4.8; 6A:14-4.9; 6A:16-10.1

Adopted:

2418 SECTION 504 OF THE REHABILITATION ACT OF 1973 –STUDENTS (M)

[See **POLICY ALERT No. 210**]

M

The Board will comply with Section 504 of the Rehabilitation Act of 1973, the purpose of which is to eliminate discrimination on the basis of disability in any program or activity receiving Federal financial assistance.

Guarantee of Rights

The Board will provide a free appropriate public education to each student with a disability regardless of the nature or severity of the disability.

The Board will make reasonable accommodations to ensure that no student with a disability, solely on the basis of the disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity sponsored by this Board, including participation in non-academic and extracurricular services and activities.

The administration will undertake to identify and locate all students with disabilities between the ages of three and twenty-two, who are residing within the district, but not receiving a public school education. The administration will take steps to notify such students and their parents of the district's duty to provide accommodations for students with disabilities as well as procedures to determine eligibility for such accommodations.

Educational Setting

The Board will ensure that a student with a disability participates with nondisabled students in activities and services to the maximum extent appropriate to the needs of the student with a disability.

The school administration will place a student with a disability in the regular educational environment within the district unless the district demonstrates that the education of the student with a disability in the regular environment with the use of supplementary aids and services cannot be achieved satisfactorily.

Evaluation and Placement

The Board will establish standards and procedures for initial evaluations and periodic re-evaluations of students who need or are believed to need accommodations, special education, and/or related services because of a disability. Evaluations may include, but are not limited to, a review of work samples, direct observation, interviews, and/or administration of assessment measures.

Enforcement

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PROGRAM

2418 SECTION 504 OF THE REHABILITATION ACT OF 1973 –STUDENTS (M)

The Superintendent or designee is designated by the Board as the District 504 Coordinator for matters dealing with Section 504 of the Rehabilitation Act of 1973 and can be contacted at the following address or telephone number:

Office Address: 315 Franklin Avenue, Nutley, NJ 07110

Telephone: 973-661-3500

Procedural Safeguards

The district will establish and implement a system of procedural safeguards with respect to the identification, evaluation, or provision of services under Section 504. This system includes notice, an opportunity for the parent to examine relevant records, an impartial hearing with the opportunity for participation by the parent and representation by counsel, and a review procedure. These procedural safeguards shall be in accordance with N.J.A.C. 6A:14 et seq., Policy 2460, Regulation 2460.8, and/or the grievance procedures outlined in Regulation 2418.

Notice

The Board will notify members of the community that the Board does not discriminate on the basis of a disability in violation of Section 504 of the Rehabilitation Act of 1973. Policy and Regulation 2418 may be reprinted in part or in full and distributed to serve as adequate notice.

State or Local Law

The obligation to comply with the Rehabilitation Act of 1973 is not obviated or alleviated by the existence of any State or local law or other requirement that, on the basis of disability, imposes prohibitions or limits upon the eligibility of a student with a disability to receive services.

29 U.S.C. 794 (Section 504 Rehabilitation Act of 1973)

20 U.S.C. 1401 et seq. (Individuals with Disabilities Education Act)

42 U.S.C. 12101 (Americans with Disabilities Act of 1990, as amended)

Adopted:

5330 ADMINISTRATION OF MEDICATION (M)

[See **POLICY MEMO Nos. 38 and 114**]

[See **POLICY ALERT Nos. 125, 126, 133, 144, 145, 157, 173, 179 and 206**]

M

The Board of Education disclaims any and all responsibility for the diagnosis and treatment of an illness of any student. However, in order for many students with chronic health conditions and disabilities to remain in school, medication may have to be administered during school hours. Parents are encouraged to administer medications to children at home whenever possible as medication should be administered in school only when necessary for the health and safety of students. The Board will permit the administration of medication in school in accordance with applicable law.

Medication will only be administered to students in school by the school physician, a certified or noncertified school nurse, a substitute school nurse employed by the district, the student's parent, a student who is approved to self-administer in accordance with N.J.S.A. 18A:40-12.3 and 12.4, and school employees who have been trained and designated by the certified school nurse to administer epinephrine in an emergency pursuant to N.J.S.A. 18A:40-12.5 and 12.6.

Self-administration of medication by a student for asthma or other potentially life-threatening illness or a life threatening allergic reaction is permitted in accordance with the provisions of N.J.S.A. 18A:40-12.3.

Medication no longer required must be promptly removed by the parent.

The school nurse shall have the primary responsibility for the administration of epinephrine. However, the certified school nurse may designate, in consultation with the Board or the Superintendent, additional employees of the district who volunteer to be trained in the administration of epinephrine via a pre-filled auto-injector mechanism using standardized training protocols established by the Department of Education in consultation with the Department of Health and Senior Services when the school nurse is not physically present at the scene.

In accordance with the provisions of N.J.S.A. 18A:40-12.6.d, no school employee, including a school nurse or any other officer or agent of a Board of Education or a physician providing a prescription under a standing protocol for school epinephrine pursuant to N.J.S.A. 18A:40-12.5, shall be held liable for any good faith act or omission consistent with the provisions of N.J.S.A. 18A:40-12.5, nor shall any action before the New Jersey State Board of Nursing lie against a school nurse for any such action taken by a person designated in good faith by the school nurse pursuant to N.J.S.A. 18A:40-12.6. Good faith shall not include willful misconduct, gross negligence, or recklessness.

The school nurse or designee shall be promptly available on site at the school and at school-sponsored functions in the event of an allergic reaction. In addition, the parent must be informed that the school

district, its employees and agents shall have no liability as a result of any injury arising from the administration of epinephrine to the student.

The parent of the student must sign a statement acknowledging their understanding the district shall have no liability as a result of any injury arising from the administration of the epinephrine via a pre-filled auto-injector mechanism to the student and the parent shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the administration of the epinephrine via a pre-filled auto-injector mechanism to the student.

The permission for the emergency administration of epinephrine via a pre-filled auto-injector mechanism containing epinephrine to students for anaphylaxis is effective for the school year it is granted and must be renewed for each subsequent school year.

Each school in the district shall have and maintain for the use of students at least one nebulizer in the office of the school nurse or a similar accessible location. Each certified school nurse or other persons authorized to administer asthma medication will receive training in airway management and in the use of nebulizers and inhalers consistent with State Department of Education regulations. Every student that is authorized to use self-administered asthma medication pursuant to N.J.S.A. 18A:40-12.3 or a nebulizer must have an asthma treatment plan prepared by the student's physician which shall identify, at a minimum, asthma triggers, the treatment plan, and other such elements as required by the State Board of Education.

All student medications shall be appropriately maintained and secured by the school nurse, except those medications to be self-administered by students. In those instances the medication may be retained by the student with the prior knowledge of the school nurse. The school nurse may provide the Principal and other teaching staff members concerned with the student's educational progress with such information about the medication and its administration as may be in the student's best educational interests. The school nurse may report to the school physician any student who appears to be affected adversely by the administration of medication and may recommend to the Principal the student's exclusion pursuant to law.

The school nurse shall document each instance of the administration of medication to a student. Students self-administering medication shall report each incident to a teacher, coach, or other individual designated by the school nurse who is supervising the student during the school activity when the student self-administers. These designated individuals shall report such incidents to the school nurse within twenty-four hours of the self-administration of medication. The school nurse shall preserve records and documentation regarding the self-administration of medication in the student's health file.

N.J.S.A. 18A:6-1.1; 18A:40-3.1; 18A:40-6;
18A:40-7; 18A:40-12.3;
18A:40-12.4; 18A:40-12.5; 18A:40-12.6;
18A:40-12.7; 18A:40-12.8

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STRAUSS ESMAY ASSOCIATES

STUDENTS

5330 ADMINISTRATION OF MEDICATION (M)

N.J.S.A. 45:11-23

N.J.A.C. 6A:16-2.3(b)

Adopted:

5330.01 ADMINISTRATION OF MEDICAL MARIJUANA (M)

[See **POLICY ALERT No. 208**]

M

The Board of Education, in accordance with the requirements of N.J.S.A. 18A:40-12.22, must adopt a Policy authorizing parents, guardians, and primary caregivers to administer medical marijuana to a qualifying student patient while on school grounds, aboard a school bus, or attending a school-sponsored event. The parent of a qualifying student patient requesting the administration of medical marijuana to the student while on school grounds, aboard a school bus, or attending a school-sponsored event must comply with the provisions of N.J.S.A. 18A:40-12.22 and N.J.S.A. 24:6I-1 et seq. and Policy and Regulation 5330.01.

A student enrolled in the school district must be authorized to engage in the medical use of marijuana and the primary caregiver, who may be the parent, must be authorized to administer medical marijuana to a qualifying student patient in accordance with the provisions of N.J.S.A. 18A:40-12.22 and N.J.S.A. 24:6I-1 et seq. The student and the primary caregiver must complete the registration process to obtain a Registry Identification Card from the New Jersey Department of Health in accordance with the requirements of N.J.S.A. 24:6I-4.

The parent of the student authorized to engage in the medical use of marijuana must submit a written request with supporting documentation to the Principal requesting approval to have a primary caregiver assist in the administration of medical marijuana to the student while on school grounds, aboard a school bus, or attending a school-sponsored event. The Principal, in consultation with the school nurse, the school physician, and the Superintendent of Schools, will review each request and upon approval will inform the parent in writing of the approval with details for the administration of medical marijuana to the qualifying student patient. The medical use of marijuana by a qualifying student patient while on school grounds, aboard a school bus, or attending a school-sponsored event will only be authorized after the written approval from the Principal is provided to the parent.

Medical marijuana may only be administered to the qualifying student patient while the student is on school grounds, aboard a school bus, or attending a school-sponsored event by the primary caregiver in accordance with the provisions of N.J.S.A. 18A:40-12.22 and N.J.S.A. 24:6I-1 et seq. The prescribed medical marijuana must be in the possession of the primary caregiver at all times, except during the administration process. The primary caregiver shall comply with the requirements of the Principal's written approval for the administration of medical marijuana to the qualifying student patient while on school grounds, aboard a school bus, or attending a school-sponsored event.

All health records related to the administration of medical marijuana to a qualifying student patient while on school grounds, aboard a school bus, or attending a school-sponsored event shall be maintained in accordance with the requirements of N.J.A.C. 6A:16-2.4 and N.J.A.C. 6A:32-7.4.

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5330.01 ADMINISTRATION OF MEDICAL MARIJUANA (M)

No person shall be subject to arrest or prosecution for constructive possession, conspiracy, or any other offense for simply being in the presence or vicinity of the medical use of marijuana as authorized under N.J.S.A. 24:6I-1 et seq. or N.J.S.A. 18A:40-12.22. No custodial parent, guardian, or person who has legal custody of a qualifying student patient who is a minor shall be subject to arrest or prosecution for constructive possession, conspiracy, or any other offense for assisting the minor in the medical use of marijuana as authorized under N.J.S.A. 24:6I-1 et seq. or N.J.S.A. 18A:40-12.22.

N.J.S.A. 18A:40-12.22

N.J.S.A. 24:6I-1 et seq.

N.J.A.C. 6A:16-2.4; 6A:32-7.4

Adopted:

5330.04 ADMINISTERING AN OPIOID ANTIDOTE

[See POLICY ALERT No. 210]

New Jersey's "Overdose Prevention Act" encourages the wider prescription and distribution of an opioid antidote to prevent opioid overdose. The New Jersey Department of Education informed school districts they may develop and adopt policies and procedures to maintain and administer an opioid antidote to any student, school personnel, or other person believed to be experiencing an opioid overdose during school hours or during on-site school-sponsored activities to block the opioid's life-threatening effects.

In accordance with N.J.S.A. 24:6J-4.a.(1)(e), the school district's physician, as a health care practitioner as defined in N.J.S.A. 24:6J-3, may prescribe or dispense an opioid antidote directly or through a standing order to the school district for a school district certified school nurse to administer to overdose victims, provided the school physician deems a school district certified school nurse is capable of administering the opioid antidote to an overdose victim in an emergency. The physician's standing order must specify a school district certified school nurse is authorized to administer the opioid antidote to overdose victims. In accordance with N.J.S.A. 24:6J-5.a.(1), the school physician issuing the standing order shall ensure that overdose prevention information is provided to the school district and the certified school nurse(s) authorized to administer an opioid antidote. The overdose prevention information shall include, but not be limited to: information on opioid overdose prevention and recognition; instructions on how to perform rescue breathing and resuscitation; information on opioid antidote dosage and instructions on opioid antidote administration; information describing the importance of calling 911 emergency telephone service for assistance with an opioid overdose; and instructions for appropriate care of an overdose victim after administration of the opioid antidote.

Upon receiving a report of a possible opioid overdose during school hours or during an on-site school-sponsored activity, the Principal, Principal's designee, or supervising staff member will immediately call 911. The school nurse, during school hours and if available at an on-site school-sponsored activity, will also be immediately called. In accordance with the provisions of N.J.S.A. 24:6J-4.d.(1), the school nurse who has received overdose prevention information pursuant to N.J.S.A. 24:6J-5.a.(1) and has been deemed capable of administering the opioid antidote by the school physician may administer the opioid antidote to a student, school personnel, or other person in an emergency if the school nurse believes, in good faith, that the person is experiencing an opioid overdose.

The school nurse and/or other school staff members shall keep the student, school personnel, or other person comfortable until emergency medical responders arrive on the scene. Any student who receives an opioid antidote by the school nurse or by an emergency medical responder shall be transported to the nearest hospital with a school staff member designated by the Principal, Principal's designee, or supervising staff member of the on-site school-sponsored activity.

The Principal, Principal's designee, or supervising staff member will notify the parent of any student or a family member or other contact person for a school staff member who may be experiencing a possible opioid overdose as soon as practicable. The Principal, Principal's designee, or supervising staff member

of the on-site school-sponsored activity shall notify the Superintendent of Schools whenever an opioid antidote is administered by a school nurse or an emergency medical responder.

The school nurse shall be responsible to store the opioid antidote that has been prescribed by the school physician in a safe and secure location; document the administration of an opioid antidote on a student's health record; monitor the on-site inventory and replacement of the opioid antidote supply; and plan for the disposal of administered opioid antidote and expired opioid antidote applicator.

Any student or school staff member who is found to be under the influence of a controlled dangerous substance shall be subject to the provisions of applicable statutes and administrative codes and Board policies and regulations regarding substance use.

In accordance with the provisions of N.J.S.A. 24:6J-4.d.(2), the school district and the school nurse shall not, as a result of any acts or omissions, be subject to any criminal or civil liability for administering an opioid antidote in accordance with the provisions of N.J.S.A. 24:6J-1 et seq.

Nothing in this Policy shall prohibit the administration of an opioid antidote to a student, school personnel, or other person in an emergency during school hours or during on-site school-sponsored activities by an emergency medical responder or by a person authorized to administer an opioid antidote in accordance with N.J.S.A. 24:6J-1 et seq.

This Policy shall be reviewed and approved by the school physician and Board Attorney prior to Board adoption and whenever the Policy is revised. This Policy shall be made available to school staff members, parents, and students in staff and student handbooks, published on the district's website, or through any other appropriate means.

N.J.S.A. 24:6J-1 et seq.

May 24, 2016 New Jersey Department of Education Memorandum - Information for Schools Regarding Opioid Overdose Prevention

Adopted:

5339 SCREENING FOR DYSLEXIA (M)

[See **POLICY ALERT Nos. 204, 206 and 209**]

M

In accordance with the provisions of N.J.S.A. 18A:40-5.1 et seq., the Board of Education shall ensure each student enrolled in the school district who has exhibited one or more potential indicators of dyslexia or other reading disabilities is screened for dyslexia and other reading disabilities using a screening instrument selected pursuant to the provisions of N.J.S.A. 18A:40-5.2. This screening shall be administered no later than the student's completion of the first semester of the second grade.

In the event a student enrolls in the district in Kindergarten through grade six and has no record of being previously screened for dyslexia or other reading disabilities, pursuant to N.J.S.A. 18A:40-5.2, the Board shall ensure the newly-enrolled student is screened for dyslexia and other reading disabilities using a screening instrument selected pursuant to N.J.S.A. 18A:40-5.2. This screening shall be administered at the same time other students enrolled in the student's grade are screened for dyslexia and other reading disabilities or, if other students enrolled in the student's grade have previously been screened, within ninety calendar days of the date the student is enrolled in the district. The screenings shall be administered by a teacher or other teaching staff member properly trained in the screening process for dyslexia and other reading disabilities.

For the purposes of this Policy, "dyslexia" means a specific learning disability that is neurobiological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede growth of vocabulary and background knowledge.

For the purposes of this Policy, "potential indicators of dyslexia or other reading disabilities" means indicators that include, but shall not be limited to, difficulty in acquiring language skills; inability to comprehend oral or written language; difficulty in rhyming words; difficulty in naming letters, recognizing letters, matching letters to sounds, and blending sounds when speaking and reading words; difficulty recognizing and remembering sight words; consistent transposition of number sequences, letter reversals, inversions, and substitutions; and trouble in replication of content.

In accordance with the provisions of N.J.S.A. 18A:40-5.2(a), the Commissioner of Education shall distribute to each Board of Education information on screening instruments available to identify students who possess one or more potential indicators of dyslexia or other reading disabilities. The Commissioner shall provide information on the screening instruments appropriate for Kindergarten through grade two students and on screening instruments that may be suitably used for older students. The Board shall

select and implement age-appropriate screening instruments for the early diagnosis of dyslexia and other reading disabilities.

In accordance with provisions of N.J.S.A. 18A:40-5.2(b), the Commissioner shall also develop and distribute to each Board of Education guidance on appropriate intervention strategies for students diagnosed with dyslexia or other reading disabilities.

In the event a student is determined, through the screening conducted in accordance with N.J.S.A. 18A:40-5.3, to possess one or more potential indicators of dyslexia or other reading disabilities pursuant to the provisions of N.J.S.A. 18A:40-5.1 et seq., the Board shall ensure the student receives a comprehensive assessment for the learning disorder. In the event a diagnosis of dyslexia or other reading disability is confirmed by the comprehensive assessment, the Board shall provide appropriate evidence-based intervention strategies to the student, including intense instruction on phonemic awareness, phonics and fluency, vocabulary, and reading comprehension.

In accordance with the provisions of N.J.S.A. 18A:6-131, general education teachers in grades Kindergarten through three, special education teachers, basic skills teachers, English as a second language teachers, reading specialists, learning disabilities teacher consultants, and speech-language specialists are required to complete at least two hours of professional development each year on the screening, intervention, accommodation, and use of technology for students with reading disabilities, including dyslexia. The Board may make these professional development opportunities available to other instructional or support staff members as the Board deems appropriate. This requirement for professional development in reading disabilities may be part of the twenty hours of annual professional development required by N.J.A.C. 6A:9C et seq. Documentation of teachers' fulfillment of this professional development requirement shall be maintained in the district.

N.J.S.A. 18A:40-5.1; 18A:40-5.2; 18A:40-5.3; 18A:40-5.4;
18A:6-131

Adopted:

9270 HOME SCHOOLING AND EQUIVALENT EDUCATION OUTSIDE THE SCHOOLS (M)

[See **POLICY ALERT Nos. 141, 149 and 196**]

The Board of Education encourages the enrollment of all children of school age resident in the district in public schools or in approved private schools so that they may enjoy the benefits of a well-planned educational program and the socialization possible in a group environment.

Every parent, legal guardian or other person having custody and control of a child between the ages of six and sixteen years shall cause such child regularly to attend the public school or a day school in which there is given instruction equivalent to that provided in the public schools for children of similar grades and attainments or to receive equivalent instruction elsewhere than at school. The Board recognizes its responsibility for assuring that every child of school age resident in the district is enrolled in a public or private school or is offered an equivalent thorough and efficient education elsewhere than at school. The Board acknowledges that a parent, guardian, or other person having custody and control of a child has a constitutional right to choose the type and character of education they feel is best suited for their child(ren), be it secular or sectarian. Home schooling is an option and when chosen this option will be carried out in the student's home rather than the school.

In the event the Superintendent determines there is credible evidence the parent, legal guardian, or other person having custody and control of a school-aged child is not causing the child to receive equivalent instruction elsewhere than at school, the Superintendent may request a letter of intent from the parent, legal guardian, or other person confirming the child is receiving equivalent instruction elsewhere than at school. The Superintendent may report to the appropriate municipal authorities children whom he/she has reason to believe are not receiving an education in accordance with N.J.S.A. 18A:38-25. The New Jersey Department of Education encourages the parent, legal guardian, or other person having custody and control of a school-aged child to notify the Superintendent of the intent to educate the child elsewhere than at school to avoid questions with respect to compliance with the compulsory education laws.

The parent or legal guardian or other person having custody and control of a child between the ages of six and sixteen, who fails to comply with any of the compulsory education provisions of N.J.S.A. 18A:38 et seq. relating to his/her duties, shall be deemed to be a disorderly person and shall be subject to a fine.

If a child seeks admission to this school district from a program of home schooling, the school district will evaluate the work of the child to determine his/her appropriate grade placement. The Superintendent or designee will objectively evaluate the child's skill and achievement levels, as it would with any transfer student, before making a determination as to the acceptability of credits and/or the appropriate grade level placement.

When children are home schooled and are not enrolled in a school, the school district is not required to provide any of the entitlements or privileges of students enrolled in the school district unless an entitlement or privilege is specifically provided in Board Policy or required by Federal law, or State statute or administrative code. **School-age residents are welcome to participate in extracurricular**

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COMMUNITY

9270 HOME SCHOOLING AND EQUIVALENT EDUCATION OUTSIDE THE SCHOOLS (M)

activities outside of school hours for which they qualify. The school district's curriculum and other public record information will be provided to the parent, legal guardian, or other person having custody and control of a child upon request in accordance with the Open Public Records Act and Policy and Regulation 8310.

A child educated at home shall not receive a State endorsed high school diploma from the Board of Education.

N.J.S.A. 18A:38-25 through 18A:38-31

U.S.C.A. 1401 et seq.

New Jersey Department of Education – Frequently Asked Questions: Home Schooling

Adopted:

R 2412 HOME INSTRUCTION DUE TO HEALTH CONDITION (M)**M**

[See **POLICY ALERT No. 177 and 203**]

The Board of Education shall provide instructional services to an enrolled student whether a general education student in Kindergarten through grade twelve or special education student age three to twenty-one, when the student is confined to the home or another out-of-school setting due to a temporary or chronic health condition or a need for treatment that precludes participation in their usual education setting, whether general education or special education.

A. Request For Home Instruction Due To A Temporary or Chronic Health Condition

1. The parent shall submit a request to the building principal that includes a written determination from the student's physician documenting the projected need for confinement at the student's residence or other treatment setting for more than ten consecutive school days or twenty cumulative school days during the school year.
2. The building principal shall forward the written determination to the school physician, who shall verify the need for home instruction. The school physician may contact the student's physician to secure additional information concerning the student's diagnosis or need for treatment, and shall either verify the need for home instruction or shall provide reasons for denial to the building principal.
3. The building principal shall notify the parent concerning the school physician's verification or reasons for denial within five school days after receipt of the written determination by the student's physician.

B. Providing Services

1. The school district shall provide instructional services within five school days after receipt of the school physician's verification or, if verification is made prior to the student's confinement, during the first week of the student's confinement to the home or out-of-school setting.
2. The school district shall be responsible for the costs of providing instruction in the home or out-of-school setting either directly, through online services, including any needed equipment, or through contract with another district Board of Education, Educational Services Commission, Jointure Commission, or approved clinic or agency for the following categories of students:

- a. A student who resides within the area served by this Board of Education and is enrolled in a public school program; or
- b. A student who is enrolled in a nonpublic school that is located within the area served by this Board of Education pursuant to N.J.S.A. 18A:46A-1 et seq.

C. Minimum Standards For Home or Out-of-School Instruction

1. The district shall establish a written plan for the delivery of instruction to continue the student's academic progress and to maintain a record of delivery of instructional services and student progress.
2. The teacher providing instruction shall be a certified teacher.
3. The teacher shall provide instruction for the number of days and length of time sufficient to continue the student's academic progress and dependent upon the student's ability to participate.
4. For a student with disabilities, the home instruction shall be consistent with the student's Individualized Education Plan (IEP) to the extent appropriate, and shall meet the Core Curriculum Content Standards. When the provision of home instruction will exceed thirty consecutive school days in a school year, the IEP team shall convene a meeting to review and, if appropriate, revise the student's IEP.
5. For a student without a disability, the home instruction shall meet the Core Curriculum Content Standards and the requirements of the Board of Education for promotion to the next grade level. When the provision of home instruction will exceed sixty calendar days, the school physician shall refer the student to the Child Study Team for evaluation pursuant to N.J.A.C. 6A:14.

Issued:

R 2418 SECTION 504 OF THE REHABILITATION ACT OF 1973 - STUDENTS (M)

[See **POLICY ALERT No. 210**]

M

It is the policy of the Board of Education that no qualified student with a disability will, solely on the basis of disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity sponsored by this Board. The Board will also comply with the Individuals with Disabilities Education Act through the implementation of Policy 2460 and Regulations 2460 through 2460.16.

A. Definitions

1. “Accommodation” means a change in the educational setting, instructional strategies, materials, and/or supplementary/related aids and services that does not significantly alter the content of the curriculum or level of expectation for a student’s performance, but which allows the student to access the regular general education curriculum.
2. “Act” means the Rehabilitation Act of 1973.
3. “Aids and Services” means aids and services designed to meet the individual student’s educational needs to the same extent as the needs of students without disabilities are met. 34 CFR §104.33
4. “Board” means the Board of Education of this school district.
5. “Complainant” means a parent of a student with a disability who files a grievance in accordance with the grievance procedure.
6. “Day” means either calendar or working day, as specified in the Act.
7. “Disability” means, with respect to an individual, that the individual meets one or more of the following three prongs:
 - a. A physical or mental impairment that substantially limits one or more of the major life activities of such individual;
 - b. A record of such an impairment; or
 - c. Being regarded as having such an impairment.

8. “District” means this school district.
9. “District 504 Coordinator” means the district official responsible for the coordination of activities relating to compliance with the Act.
10. “FAPE” means free appropriate public education. FAPE consists of the provision of regular or special education and related aids and services designed to meet the educational needs of a student with a disability to the same extent as the needs of non-disabled students are met.
11. “Grievance” means an unresolved problem concerning the interpretation or application of law and regulations regarding discrimination by reason of a disability by an officer or employee of this district.
12. “Individuals with Disabilities in Education Act” (IDEA) identifies eligible children and young adults who have specific types of disabilities and, thus, require special education and related services. If they qualify, students receiving services through IDEA may also be eligible for services under Section 504 and ADA.
13. “Major life activities” means those of central importance to daily life and include, but are not limited to, functions such as: caring for one's self, performing manual tasks, walking, seeing, hearing, eating, sitting, writing, standing, reaching, lifting, sleeping, bending, speaking, breathing, reading, concentrating, thinking, communicating, interacting with others, learning, and working. “Major life activities” also include physical or mental impairments that substantially limit the operation of a major bodily function, including, but not limited to: functions of the immune system, special sense organs and skin, normal cell growth, and digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, reproductive systems, and the operation of an individual organ within a body system. 28 CFR §35.108; 28 CFR §36.105
14. “Mitigating measures” means steps taken to eliminate or reduce the symptoms or impact of an impairment. “Mitigating measures” include, but are not limited to: medication; medical equipment/appliances; mobility devices; low vision devices (not including ordinary eyeglasses or contact lenses); prosthetics (including limbs and devices); hearing aids, cochlear implants, or other implantable hearing devices; oxygen therapy equipment and supplies; the use of assistive technology; reasonable modifications or auxiliary aids or services; learned behavioral or adaptive neurological modifications; and psychotherapy, behavioral, or physical therapies. 42 U.S.C. 126 §12102
 - a. Mitigating measures, must not be used when determining whether an impairment is a disability except for the use of corrective eyeglasses or contact

lenses. Mitigating measures may be considered in assessing whether someone is entitled to reasonable accommodation or poses a direct threat.

15. “Physical or mental impairment” means any physiological disorder or condition such as, cosmetic disfigurement or anatomical loss affecting one or more body systems, such as neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, immune, circulatory, hemic and lymphatic, skin, and endocrine; or any mental or psychological disorder such as intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities. 28 CFR §35.108(b)(2) and 28 CFR§36.105(b)4
 - a. Physical or mental impairments may include, but are not limited to: contagious and noncontagious diseases and conditions; orthopedic, visual, speech, and hearing impairments; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; diabetes; intellectual disability; emotional illness; dyslexia and other specific learning disabilities; Attention Deficit Hyperactivity Disorder (ADHD); Human Immunodeficiency Virus (HIV) (whether symptomatic or asymptomatic); tuberculosis; drug addiction; and alcoholism.
 - b. Physical or mental impairments do not include: transvestism; transsexualism; homosexuality or bisexuality; gender identity disorders; sexual behavior disorders; pedophilia; exhibitionism; environmental, cultural, and economic disadvantages; pregnancy; physical characteristics; personality traits or behaviors; normal deviations in height, weight, or strength; compulsive gambling; kleptomania; pyromania; and psychoactive substance use disorders resulting from current illegal use of drugs.
 - c. An impairment that is episodic or in remission may be considered a “disability” if it would substantially limit a major life activity when active.
 - d. Not all impairments are disabilities.
16. “Qualified student with a disability” means a student with a disability at the preschool, elementary, or secondary level, who is: (1) of an age at which students without disabilities are provided educational services; (2) of an age at which it is mandatory under State law to provide educational services to students with disabilities; or (3) a student to whom a State is required to provide a free appropriate public education under the Individuals with Disabilities Education Act (IDEA).
17. “Record of such an impairment” means has a history of, or has been misclassified as having a mental or physical impairment that substantially limits one or more major life activities.

18. “Regarded as having an impairment” means the individual establishes that he or she has been subjected to a prohibited action because of an actual or perceived physical or mental impairment, whether or not that impairment substantially limits or is perceived to substantially limit a major life activity.
 - a. For this prong only, the public entity must demonstrate the impairment is or would be both transitory (lasting or expected to last six months or less) and minor to show an individual is not regarded as having such an impairment. 42 U.S.C. 126 §12102(3)(B)
 - b. A public entity is not required to provide a reasonable modification to an individual meeting the definition of “disability” solely under the “regarded as” prong.
19. “Section 504” means Section 504 of the Act.
20. “Student” means an individual enrolled in any formal educational program provided by the school district.
21. “Substantially limits” means the extent to which the impairment limits a student’s ability to perform a major life activity as compared to most people in the general population, whether or not an individual chooses to forgo mitigating measures. 42 U.S.C. 126 §12102 (4); 28 CFR §35.108(d); 28 CFR §35.105(d) The rules of construction when determining whether an impairment substantially limits a student in a major life activity include:
 - a. That it is broadly construed in favor of expansive coverage, to the maximum extent permitted under the Act.
 - b. That it does not demand extensive analysis.
 - c. That it substantially limits one major life activity, but not necessarily other major life activities.
 - d. That it may be episodic or in remission, as long as the disability would substantially limit a major life activity when active.
 - e. That it need not prevent, or significantly or severely restrict, an individual from performing a major life activity.

- f. That it requires an individualized assessment which does not create an “inappropriately high level of limitation” and is based upon the conditions, manner, or duration under which the individual can perform the major life activity 42 U.S.C. 12102(4)(B).
- g. That it generally will not require scientific, medical, or statistical evidence (although such evidence can be required where appropriate - evidence that can be considered may include statements or affidavits of affected individuals and school records).
- h. That the determination is made without regard to ameliorative effects of mitigating measures, except for the use of ordinary eyeglasses or contact lenses intended to fully correct visual acuity or eliminate refractive error. Non-ameliorative effects, such as the negative side effects of medication or a medical procedure, may also be considered.
- i. That the effects of an impairment lasting or expected to last less than six months can be substantially limiting for establishing a disability under the first two prongs: “actual disability” or “record of”.

B. District 504 Coordinator - 34 C.F.R. §104.7(a)

- 1. The District 504 Coordinator will be responsible for the initial evaluation of all allegations, reasonable accommodations (if required), and re-evaluations.
- 2. The District 504 Coordinator will comply with the mediation and due process requirements pursuant to N.J.A.C. 6A:14-2.6 and 6A:14-2.7 where applicable in cases arising from Section 504.

C. Educational Program

- 1. General:
 - a. The Board will not, on the basis of a disability, exclude a student with a disability from a program or activity and will take into account the needs of such student in determining the aid, benefits, or services to be provided under a program or activity.
 - b. Identification for special education services under IDEA and accommodations under Section 504 are not mutually exclusive.

- c. Students not otherwise eligible for special education programs and/or related services pursuant to N.J.A.C. 6A:14-1 et seq. may be referred to the District 504 Coordinator by the parent or staff member.
 - d. The Board will provide reasonable accommodation(s) to students with disabilities notwithstanding any program and/or related services required pursuant to N.J.A.C. 6A:14-1 et seq.
- D. Free Appropriate Public Education (FAPE) - 34 CFR §104.33
- 1. FAPE must be provided without cost to the student's parent, except for those fees imposed on a parent of a non-disabled student.
 - 2. The district may place a student with a disability in or refer such student to a program other than one it operates as its means of carrying out the provisions of this Regulation.
 - a. The district will continue to maintain responsibility for ensuring the requirements of the Act are met in respect to any student with a disability so placed or referred.
 - b. The district will ensure adequate transportation to and from the program, provided at no greater cost than would be incurred by the parent if the student were placed in a program operated by the district.
 - (1) The administration will consider the proximity of any alternative setting to the student's home.
 - (2) If a public or private residential placement is necessary to provide FAPE to a student with a disability, the placement, including non-medical care, room, and board, shall be provided at no cost to his/her parent.
- E. Evaluation and Placement - 34 CFR §104.35
- 1. The Board will establish standards and procedures for initial evaluations and periodic re-evaluations of students who need or are believed to need special education and/or related services on the basis of disability.
 - a. Section 504 evaluations may encompass record and work sample review; direct observation in the natural setting; interviews with the student, parent, and school personnel; and/or administration of assessment measures. They do not include independent evaluations.

- b. It may be determined that additional data is required, including the administration of formal standardized instruments and data on conditions in remission or episodic in nature. Tests and other evaluation materials must meet the following criteria:
 - (1) Validated for the specific purpose for which they are used and administered by trained personnel;
 - (2) Tailored to assess specific areas of educational need and not merely those designed to provide a single intelligence quotient; and
 - (3) Accurately reflect aptitude or achievement or whatever else the tests purport to measure, rather than the student's impaired sensory, manual, or speaking skills (unless the test is designed to measure these particular factors).
2. In interpreting evaluation data and in making placement decisions, the district will:
 - a. Draw information from a variety of sources, including, but not limited to: aptitude and achievement tests, medical evaluations, teacher recommendations, physical condition, social and cultural background, and adaptive behavior;
 - b. Establish procedures to ensure that information obtained from all such sources is documented and carefully considered;
 - c. Ensure that placement decisions are made by a group of persons, including persons knowledgeable about the student, the meaning of the evaluation data, and placement options; and
 - d. Ensure that placement decisions are made in conformity with this Regulation and 34 CFR §104.34.
3. The District 504 Coordinator will establish timelines for re-evaluations of students receiving reasonable accommodation(s). A parent may request a re-evaluation at any time upon written request to the District 504 Coordinator.
4. Copies of requests for evaluation and related documents will be maintained in a designated Section 504 file folder placed in the student's cumulative record.

F. Section 504 and Special Education

1. A student who qualifies for Section 504 services may not qualify for special education under IDEA; likewise, a student who qualifies under IDEA may not qualify under Section 504.
2. A referral for a Section 504 evaluation may be made concurrently with a pending special education evaluation. In such instances, the Section 504 evaluation should be conducted during the same timeline utilized for the special education assessment. Generally, the Section 504 evaluation should be conducted in less than sixty days.
3. If a student is found eligible under Section 504 prior to the special education team's findings, a Section 504 Accommodation Plan will be developed pending the special education team's findings. If the student is then found eligible for special education, an Individualized Education Program (IEP) will be developed and the IEP team can incorporate into the IEP any accommodations/services provided in the Section 504 Accommodation Plan.
4. A separate Section 504 team meeting will be convened when a student is identified as eligible for special education and no longer requires accommodations/services under Section 504.
5. When an IEP team determines a student is not eligible or no longer eligible for special education, there may be circumstances when a Section 504 referral for evaluation may be appropriate and should be considered. The IEP team may document the student is being referred for a Section 504 evaluation, and the eligibility evaluation shall be addressed in a separate Section 504 team meeting.

G. Section 504 Accommodation Plan

1. The District 504 Coordinator will assist in organizing a team of individuals responsible for receiving referral documents; securing evaluation information; and determining eligibility and appropriate accommodations, related aids or services for eligible students with disabilities. The team must be comprised of people who:
 - a. Are knowledgeable about the student;
 - b. Understand the meaning of evaluation data; and
 - c. Are familiar with placement options.
2. The District 504 Coordinator, based on the evaluation of the student eligible for services under Section 504, will prepare a Section 504 Accommodation Plan which may include as relates to the student:

- a. Name;
- b. Date of birth;
- c. Current educational placement;
- d. Name of the District 504 Coordinator preparing the Section 504 Accommodation Plan;
- e. Disabling condition:
 - (1) Major life activity impaired;
 - (2) Educational impact; and
 - (3) Impact on related educational progress.
- f. Accommodation (as appropriate):
 - (1) Physical and learning environment;
 - (2) Instructional;
 - (3) Behavioral;
 - (4) Evaluation;
 - (5) Medical; and/or
 - (6) Transportation.
- g. Other:
 - (1) List of individuals participating in the development of the plan, along with their titles and the date(s) of their participation.
 - (2) Certification by the student's parent that he or she has participated in the development of the plan and provided consent to its implementation.

- (3) A waiver of the fifteen days' notice prior to the implementation of the plan by the parent if the plan is to be implemented sooner than the fifteen days.
3. A Section 504 Accommodation Plan should not:
- a. Modify the curriculum;
 - b. Exempt a student from a course or subject required for graduation;
 - c. Alter the level of expectation for a student's performance;
 - d. Provide an extended time accommodation only for standardized testing when it is not required as part of the regular program of evaluation;
 - e. Include any testing accommodations unless authorized by the testing agency; and
 - f. Assign responsibility for implementing Section 504 accommodations to another student.
4. A Section 504 Accommodation Plan should:
- a. Directly relate to a student's identified needs;
 - b. Be specific, measurable, and tailored to meet students' identified needs to allow for consistent implementation;
 - c. Be written to incorporate specific symptoms, behavior, or triggers that elicit implementation of the accommodation or service if required only occasionally; and
 - d. Clearly state how much extended time is required based upon a student's identified needs, if the Section 504 team determines such an accommodation is appropriate.
5. Students needing medication:
- a. Not all students needing medication administered by school staff will require a Section 504 Accommodation Plan. It is not necessary to qualify a student as having a disability that substantially limits a major life activity under Section 504 in order to provide a service that schools perform for all general education students.

- b. A Section 504 referral with the potential for a subsequent Section 504 Accommodation Plan is appropriate when a student is found to have a disability that substantially limits a major life activity and needs medication administered on a systematic basis to receive equal access to the educational program.

H. Nonacademic/Extracurricular Services - 34 CFR §104.37

1. Nonacademic and Extracurricular Services may include counseling, physical recreational athletics, transportation, health services, recreational activities, special interest groups or school clubs, and/or referrals to agencies which provide assistance to students with disabilities and student employment.
2. The Board and administration will ensure that students with disabilities are not counseled toward more restrictive career objectives than are nondisabled students with similar interests and abilities.
3. The Board will provide to students with disabilities equal opportunity as afforded nondisabled students for participation in physical education courses, athletics, and similar programs and activities.
 - a. The district may offer students with disabilities physical education and athletic activities that are separate or different from those offered to nondisabled students only if the separation or differentiation is consistent with the requirements of 34 CFR §104.34 and only if no student with a disability is denied the opportunity to compete or to participate.

I. Grievance Procedure - 34 CFR §104.7(b)

1. This grievance procedure shall apply to a student with a disability alleging discrimination under the provisions of Section 504 of the Rehabilitation Act of 1973.
2. The parent who believes his or her child has a valid basis for a grievance under Section 504 shall file an informal complaint in writing with the District 504 Coordinator stating the specific facts of the grievance and the alleged discriminatory act.
3. The District 504 Coordinator will make reasonable efforts to resolve the matter informally by reviewing the grievance with appropriate staff including, but not limited to: the Principal, Child Study Team staff, and/or classroom teacher(s).
4. The District 504 Coordinator will investigate and document the complaint including dates of meetings, dispositions, and date(s) of dispositions. The District 504 Coordinator will

provide a written decision to the complainant within seven working days of the written complaint.

5. If the complainant is not satisfied with the District 504 Coordinator's written decision, the complainant may appeal the decision in writing, setting out the circumstances that give rise to the alleged grievance. This written appeal must be filed with the District 504 Coordinator within three working days of the complainant's receipt of the written decision. The written appeal must state the basis for the appeal and the remedy sought by the complainant.
6. The District 504 Coordinator will appoint a qualified hearing officer within seven working days of the receipt of the written appeal. The hearing officer will conduct a hearing within seven working days of receipt of the written appeal. The hearing officer will give the parent a full and fair opportunity to present evidence relevant to the issues raised under the initial grievance. The parent may, at his or her own expense, be assisted or represented by individuals of their choice, including legal counsel. The hearing officer will present a written decision to the District 504 Coordinator and aggrieved individual within seven working days of the hearing.
7. The complainant may file a written appeal to the Board if not satisfied with the hearing officer's decision provided the written appeal is submitted to the Superintendent within three working days of the complainant's receipt of the hearing officer's written decision. The Board may, but is not required to, conduct a Board hearing on the appeal.
8. The complainant may request mediation and due process in accordance with N.J.A.C. 6A:14-2.6 and 2.7 if unsatisfied with the written decision of the Board. If specifically requested by the parent, the aforementioned N.J.A.C. 6A:14-2.6 and 2.7 grievance procedures must be followed.

Adopted:

R 5330 ADMINISTRATION OF MEDICATION (M)

[See **POLICY ALERT Nos. 125, 133, 144, 145, 157, 173, 179, 206 and 209**]

M

A. Definitions

1. “Medication” means any prescription drug or over-the-counter medicine or nutritional supplement and includes, but is not limited to, aspirin and cough drops.
2. “Administration” means the taking of any medication by ingestion, injection, or application to any part of the body or the giving of direct physical assistance to the person who is ingesting, injecting, or applying medication.
3. “Self-administration” means carrying and taking medication without the intervention of the school nurse, approved through the school district policy and restricted to students with asthma, other potentially life-threatening illnesses or life-threatening allergic reaction.
4. “Life-threatening illness” means an illness or condition that requires an immediate response to specific symptoms or sequelae (an after effect of disease or injury) that if left untreated may lead to potential loss of life, i.e. adrenaline injection in anaphylaxis.
5. “A pre-filled auto-injector mechanism containing epinephrine” is a medical device used for the emergency administration of epinephrine to a student for anaphylaxis.
6. “Noncertified school nurse” means a person who holds a current license as a registered professional nurse from the State Board of Nursing and is employed by the district, and who is not certified as a school nurse by the Department of Education.
7. “Substitute school nurse” means a person who holds a current license as a registered professional nurse from the State Board of Nursing and who has been issued a county substitute certificate to serve as a substitute for a certified school nurse in accordance with N.J.A.C. 6A:9B-7.6.
8. “School physician” means a physician with a current license to practice medicine or osteopathy from the New Jersey Board of Medical Examiners who works under contract or as an employee of the district. This physician is referred to as the medical inspector in N.J.S.A. 18A:40-4.1.

9. “Advanced practice nurse” means a person who holds current certification as nurse practitioner/clinical nurse specialist from the State Board of Nursing.
10. “Certified school nurse” means a person who holds a current license as a registered professional nurse from the State Board of Nursing and an Educational Services Certificate with a school nurse endorsement or school nurse/non-instructional from the Department of Education pursuant to N.J.A.C. 6A:9B-14.3 and 14.4.

B. Permission for Administration by a School Nurse or Registered Nurse

1. Permission for the administration of medication in school or at school-related events will be given only when it is necessary for the health and safety of the student.
2. Medication will not be administered to a student who is physically unfit to attend school or has a contagious disease. Any such student should not be permitted to attend school and may be excluded in accordance with Policy 8451.
3. Parent requests for the administration of medication in school must be made in writing and signed by the parent.
4. The parent must submit a certified statement written and signed by the student's physician. The statement must include:
 - a. The student's name;
 - b. The name of the medication;
 - c. The purpose of its administration to the student for whom the medication is intended;
 - d. The proper timing and dosage of medication;
 - e. Any possible side effects of the medication;
 - f. The time when the medication will be discontinued;

- g. A statement that the student is physically fit to attend school and is free of contagious disease; and
 - h. A statement that the student would not be able to attend school if the medication is not administered during school hours.
5. The request for the administration of medication must be made to the Principal prior to any administration of medication or delivery of the medication to the school. The Principal may consult with the school nurse and the school physician in making his/her final determination to allow or deny the request.
- a. An approved request will be signed by the Principal and given to the school nurse and the student's parent.
 - b. The parent will be informed of the reason for a denied request; a denied request may be appealed to the Superintendent.

C. Administration of Epinephrine to Students

1. The parent may provide the Superintendent authorization for the emergency administration of epinephrine via a pre-filled auto-injector mechanism containing epinephrine to a student for anaphylaxis provided:
- a. The parent provides the Superintendent a written authorization for the administration of epinephrine with written orders from the physician or an advanced practice nurse that the student requires the administration of epinephrine for anaphylaxis.
 - b. The school nurse has the primary responsibility for the administration of epinephrine. However, the school nurse shall designate, in consultation with the Board or Superintendent, additional employees of the district who volunteer to administer epinephrine via a pre-filled auto-injector mechanism to a student when the school nurse is not physically present at the scene. These volunteers shall be trained using standardized training protocols established by the New Jersey Department of Education in consultation with the Department of Health and Senior Services. The student's parent must consent in writing to the administration of epinephrine via a pre-filled auto-injector mechanism by the designee(s).

- c. The parent must be informed in writing by the Board or Superintendent that the school district and its employees or agents shall have no liability as a result of any injury to a student arising from the administration of epinephrine via a pre-filled auto-injector mechanism.
- d. The parent must sign a statement acknowledging their understanding the district shall incur no liability as a result of any injury arising from the administration of epinephrine via a pre-filled auto-injector mechanism to the student and the parent shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the administration of epinephrine via a pre-filled auto-injector mechanism to the student.
- e. The permission for the emergency administration of epinephrine via a pre-filled auto-injector mechanism is effective for the school year it is granted and must be renewed for each subsequent school year upon the fulfillment of the requirements as outlined in a. through d. above.
- f. The school nurse shall be responsible for the placement of the student's prescribed epinephrine in a secure but unlocked location easily accessible by the school nurse and trained designees to ensure prompt availability in the event of an allergic emergency at school or at a school function. The location of the epinephrine shall be indicated on the student's emergency care plan. Back-up epinephrine shall also be available at the school if needed.
- g. The school nurse or trained designee shall be promptly available on site at the school and school-sponsored functions in the event of an allergic reaction.
- h. The school nurse or trained designee shall arrange for the transportation of the student to a hospital emergency room by emergency services personnel after the administration of epinephrine, even if the student's symptoms appear to have resolved.
- i. In accordance with the provisions of N.J.S.A. 18A:40-12.5.f, the school nurse or a designated employee trained to administer epinephrine via a pre-filled auto-injector mechanism is permitted to administer epinephrine via a pre-filled auto-injector mechanism to any student without a known

history of anaphylaxis or to any student whose parent has not met the requirements outlined above when the school nurse or trained designee in good faith believes the student is having an anaphylactic reaction.

- j. Each school in the district will maintain in a secure, but unlocked and easily accessible location, a supply of epinephrine auto-injectors prescribed under a standing order from a licensed physician, and that is accessible to the school nurse and trained designees for administration to a student having an anaphylactic reaction.

D. Permission for Self-Administration of Medication

Permission for self-administration of medication of a student with asthma, other potentially life-threatening illness, or a life-threatening allergic reaction may be granted under the following conditions:

1. Parent of the student must provide the Board written authorization for the self-administration of medication;
2. The parent of the student must also provide the Board with a signed written certification from the physician of the student that the student has asthma or another potentially life threatening illness or is subject to a life-threatening allergic reaction and is capable of, and has been instructed in, the proper method of self-administration of medication. The written certification must include:
 - a. The student's name;
 - b. The name of the medication;
 - c. The purpose of its administration to the student for whom the medication is intended;
 - d. The proper timing and dosage of medication;
 - e. Any possible side effects of the medication;
 - f. The time when the medication will be discontinued;

- g. A statement that the student is physically fit to attend school and is free of contagious disease; and
 - h. A statement the medication must be administered during the school day or the student would not be able to attend school.
 - 3. The parent of the student have signed a statement acknowledging that the school district shall incur no liability as a result of any injury arising from the self-administration of medication by the student and that the parent shall indemnify and hold harmless the school district, the Board, and its employees or agents against any claims arising out of the self-administration of medication by the student;
 - 4. The parent's written authorization and the physician's written certification shall be reviewed by the Principal or designee with the school nurse and the school physician. The school nurse and the school physician must agree the student is capable of self-administration of the medication. If it is determined the student may self-administer medication in accordance with the request:
 - a. The request will be signed by the Principal and given to the school nurse and the student's parent;
 - b. The parent will be informed of the reason for a denied request; a denied request may be appealed to the Superintendent.
 - 5. Permission to self-administer one medication shall not be construed as permission to self-administer other medication; and
 - 6. Permission shall be effective on the school year for which it is granted and shall be renewed for each subsequent school year upon fulfillment of the requirements in 1. through 4. above.
- E. Custodianship of Medication**
- 1. Medications to be administered by the school nurse or a registered nurse:
 - a. All medications must be delivered to the school by the parent.

- b. All medications must be in the original container, with the prescription information affixed.
 - c. The school nurse shall be custodian of students' medication, which will be properly secured.
 - d. Any unused medication must be picked up by the student's parent.
 - e. After reasonable efforts to have the parent retrieve the medication have failed, any unused medication that remains in the school at the end of the school year or two school weeks after the student stops taking the medication, whichever first occurs, must be destroyed or discarded by the school nurse, in accordance with proper medical controls.
2. Medications to be self-administered by a student:
- a. Time being of the essence in cases of asthma, other potentially life threatening illness, or a life-threatening allergic reaction, all medications to be self-administered by a student must be kept in the student's possession.
 - b. No student may possess medication for self-administration unless the proper permission has been granted by the Principal and a record of the medication is on file in the office of the school nurse.
 - c. Students who are permitted to self-administer medications must secure their medication in such a manner that the medication will not be available to other students. The medication must be in a sealed container and clearly labeled with the medication name, dosage, and ordering physician. The medication, if ingested by someone other than the student, shall not cause severe illness or death.
 - d. Students who are permitted to self-administer medications shall only have in their possession the quantity of medication necessary for the time period of the student's school day.
 - e. Notwithstanding any other law or regulation, a student who is permitted to self-administer medication in accordance with the provisions of N.J.S.A. 18A:40-12.3 shall be permitted to carry an inhaler or prescribed

medication for allergic reactions, including a pre-filled auto-injector mechanism, at all times, provided the student does not endanger himself or other persons through misuse.

F. Administration of Medication

1. No medication shall be administered to or taken by a student in school or at a school-sponsored event except as permitted by Board policy and this regulation.
2. Medication will only be administered to students in school by the school physician, a certified or noncertified school nurse, a substitute school nurse employed by the district, a student who is approved to self-administer in accordance with N.J.S.A. 18A:40-12.3 and 12.4, and school employees who have been trained and designated by the certified school nurse to administer epinephrine in an emergency pursuant to N.J.S.A. 18A:40-12.5 and 12.6.
3. When practicable, self-administration of medication should be observed by the school nurse.
4. Students self-administering medication shall report each administration of medication and any side effects to a teacher, coach, or the individual in charge of the student during school activities. Such individuals shall report all administrations and any side effects reported or observed to the school nurse within twenty-four hours.
5. When a student attends a school-sponsored event at which medication may be required (such as an outdoor field trip or athletic competition) and the school nurse cannot be in attendance, the student's parent will be invited to attend. If neither the school nurse nor the parent can attend and the student does not have permission to self-administer medication and there is a risk that the student may suffer injury from lack of medication, the student may be excused from the event.

G. Emergencies

1. Any medical emergency requiring medication of students will be handled in accordance with Policy 8441 and implementing regulations on first aid and, as appropriate, the school physician's standing orders for school nurses. Arrangements will be made to transport a student to a hospital emergency

room after the administration of epinephrine in accordance with N.J.S.A. 18A:40-12.5.e.(3).

2. Nothing in N.J.S.A. 18A:40-12.6 prohibits the emergency administration of epinephrine via a pre-filled auto-injector mechanism to a student for anaphylaxis by the school nurse or other trained designated employees pursuant to N.J.S.A. 18A:40-12.6 when the student is authorized to self-administer epinephrine pursuant to N.J.S.A. 18A:40-12.3, or when there is a coexisting diagnosis of asthma, or when a prescription is received from a licensed health care professional for epinephrine coupled with another form of medicine, or when the epinephrine is administered pursuant to N.J.A.C. 18A:40-12.5.

H. Records

The school nurse shall include the following in a student's health record:

1. The approved written request for the administration or self-administration of medication;
2. A record of each instance of the administration of the medication by the school nurse or a registered nurse;
3. A record of reports by teachers, coaches, and other individuals in charge of school activities who report student self-administration of medication;
4. Any side effects that resulted from the administration of medication; and
5. Whether the supply of medication provided in cases where the medication is to be administered by the school nurse or a registered nurse was exhausted or the parent removed the medication or, if the parent failed to remove the medication, the medication was destroyed and the date on which that occurred.

I. Notification

1. The school nurse may provide the Principal and other teaching staff members concerned with the student's educational progress with information about the medication and administration when such release of information is in the student's best educational interest.

2. The school nurse will provide teachers, coaches, and other individuals in charge of school activities with a list of students who have been given permission to self-administer medication.
3. The school nurse will inform the student's parent of any difficulty in the administration of medication or any side effects.
4. The school nurse will report to the school physician any student who appears to be adversely affected by the medication.

Adopted:

R 5330.01 ADMINISTRATION OF MEDICAL MARIJUANA (M)**M**

A custodial parent, guardian, or person having legal custody of a student requesting the administration of medical marijuana to a qualifying student patient while on school grounds, aboard a school bus, or attending a school-sponsored event must comply with the procedures and requirements of N.J.S.A. 18A:40-12.22 and N.J.S.A. 24:6I-1 et seq. and this Regulation.

A. Definitions

For the purposes of this Policy:

1. “Bona fide physician-patient relationship” means a relationship in which the physician has ongoing responsibility for the assessment, care, and treatment of a qualifying student patient’s debilitating medical condition.
2. “Certification” means a statement signed by a physician with whom a qualifying student patient has a bona fide physician-patient relationship, which attests to the physician’s authorization for the patient to apply for registration for the medical use of marijuana.
3. “Marijuana” has the meaning given in Section 2 of the “New Jersey Controlled Dangerous Substances Act,” N.J.S.A. 24:21-2.
4. “Medical use of marijuana” means the acquisition, possession, transport, or use of marijuana or paraphernalia by a registered qualifying student patient as authorized by the New Jersey Compassionate Medical Marijuana Act (Act).
5. “Parent” means the custodial parent, guardian, or person who has legal custody of a qualifying student patient who may also be the primary caregiver registered and provided a Registry Identification Card by the New Jersey Department of Health to administer medical marijuana to a student in accordance with the provisions of N.J.S.A. 18A:40-12.22 and N.J.S.A. 24:6I-4.
6. “Physician” means a person licensed to practice medicine and surgery pursuant to Title 45 of the Revised Statutes with whom the qualifying student patient has a bona fide physician-patient relationship and who is the primary care physician, hospice physician, or physician responsible for the ongoing treatment of a qualifying student patient’s debilitating medical condition, provided; however, that the ongoing treatment shall not be limited to the provision of authorization for a qualifying student patient to use medical marijuana or consultation solely for that purpose.

7. “Primary caregiver” or “caregiver” means a resident of the State who:
 - a. Is at least eighteen years old;
 - b. Has agreed to assist with a registered qualifying student patient’s medical use of marijuana, is not currently serving as primary caregiver for another qualifying patient, and is not the qualifying student patient’s physician;
 - c. Has never been convicted of possession or sale of a controlled dangerous substance, unless such conviction occurred after the effective date [Oct. 1, 2010] of the Act and was for a violation of Federal law related to possession or sale of marijuana that is authorized under the Act;
 - d. Has registered with the Department of Health pursuant to N.J.S.A. 24:6I-4 and has satisfied the criminal history record background check requirement of N.J.S.A. 24:6I-4; and
 - e. Has been designated as primary caregiver on the qualifying student patient’s application or renewal for a Registry Identification Card or in other written notification to the Department of Health.
 8. “Qualifying student patient” means a resident of the State who is a student enrolled and attending school in this school district who has been provided with a certification by a physician pursuant to a bona fide physician-patient relationship and has been issued a Registry Identification Card by the New Jersey Department of Health for medical use of marijuana in accordance with the provisions of N.J.S.A. 18A:40-12.22 and N.J.S.A. 24:6I-4.
 9. “Qualifying patient” means a resident of the State who has been provided with a certification by a physician pursuant to a bona fide physician-patient relationship.
 10. “Registry Identification Card” means a document issued by the Department of Health that identifies a person as a registered qualifying student patient or primary caregiver.
- B. Registration – Qualifying Student Patient and Primary Caregiver**
1. A qualifying student patient must be authorized to engage in the medical use of marijuana and the primary caregiver must be authorized to assist the qualifying student patient with the medical use of marijuana pursuant to the provisions of N.J.S.A. 24:6I-1 et seq.

2. A qualifying student patient and their primary caregiver must complete the registration process in accordance with the provisions of N.J.S.A. 24:6I-4 and any other requirements of the New Jersey Department of Health.
3. The qualifying student patient's parent shall be responsible to immediately inform the Principal of any change in the status of the student's Registry Identification Card that would deem the Registry Identification Card null and void due to any reason outlined in N.J.S.A. 24:6I-4e or for any other reason.
4. The qualifying student patient's primary caregiver shall be responsible to immediately inform the Principal of any change in the status of any primary caregiver's Registry Identification Card that would deem the Registry Identification Card null and void due to any reason outlined in N.J.S.A. 24:6I-4e or for any other reason.

C. Submission for Authorization for Administration of Medical Marijuana

1. A parent of a qualifying student patient requesting the administration of medical marijuana to the student while on school grounds, aboard a school bus, or attending a school-sponsored event must submit a written request to the Principal with a copy of a current New Jersey Department of Health Registry Identification Cards for the qualifying student patient and the primary caregiver and a copy of the physician's order or prescription indicating dosage information and the method of administration for the medical marijuana to the qualifying student patient while on school grounds, aboard a school bus, or attending a school-sponsored event.

The Principal may request the parent provide additional documentation from the physician that the medical marijuana must be administered during the time of the day when the student is on school grounds, aboard a school bus, or attending a school-sponsored event and the medical marijuana cannot be administered and/or will not be effective during alternate times when the student is not on school grounds, aboard a school bus, or attending a school-sponsored event.

- a. The parent's written request and all supporting documentation must be submitted to the Principal at least five school days before the first day of the requested administration.
2. The Principal shall review the submitted Registry Identification Cards and supporting documentation with the school physician, the school nurse, and the Superintendent of Schools.

3. Upon review and approval of the documentation submitted by the parent, the Principal will inform the parent or primary caregiver, if the parent is not the primary caregiver, in writing with the following information:
 - a. The location (school, office, etc.) where the primary caregiver shall report to administer the medical marijuana;
 - b. The school staff member(s) who the primary caregiver must see to coordinate the administration of medical marijuana;
 - c. The time the primary caregiver shall report to administer the medical marijuana;
 - d. The specific location where the medical marijuana shall be administered to the student; and
 - e. A copy of Policy and Regulation 5330.01 – Administration of Medical Marijuana.
4. In the event the Principal, after consultation with the school nurse, school physician, and Superintendent, has a question or concern regarding the Registry Identification Cards or supporting documentation submitted by the parent, the Principal or school physician will contact the parent with the question or concern.
5. The administration of medical marijuana on school grounds, aboard a school bus, or at a school-sponsored event, pursuant to N.J.S.A. 18A:40-12.22, will only be authorized after the approval required by Policy and Regulation 5330.01.

D. Administration of Medical Marijuana

1. The medical marijuana shall only be administered by the primary caregiver and at the approved location, times, and method as indicated in the parent's request that was approved in writing by the Principal.
2. In accordance with the provisions of N.J.S.A. 18A:40-12.22.b.(5), medical marijuana cannot be administered to a qualifying student patient while on school grounds, aboard a school bus, or attending a school-sponsored event by smoking or other form of inhalation.
3. The prescribed medical marijuana must always be in the possession of the primary caregiver and may not be in the possession of the qualifying student patient at any time on school grounds, aboard a school bus, or at a school-sponsored event.

4. The Principal, after consultation with the school nurse, school physician, and the Superintendent, will determine a specific location for the administration of the medical marijuana to the qualifying student patient.
 - a. The Principal will designate a private area, if possible, for the primary caregiver to administer the medical marijuana to the qualifying student patient. The amount of privacy provided for the administration will depend on the approved method of administration and the designated location. The location may be a nurse's office, a private office, a private restroom facility, or any other location appropriate for the approved method of administration.
5. The primary caregiver shall report to the approved location prior to the scheduled time for the administration of medical marijuana to the qualifying student patient. The primary caregiver must show the Registry Identification Card and a second form of identification which shall be a photograph identification.
6. The Principal or supervising school staff member of a school-sponsored event may designate a school staff member to escort the primary caregiver to the qualifying student patient at the designated time to the designated location for the administration.
7. The Principal may designate a school staff member to observe the administration of the medical marijuana on school grounds, aboard a school bus, or at a school-sponsored event.
8. The primary caregiver shall assist in the administration of medical marijuana to the qualifying student patient in accordance with the method and dosage prescribed by the physician and included in the parent's request to the Principal.
9. The qualifying student patient shall return to his/her class or event as soon as possible after the administration.
10. The primary caregiver will be escorted outside the school building, away from the school bus, or away from the school-sponsored event, if applicable, by a school staff member after the administration.
 - a. The qualifying student patient and/or primary caregiver may be asked to remain at the location of the administration by the school staff member in the event the student needs some additional time after the administration and before returning to their class or event.
11. The primary caregiver shall be responsible for the security of the medical marijuana on school grounds, aboard a school bus, or at a school-sponsored event before, during, and

after the administration. At no time shall the qualifying student patient have the medical marijuana in their possession except during the administration process by the primary caregiver.

Issued:

R 9270 HOME SCHOOLING AND EQUIVALENT EDUCATION (M)**M**

[See POLICY ALERT No. 141, 149 and 196]

Home schooling is an educational program provided at home, usually by the parent, legal guardian, or other person having custody and control of the child. Children are taught using their own curriculum or published home school curriculum. The Board of Education recognizes that home schooling is an option under the compulsory education law.

For the purpose of this Regulation, “parent” shall mean parent, legal guardian, and other person having custody and control of a child between the ages of six and sixteen.

A. Legal Requirement for Compulsory Attendance

1. N.J.S.A. 18A:38-25 requires all children between the ages of six to sixteen years to attend the public schools or a day school in which there is given instruction equivalent to that provided in the public school for children of similar grades and attainments or to receive equivalent instruction elsewhere other than school.
2. The parent of a child that is home schooled is responsible to ensure their child receives instruction equivalent to that provided in the public school for children of similar grades and attainments or to receive equivalent instruction elsewhere other than school.
3. In the event the Superintendent determines there is credible evidence the parent, legal guardian, or other person having custody and control of a school-aged child is not causing the child to receive equivalent instruction elsewhere than at school, the Superintendent may request a letter of intent from the parent, legal guardian, or other person confirming the child is receiving equivalent instruction elsewhere than at school.
4. If the Superintendent makes a report, the parent of a student receiving instruction elsewhere other than school may, but is not required to, notify the Superintendent of their child’s educational program status.

5. A parent of a home schooled child is not required to seek approval from the district or to submit materials to the Superintendent in order to permit it to make a determination as to the equivalency of the instruction.
 6. The New Jersey Department of Education encourages a parent to notify the Superintendent of the intent to educate the child elsewhere than at school to avoid questions with respect to compliance with the compulsory education laws.
- B. Truancy/Violations of Compelling Attendance
1. When a Superintendent and Board believe a person is not complying with the compulsory education law (N.J.S.A. 18A:38-25 et seq.) they must initiate truancy proceedings in municipal court where a parent may be found guilty of a disorderly persons offense and fined in accordance with N.J.S.A. 18A:38-27 and N.J.S.A. 18A:38-31.
 2. If the parent is challenged in court by the Superintendent or Board, the district must demonstrate the child is not receiving an education in accordance with N.J.S.A. 18A:38-25.
- C. District Requirements for Home Schooled Students
1. The Board is not required by law to allow a child educated elsewhere than at school to participate in the regular school curriculum or in extra-curricular or sports activities unless specifically provided in Board Policy, or required by Federal law, or State statute or administrative code. **School-age residents are welcome to participate in extracurricular activities outside of school hours for which they qualify.**
 2. A child educated at home shall not receive a State endorsed high school diploma from the Board of Education.
- D. Students With Disabilities
1. Any written request from a parent of a home schooled child for a special education evaluation of their child will be reviewed in a meeting of the Child Study Team (CST), the parent, and the regular education teacher in accordance with the provisions of N.J.A.C. 6A:14-2.3. At this meeting, the current

information about the child shall be reviewed to determine whether an evaluation is warranted.

- a. If an evaluation is warranted, another determination shall be made regarding the assessment procedures. Written notice of the determinations shall be provided to the parent. Once the assessments are completed, a meeting in accordance with N.J.A.C. 6A:14-2.3 shall be held to determine whether the child is eligible for special education and related services.
- b. If the child is eligible for special education and related services, the CST will determine a classification category and develop an Individualized Education Program (IEP) in accordance with N.J.A.C. 6A:14-3.7. If the child is eligible for special education and related services, the district shall make a free, appropriate public education available only if the child enrolls in the district.
- c. The school district will notify the parent of a classified child who is being educated at home to offer services as required by law. The documentation of this notice will be maintained in the child's record file.
- d. Any determination by the school district CST regarding the provision of a special education program to a classified child who is being educated at home may be challenged by the parent in accordance with the provisions of N.J.A.C. 6A:14 et seq.

[Required for school districts that send to a shared-time County Vocational School District

E. Shared-Time Vocational School District

Home schooled children are permitted to enroll in shared-time vocational programs, and once enrolled they become public school students and are entitled to payment of tuition and eligible for transportation.]

New Jersey Department of Education – Frequently Asked Questions: Home Schooling

Issued:

REGULATION GUIDE

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COMMUNITY

R 9270 HOME SCHOOLING AND EQUIVALENT EDUCATION (M)