

Students/Personnel-Certified

Psychotropic Drug Use

School personnel shall not recommend the use of psychotropic medications for any student enrolled in the school system, nor shall the use of psychotropic medications be required as a condition of school attendance for any child.

Psychotropic drugs are defined as prescription medications for behavioral or social-emotional concerns, such as attentional deficits, impulsivity, anxiety, depression and thought disorders and includes, but is not limited to stimulant medications and anti-depressants.

However, school health or mental health personnel, including school nurses or nurse practitioners, the District's Medical Advisor, school psychologists, school social workers, school counselors and the District's Director of Special Services/Special Education may recommend that a student be evaluated by an appropriate medical practitioner.

The District shall follow procedures for identification, evaluation, placement and delivery of services to children with disabilities or suspected disabilities provided in state and federal statutes that govern special education.

“Nothing in this policy shall be construed to prohibit a Planning and Placement Team (PPT), Section 504 Multidisciplinary Team, or other child study team from discussing with parents and/or guardians of the child the appropriateness of consultation with, or evaluation by, medical practitioners with the consent of the parents and/or guardians of a child. The PPT or Section 504 team may recommend a medical evaluation as part of an initial evaluation or reevaluation to determine a child's eligibility for special education, related services, accommodations, or an appropriate educational program for a child. If a child is taking psychotropic medications or the family is considering use of such medications, school personnel may, with the consent of the student's parent or guardian obtained in writing, consult with the child's medical practitioner regarding such use.”

For purposes of this policy, “psychotropic drugs” means prescription medications for behavioral or social-emotional concerns, such as attentional deficits, impulsivity, anxiety, depression and thought disorders, and includes, but is not limited to, stimulant medication and antidepressants.

In order to promote understanding and appropriate communication regarding a recommendation for a medical evaluation, the following procedure is established by the Board:

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Psychotropic Drug Use (continued)

1. Only a member of the school health or mental health staff (school nurses, nurse practitioners, school social workers, school psychologists, school counselors, or the District's Medical Advisor, may initiate a recommendation for a medical evaluation. In the event that a member of the school staff who is not a member of the school health or mental health staff (i.e., teacher, administrator, or other staff) has a concern that a student may be in need of a medical evaluation, the staff member will refer this concern to an appropriate member of the school health or mental health staff for further action.
2. A member of the school health staff (school nurse, nurse practitioner, or district medical advisor) who is responsible for maintaining a child's school health record and who requires a medical evaluation or information in order to ensure that the student is in compliance with state laws and regulations for compulsory school attendance may speak directly with the parent or guardian regarding the need for such medical evaluations or information. All such contacts with the parent or guardian shall be recorded in the school health record in accordance with the normal procedures of the school health staff. School health staff shall also maintain a record of the parent or guardian's response to the request, any follow-up required, whether the information is obtained by the school health staff, and what information is obtained. If there is a request from the school health personnel to be able to communicate directly with the medical practitioner who will be performing the evaluation or supplying further information, the school health personnel will obtain written consent from the parent or guardian for such communication.
3. In the event that school health or mental health staff has a concern regarding a student's potential need for a medical evaluation for purposes other than maintaining the student's school health record, the school health or mental health staff will notify the appropriate school administrator and will request a meeting of the appropriate child study team (Planning and Placement Team, Section 504 Team, Multi-disciplinary Team, Child Study Team) to review the concern with the parent or guardian. The recommendation of the school health or mental health staff for a medical evaluation shall be recorded in the minutes of the meeting in accordance with normal meeting procedures. The Child Study Team shall also maintain a record of the parent or guardian's response to the request, any follow-up required, whether the requested information is obtained by the team, and what information is obtained. If there is a request from the Child Study Team for school health or mental health personnel to be able to communicate directly with the medical practitioner who will be performing the evaluation or supplying further information, the Child Study Team will obtain written consent from the parent or guardian for such communication.

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Psychotropic Drug Use (continued)

4. If a student is taking psychotropic medication or the family is considering the use of psychotropic medication and the school health or mental health staff desires to communicate with the medical practitioner (or vice versa) concerning such use or possible use, written consent will be obtained from the parent or guardian prior to initiating any such communication. Parents, guardians, and school staff who wish to initiate such communication between the medical practitioner and school staff will be directed to the appropriate school health or school mental health personnel to obtain consent and conduct the requested communication. Records will be maintained of all such communications with the medical practitioner, including the date and time of the contact and a brief summary of the information exchanged.

The Board recognizes that the refusal of a parent or other person having control of a child to administer or consent to the administration of any psychotropic drug to the child shall not, in and of itself, constitute grounds for the Department of Children and Families (DCF) to take such child into custody or for any court of competent jurisdiction to order that such child be taken into custody by the Department, unless such refusal causes such child to be neglected or abused, as defined in C.G.S. 46b-120.

The Superintendent of Schools or his/her designee shall promulgate this policy to district staff and parents/guardians of students annually and upon the registration of new students.

(cf. 5141.4 - Reporting of Child Abuse and Neglect)

Legal Reference: Connecticut General Statutes
10-212b Policies prohibiting the recommendation of psychotropic drugs by school personnel. (as amended by PA 03-211)
46b-120. Definitions
10-76a Definitions. (as amended by PA 00-48)
10-76b State supervision of special education programs and services.
10-76d Duties and powers of boards of education to provide special education programs and services. (as amended by PA 97-114 and PA 00-48)
10-76h Special education hearing and review procedure. Mediation of disputes. (as amended by PA 00-48)
State Board of Education Regulations.
34 C.F.R. 3000 Assistance to States for Education for Handicapped Children.
American with Disabilities Act, 42 U.S.C. §12101 et seq.
Individuals with Disabilities Education Act, 20 U.S.C. §1400 et seq.
Rehabilitation Act of 1973, Section 504, 29 U.S.C. § 794.

Policy adopted: April 7, 2004

ANSONIA PUBLIC SCHOOLS
Ansonia, Connecticut

5141.231(a)
4118.234

Students/Personnel - Certified

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In order to properly implement the Board policy prohibiting school personnel from recommending the use of psychotropic drugs for any child, the following administrative regulations are hereby established:

1. Psychotropic drugs are defined as prescription medications for behavioral or social-emotional concerns, such as attention deficits, impulsivity, anxiety, depression and thought disorders.
2. Psychotropic drugs include, but are not limited to, Ritalin, Adderal, Dexedrine and other stimulant medication, and anti-depressants.
3. All school personnel, including teachers and administrators are prohibited from any communications, both oral and written, to the parents and/or guardians of a child in which the use of psychotropic drugs is recommended.
4. School health or mental health personnel which includes school nurses or nurse practitioners, the District Medical Advisor, school psychologists, school social workers, and school counselors is permitted to discuss with parents and/or guardians of a child the advisability of a medical evaluation by an appropriate medical practitioner when there are behaviors or concerns that may be indicative of medication considerations.
5. School personnel, through the Planning and Placement Team referral process, shall communicate to the school medical staff about a child's behavior that may indicate the need for an evaluation.
6. The Planning and Placement Team (PPT) has the authority and responsibility to recommend a medical evaluation as part of an initial evaluation or reevaluation as needed to determine a child's eligibility for special education and related services, or educational needs for a child's individualized education program (IEP).
7. As required, the District may seek remedy through the due process provisions allowed under the Individuals with Disabilities Educational Act (IDEA) if a parent and/or guardian refuses consent for a reevaluation.

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8. Appropriate medical practitioners, such as a psychiatric consultant or physician, with whom the District contracts for services to students or to whom the District makes a referral for an evaluation may recommend such medications.
9. School personnel may consult with the medical practitioner performing the evaluation with the informed consent of the parent or guardian of the child. The purposes of such communication include the following:
 - a. Conveying concerns or observations of a child, both prior to and following a medical evaluation;
 - b. Requesting health records and other educationally relevant medical evaluations;
 - c. Providing school records to medical practitioners upon request;
 - d. Providing information on school performance to help a medical practitioner monitor and evaluate the effectiveness of psychotropic drugs and/or other medical interventions and/or treatment;
 - e. Discussing with medical practitioners appropriate and necessary nursing or health care in schools to ensure student safety;
 - f. Disclosure of educationally relevant information by the medical practitioner to school personnel.
10. The Department of Children and Families (DCF) is limited by this legislation to take a child into custody solely on the refusal of a parent or guardian to administer or consent to the administration of any psychotropic drug. However, a PPT meeting may be convened if the child is eligible or may be eligible for special education or making a referral to the Department of Children and Families if there are concerns about a child's safety and possible abuse or neglect.

(cf. 5141.4 - Reporting of Child Abuse and Neglect)