

# **SUBSTANCE ABUSE REGULATIONS AND GUIDELINES**

# **iLearn Schools SUBSTANCE ABUSE Regulation**

## **A. Medical Emergency**

Whenever the referred student appears to be in a state of a medical emergency or otherwise medically compromised, the following procedures shall govern:

### **1. Administrator/Person in Charge**

- a. The student shall not be left alone at any time.
- b. Emergency services shall be immediately contacted through 911.
- c. The student's parent(s) or legal guardian(s) shall be immediately contacted and informed that the student has been reported as suspected of being under the influence of alcohol or other drugs and that he/she may be in a state of medical emergency.
- d. The Lead Person shall be immediately contacted and informed of the situation.
- e. If student is classified, the Child Study team or the head of the special education department shall be contacted.
- f. The student should be transported to the emergency room of the nearest hospital via ambulance.
  - (1) The child will be sent to the closest hospital.
  - (2) A staff member should remain with the student at the hospital until a parent(s) or legal guardian(s) arrives at the hospital if a school nurse or other school medical staff member is not available.

### **2. School Nurse**

- a. The student shall not be left alone at any time.

- b. The initial observation and physical assessment should be completed and all findings documented. At least two copies of all documents should be made.
- c. The school nurse or other staff member shall accompany the student to the hospital and shall remain there until the parent(s) or legal guardian(s) of the student arrives. A copy of the student's emergency card should be brought to the hospital, as well as any required forms and paperwork.

#### B. Non-Medical Emergency

##### 1. Parent(s) or legal guardian(s) Immediately Available

Whenever there is no indication that the referred student is in a state of medical emergency or otherwise medically compromised the following procedures shall govern provided the administrator is able to contact the student's parent(s) or legal guardian(s) within two hours of the initial referral of the student and the student's parent(s) or legal guardian(s) is able to arrive at the student's school in sufficient time to ensure that the student will be medically examined within two hours of the initial referral of the student.

##### 2. Administration/Person in Charge

- a. The student shall not be left alone.
- b. The student's parent(s) or legal guardian(s) shall be immediately contacted and informed that:
  - (1) The student has been reported as suspected of being under the influence of alcohol or other drugs;
  - (2) The parent(s) or legal guardian(s) has an obligation to have the student immediately medically examined for the purpose of determining whether or not the student is in fact under the influence of alcohol or other drugs and that such examination must include a chemical screen; and;

- (3) The medical examination and chemical screen may be performed by either a physician selected by the parent(s) or legal guardian(s) or at the nearest hospital.

- c. The Lead Person shall be immediately contacted and informed of the situation.
- d. If student is classified, the Child Study Team or the head of the special education department shall be contacted.
- e. If the school nurse is available, verify that the nursing assessment has been completed.
- f. The parent(s) or legal guardian(s) shall be responsible for transporting the student to the location where the medical examination will be performed, regardless of whether it is to be performed by a private physician or at the nearest hospital.
- g. If the parent(s) or legal guardian(s) has elected to have the medical examination performed by a private physician who is immediately available, the parent(s) or legal guardian(s) shall be given a copy of the physician's report. If such physician is not available to complete the medical examination within two hours of the initial referral of the student, then the parent(s) or legal guardian(s) will be instructed to have the student medically examined by another physician who is available to perform the medical examination within two hours. The parent(s)' or legal guardian(s)' refusal to submit and/or failure to comply with the required medical examination within the two-hour window will result in a violation of the Board's Substance Abuse Policy and shall be considered in violation of the child neglect laws pursuant to N.J.S.A. 9:6-1 et seq.

### 3. School Nurse

- a. The student shall not be left alone at any time.
- b. The physical assessment should be completed and all findings documented. At least two copies of all documents should be made.



- c. If the parent(s) or legal guardian(s) has elected to have the medical examination performed by a private physician who is immediately available, the parent(s) or legal guardian(s) shall be given a copy of the physician's report. If such physician is not available to complete the medical examination within two hours of the initial referral of the student, then the parent(s) or legal guardian(s) will be instructed to have the student medically examined by another physician who is available to perform the medical examination within two hours. The parent(s)' or legal guardian(s)' refusal to submit and/or failure to comply with the required medical examination within the two-hour window will result in a violation of the Board's Substance Abuse Policy and shall be considered in violation of the child neglect laws pursuant to N.J.S.A. 9:6-1 et seq.
- d. A staff member shall accompany the student to the hospital and shall remain there until the parent(s) or legal guardian(s) of the student arrives. A copy of the student's emergency card should be brought to the hospital, as well as any required forms and paperwork.

#### 4. Parent(s) or legal guardian(s) Not Immediately Available

Whenever there is no indication that the referred student is in a state of medical emergency or otherwise medically compromised, the following procedures shall govern, provided the administrator is able to contact the student's parent(s) or legal guardian(s) within two (2) hours of the initial referral of the student and the student's parent(s) or legal guardian(s) is not able to arrive at school in sufficient time to ensure that the student will be medically examined within two hours of the initial referral of the student.

#### 5. Administration /Person in Charge

- a. The student shall not be left alone at any time.
- b. The administrator shall attempt to contact the student's parent(s) or legal guardian(s) for two hours.
- c. The Lead Person shall be immediately contacted and informed of the situation.

- d. If student is classified, the Child Study Team or the head of the special education department shall be contacted.
- e. Student will remain under the School Nurse's supervision until his/her parent/guardian arrives.

#### 6. School Nurse

- a. The student shall not be left alone at any time.
- b. The physical assessment should be completed and all findings documented. At least two copies of all documents should be made.
- c. Student will remain under the School Nurse's supervision until his/her parent/guardian arrives.

The purpose of the above procedures is to ensure the health and safety of the referred student and the school community and to determine whether or not the student is in fact under the influence of alcohol or other drugs.

#### Students with Disabilities

For a student with a disability, discipline according to the student code of conduct shall be implemented according to the student's Individualized Education Program or Section 504 accommodation plan, in accordance with N.J.A.C. 6A:14-2.8 and 20 U.S.C. §1415(k).

In the case of removal for drug offenses, the school shall provide services to a student with a disability consistent with 20 U.S.C. § 1415(k) and its implementing regulations at 34 C.F.R. §§ 300.1 et seq. However, the period of removal to an interim alternative educational setting shall not be for a period of more than 45 calendar days.

#### Handling of Alcohol or Other Drugs

1. A student's person, effects, including vehicles parked on school grounds or school storage places may be searched for substances in accordance with Policy No. 5770 and applicable laws regarding searches in school.

2. A school employee who seizes or discovers a substance, or an item believed to be a substance or drug paraphernalia, shall immediately notify and turn it over to the School Director or designee.
  - a. The School Director or designee shall immediately notify the Lead Person or designee who in turn shall notify the County Prosecutor or other law enforcement official designated by the County Prosecutor to receive such information.
  - b. In accordance with the provisions of N.J.A.C. 6A:16-6.4(a), the school employee, School Director, or designee shall safeguard the alcohol, other drug, or paraphernalia against further use or destruction and shall secure the alcohol, other drug, or paraphernalia until it can be turned over to the County Prosecutor or designee.
  - c. The School Director or designee shall provide to the County Prosecutor or designee all information concerning the manner in which the alcohol, other drug, or paraphernalia was discovered or seized, including;
    - (1) The identity of all persons who had custody of the substance or paraphernalia following its discovery or seizure; and
    - (2) The identity of the student believed to have been in possession of the substance or paraphernalia
  - d. The School Director or designee shall not disclose the identity of a student who voluntarily and on his or her own initiative turned over the alcohol, other drug, or paraphernalia to a school employee, provided there is reason to believe the student was involved with the alcohol, other drug, or paraphernalia for the purpose of personal use and not distribution activities, and further provided the student agrees to participate in an appropriate treatment or counseling program.
    - (1) For the purposes of N.J.A.C. 6A:16-6.4, an admission by a student in response to questioning initiated by the School Director or teaching staff member, or following the discovery by the School Director or teaching staff member of a controlled dangerous substance, including anabolic steroids, or drug paraphernalia shall not constitute a voluntary, self-initiated request for counseling and treatment.

#### Reporting Students to Law Enforcement Agencies



1. Any staff member who, in the course of his or her employment, has reason to believe that a student has unlawfully possessed or in any way been involved in the distribution of a controlled dangerous substance, including anabolic steroids, or drug paraphernalia shall report the matter as soon as possible to the School Director or, in the absence of the School Director, to the staff member responsible at the time of the alleged violation. This reporting obligation does not include information concerning a student's involvement in a school intervention or treatment program for alcohol or other drug abuse, which shall be kept strictly confidential, according to N.J.A.C. 6A:16-6.5.
2. Either the School Director or the responsible staff member shall notify the Lead Person, who in turn shall notify as soon as possible the County Prosecutor or other law enforcement official designated by the County Prosecutor to receive such information.
3. The Lead Person or designee shall provide to the County Prosecutor or designee all known information concerning the matter, including the identity of the student involved.
4. The Lead Person or designee shall not disclose the identity of a student who has voluntarily sought and participated in an appropriate treatment or counseling program for an alcohol or other drug abuse problem, provided the student is not reasonably believed to be involved or implicated in drug-distribution activities.
5. For the purpose of N.J.A.C. 6A:16-6.3, an admission by a student in response to questioning initiated by the School Director or teaching staff member, or following the discovery by the School Director or teaching staff member of a controlled dangerous substance, including anabolic steroids, or drug paraphernalia, shall not constitute a voluntary, self-initiated request for counseling and treatment.
6. The Lead Person or designee may disclose to law enforcement authorities the identity of a student suspected to be under the influence of alcohol and/or controlled dangerous substances, pursuant to N.J.A.C. 6A:16-4.3(a), or a student suspected to have used or who may be using anabolic steroids, pursuant to N.J.A.C. 6A:16-4.3(b), and who is referred for a medical examination, pursuant to N.J.A.C. 6A:16-4.3(a) or (b), as appropriate, for the purposes of providing appropriate health care for the student and for determining whether the student is under the influence of alcohol or other drugs or has been using anabolic steroids. The Lead Person or designee shall disclose to law enforcement authorities the identity of a student reasonably believed to be in possession of a controlled dangerous substance or related paraphernalia or a



student reasonably believed to be involved or implicated in distribution activities regarding controlled dangerous substances.

7. Law enforcement authorities shall not be notified of the findings if a student's alcohol or other drug test, pursuant to N.J.A.C. 6A:16-4.3(a)3i and N.J.A.C. 6A:16-4.3(b)3i and N.J.A.C. 6A:16-4.3(a)4, was obtained as result of the Board of Trustees' voluntary random drug testing policy, pursuant to N.J.S.A. 18A:40A-22 et seq. and N.J.A.C. 6A:16-4.4.

#### Parent Training Program/Outreach Program

1. The Board of Trustees will establish an outreach program to provide substance abuse education for the parents of students in the school . In establishing the program, the Board shall consult with such local organizations and agencies as are recommended by the Commissioner of Education. The Board shall ensure the program is offered at times and places convenient to parents on school premises or at other suitable facilities.
  - a. In addition to the substance abuse education program required pursuant to N.J.S.A. 18A:40A-17, the Board shall provide assistance to parents who believe that their child may be involved in substance abuse.

#### Records and Confidentiality of Records

1. Notations concerning a student's involvement with substances may be entered on his/her records, subject to N.J.A.C. 6A:32-7.1 et seq. and Policy No. 8330.
2. Information concerning a student's involvement in a school intervention or treatment program for alcohol or other drug abuse shall be kept strictly confidential according to 42 CFR Part 2, N.J.S.A. 18A:40A-7.1 and 7.2, and N.J.A.C. 6A:16-3.2.
3. If student involved in a school-based drug and alcohol counseling program provides information during the course of a counseling session which indicates the student's parent or other person residing in the student's household is dependent upon or illegally using substances, that information shall be kept strictly confidential pursuant to N.J.S.A. 18A:40A-7.1 and 7.2, and may be disclosed only under the circumstances expressly authorized as follows:

- a. Subject to the student's written consent, to another person or entity whom the student specifies in writing in the case of a secondary student, or to a member of the student's immediate family or the appropriate school personnel in the case of an elementary student;
- b. Pursuant to a court order;
- c. To a person engaged in a bona fide research purpose; except that no names or other information identifying the student or the person with respect to whose substance abuse the information was provided, shall be made available to the researcher; or
- d. To the Division of Child Protection and Permanency (DCP&P) or to a law enforcement agency, if the information would cause a person to reasonably suspect that the student or another child may be an abused or neglected child in accordance with statute or administrative code.

Any disclosure made pursuant to 3a. and b. above shall be limited to that information which is necessary to carry out the purpose of the disclosure, and the person or entity to whom the information is disclosed shall be prohibited from making any further disclosure of that information without the parent, guardian, or adult student's written consent. The disclosure must be accompanied by a written statement from the Lead Person or designee advising the recipient that the information is being disclosed from the records the confidentiality of which is protected by N.J.S.A. 18A:40A-7.1 et seq. and that this law prohibits any further disclosure of this information without the written consent of the person from whom the information originated.

Nothing in this Regulation or Policy 5530 prevents the DCP & P or a law enforcement agency from using or disclosing the information in the course of conducting an investigation or prosecution. Nothing in this Regulation or Policy 5530 shall be construed as authorizing the violation of any Federal law.

The prohibition on the disclosure of information provided by a student shall apply whether the person to whom the information was provided believes that the person seeking the information already has it, has other means of obtaining it, is a law enforcement or other public official, has obtained a subpoena, or asserts any other justification for the disclosure of this information.

A person who discloses or willfully permits the disclosure of information provided by a student in violation of this Regulation is subject to fines, in accordance with N.J.S.A. 18A:40A-7.2.

Each incident of student substance abuse shall be reported to the New Jersey Commissioner of Education on Student Safety Data System (SSDS).

## Appendix 6D

**REFERRAL FORM:** To be conducted as soon as possible after the student's assessment.

**Purpose:** To obtain a summary of the student's behavior that led the staff member to refer the student.

Time: \_\_\_\_\_ Date: \_\_\_\_\_

Name of person filling out referral interview: \_\_\_\_\_

Position: \_\_\_\_\_

What initially attracted your attention to this student? Be specific:

\_\_\_\_\_

Where were you when you observed this student? (In classroom, classroom doorway, hallway, stairwell) \_\_\_\_\_

Where was the student when you noticed him/her? \_\_\_\_\_

How was the student dressed? \_\_\_\_\_

Was the student carrying anything? \_\_\_\_\_

If with other students, list names or give descriptions: \_\_\_\_\_

\_\_\_\_\_

Did you observe the student eating, drinking, inhaling any substance or smoking? \_\_\_\_\_

Was the student operating any machinery, equipment, and or tools? (lab materials, computer equipment, AV equipment, etc.) \_\_\_\_\_

What actions did you observe? \_\_\_\_\_

\_\_\_\_\_

Was there an incident or accident? \_\_\_\_\_

Was there a traffic crash? \_\_\_\_\_

Were there any injuries? \_\_\_\_\_

What did you initially say to the student? \_\_\_\_\_



What was the student's response? (note verbal as well as gestures) \_\_\_\_\_

\_\_\_\_\_

Did the student attempt to throw away or conceal any items or materials? \_\_\_\_\_

What is your opinion of the student's attitude and demeanor during the interaction with you? \_\_\_\_\_

\_\_\_\_\_

Did the student complain of illness or injury? \_\_\_\_\_

\_\_\_\_\_

Did the student use any "street terms" or slang associated with drugs or drug paraphernalia? \_\_\_\_\_

\_\_\_\_\_

How did the student respond to your inquiries? Be specific. \_\_\_\_\_

\_\_\_\_\_

Other pertinent information:

# STUDENT- SUBSTANCE SCREENING TOOL

## STUDENT INFO

Date:	Time:	Evaluator:	Student:	Grade:	
Date/Time:	Location:			Age:	

## Interview

Health Concerns?	Medications? Supplements?	What have you eaten today?	What have you had to drink today? (Coffee, energy drinks?)
Allergies?	Are you sick?	Bedtime?	Oriented to Time/place

## Observations

Attitude	Coordination	Clothes	Eyes	Face	Breath Odor	Speech
<input type="checkbox"/> Cooperative <input type="checkbox"/> Anxious <input type="checkbox"/> Arguing <input type="checkbox"/> Slow/Dazed <input type="checkbox"/> Irritable <input type="checkbox"/> Defiant <input type="checkbox"/> Depressed <input type="checkbox"/> Delayed Response <input type="checkbox"/> Other:	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Other:	<input type="checkbox"/> Normal <input type="checkbox"/> Sloppy <input type="checkbox"/> Soiled <input type="checkbox"/> Bloody <input type="checkbox"/> Vomit <input type="checkbox"/> Urine <input type="checkbox"/> Other:	<input type="checkbox"/> Normal <input type="checkbox"/> Watery <input type="checkbox"/> Droopy <input type="checkbox"/> Bloodshot <u>Pupil</u> <u>Size</u> <input type="checkbox"/> Dilated (Large) <input type="checkbox"/> Constricted (Small) <input type="checkbox"/> Equal <input type="checkbox"/> Unequal	<input type="checkbox"/> Normal <input type="checkbox"/> Flushed <input type="checkbox"/> Pale <input type="checkbox"/> Injuries <input type="checkbox"/> Other:	<input type="checkbox"/> None <input type="checkbox"/> Tobacco <input type="checkbox"/> Cannabis <input type="checkbox"/> Chemical <input type="checkbox"/> Alcohol <input type="checkbox"/> Other:	<input type="checkbox"/> Normal <input type="checkbox"/> Fair <input type="checkbox"/> Repetitive <input type="checkbox"/> Talkative <input type="checkbox"/> Fast <input type="checkbox"/> Slurred <input type="checkbox"/> Slow <input type="checkbox"/> Incoherent <input type="checkbox"/> Other:

## Vital Signs/Clinical Signs

Pulse: _____ Pulse Ox: _____	Blood Pressure: _____/_____ Time: _____/_____	Temperature: _____
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## Eyes

<b>Pupil size</b> <u>Room light</u> <u>Constrict</u> _____ Yes No	<b>Resting Nystagmus</b> Yes No	<b>Able to Follow Stimulus</b> Yes No	<b>Lack of Convergence (able to hold crossed eyes)</b> Yes No
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## Finger to Nose

Pass Fail

## One Leg Stand

1 Sways 2 Uses Arms

3 Hops 4 Foot Down

Notes:



# STUDENT- SUBSTANCE SCREENING TOOL

STUDENT INFO						
Date: _____ Time: _____		Evaluator: _____		Student: _____		Grade: _____
Date/Time: _____		Location: _____				Age: _____
Interview						
Health Concerns?		Medications? Supplements?		What have you eaten today?		What have you had to drink today? (Coffee, energy drinks?)
Allergies?		Are you sick?		Bedtime?		Oriented to Time/place
Observations						
<b>Attitude</b> <input type="checkbox"/> Cooperative <input type="checkbox"/> Anxious <input type="checkbox"/> Arguing <input type="checkbox"/> Slow/Dazed <input type="checkbox"/> Irritable <input type="checkbox"/> Defiant <input type="checkbox"/> Depressed <input type="checkbox"/> Delayed Response <input type="checkbox"/> Other: _____	<b>Coordination</b> <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Other: _____	<b>Clothes</b> <input type="checkbox"/> Normal <input type="checkbox"/> Sloppy <input type="checkbox"/> Soiled <input type="checkbox"/> Bloody <input type="checkbox"/> Vomit <input type="checkbox"/> Urine <input type="checkbox"/> Other: _____	<b>Eyes</b> <input type="checkbox"/> Normal <input type="checkbox"/> Watery <input type="checkbox"/> Droopy <input type="checkbox"/> Bloodshot <b>Pupil</b> <b>Size</b> _____ <input type="checkbox"/> Dilated (Large) <input type="checkbox"/> Constricted (Small) <input type="checkbox"/> Equal <input type="checkbox"/> Unequal	<b>Face</b> <input type="checkbox"/> Normal <input type="checkbox"/> Flushed <input type="checkbox"/> Pale <input type="checkbox"/> Injuries <input type="checkbox"/> Other: _____	<b>Breath Odor</b> <input type="checkbox"/> None <input type="checkbox"/> Tobacco <input type="checkbox"/> Cannabis <input type="checkbox"/> Chemical <input type="checkbox"/> Alcohol <input type="checkbox"/> Other: _____ <input type="checkbox"/> Faint <input type="checkbox"/> Medium <input type="checkbox"/> Strong	<b>Speech</b> <input type="checkbox"/> Normal <input type="checkbox"/> Fair <input type="checkbox"/> Repetitive <input type="checkbox"/> Talkative <input type="checkbox"/> Fast <input type="checkbox"/> Slurred <input type="checkbox"/> Slow <input type="checkbox"/> Incoherent <input type="checkbox"/> Other: _____
Vital Signs/Clinical Signs						
Pulse: _____ Pulse Ox: _____		Blood Pressure: _____/_____ Time: _____/_____		Temperature: _____		
Eyes						
<b>Pupil size</b> <u>Room light</u> <u>Constrict</u> _____ Yes No		<b>Resting Nystagmus</b> Yes No		<b>Able to Follow Stimulus</b> Yes No		<b>Lack of Convergence</b> (able to hold crossed eyes) Yes No
<b>Finger to Nose</b> Pass Fail						<b>One Leg Stand</b> 1 Sways 2 Uses Arms 3 Hops 4 Foot Down
<b>Notes:</b> _____ _____ _____						