

Statement of Legislative Mandate and Purpose

This policy is a result of the legislative mandate and public policy embodied in the *School Safety and Bullying Prevention Act*, 70 Okla. Stat. § 24-100.24. The Oklahoma Legislature requires school districts to adopt a policy to address prevention of bullying behavior, in an effort to create an educational environment free of fear and unnecessary disruption, and also requires districts to actively pursue programs for communication, training and education, reporting, investigation, discipline, and remedial action to deter bullying behaviors.

The District's student conduct code prohibits bullying behavior. This Policy further explains the negative effects of that behavior, seeks to promote strategies for prevention and education, establishes procedures for District communication of bullying policy to students and parents; reporting alleged incidents; investigating alleged incidents of prohibited behavior; and establishes a post-investigation procedure that may include recommendations for community mental health care options and requests for disclosure of student mental health care information.

The District will implement this policy in an ongoing manner throughout the year and will integrate it with other violence prevention efforts.

Statement of Board Purpose in Adopting Policy

The Board of Education recognizes that bullying causes serious educational and personal problems, both for the student-target and the initiator. The Board observes that bullying conduct often involves expressive gestures, written or verbal expression, electronic communication or physical acts that are sexually suggestive, lewd, vulgar, profane or offensive to the education or social mission of the District, and at times involves the commission of criminal acts. This behavior interferes with the curriculum by disrupting the presentation of instruction and also disrupts and interferes with the student-target's or bystander's ability to concentrate, retain instruction and study or to operate free from the effects of harassment, intimidation, bullying and threatening behavior. This results in a reluctance or resistance to attend school.

Definition of Terms

1. Bullying:

"Bullying" means any pattern of harassment, intimidation, threatening behavior, physical acts, verbal or electronic communication directed toward a student or group of students that results in or is reasonably perceived as being done with the intent to cause negative educational or physical results for the targeted individual or group and is communicated in such a way as to disrupt or interfere with the school's educational mission or the education of any student.

2. Electronic Communication

"Electronic communication" means the communication of any written, verbal, pictorial information or video content by means of an electronic device, including, but not limited to, a telephone, a mobile or cellular telephone or other wireless telecommunication device, or a computer.



The District prohibits bullying by electronic communication, whether such communication originated at school or with school equipment, if the communication is specifically directed at students or school personnel and concerns bullying at school.

3. At School

"At school" means on school grounds, in school vehicles, at school-sponsored activities, or at school-sanctioned events.

4. Threatening Behavior

"Threatening behavior" means any pattern of behavior or isolated action, whether or not it is directed at another person, that a reasonable person would believe indicates potential for future harm to students, school personnel or school property.

5. The "Reasonable Person" Standard

In determining what a "reasonable person" should recognize as an act placing a student in "reasonable" fear of harm, staff will determine "reasonableness" not only from the point of view of a mature adult but also from the point of view of an immature child of the age of the intended target along with, but not limited to, consideration of special emotional, physical, or mental needs of the particular child; personality or physical characteristics, or history that might cause the child to be particularly sensitive to efforts by a bully to humiliate, embarrass, or lower the self-esteem of the target; and the discipline history, personality of and physical characteristics of the individual alleged to have engaged in the prohibited behavior.

6. General Display of Bullying Acts

According to experts in the field, bullying in general is the exploitation of a less powerful person by an individual taking unfair advantage of that person, which is repeated over time, and which inflicts a negative effect on the target. The seriousness of a bullying act depends on the harm inflicted upon the target and the frequency of the offensive acts. Power may be but is not limited to physical strength, social skill, verbal ability, or other characteristics. Bullying acts by students have been described in several different categories:

- Physical Bullying includes harm or threatened harm to another's body or property, including but not limited to, what would reasonably be foreseen as a serious expression of intent to inflict physical harm or property damage through verbal or written speech or gestures directed at the student-target, when considering the factual circumstances in which the threat was made and the reaction of the intended target. Common acts include tripping, hitting, pushing, pinching, pulling hair, kicking, biting, starting fights, daring others to fight, stealing or destroying property, extortion, assaults with a weapon, other violent acts, and homicide.
- **Emotional Bullying** includes the intentional infliction of harm to another's selfesteem, including but not limited to insulting or profane remarks, insulting or profane gestures, or harassing and frightening statements, when such events are considered in light of the surrounding facts, the history of the students involved, and age, maturity, and special characteristics of the students.
- Social Bullying includes harm to another's group acceptance, including but not limited to harm resulting from intentionally gossiping about another student or

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intentionally spreading negative rumors about another student that result in the target being excluded from a school activity or student group; the intentional planning and/or implementation of acts or statements that inflict public humiliation upon a student; the intentional undermining of current relationships of the target-student through the spreading of untrue gossip or rumors designed to humiliate or embarrass the student; the use of gossip, rumors or humiliating acts designed to deprive the student of awards, recognition, or involvement in school activities; the false or malicious spreading of an untrue statement or statements about another student that exposes the target to contempt or ridicule or deprives the target of the confidence and respect of student peers; or the making of false statements to others that the student has committed a crime, or has an infectious, contagious or loathsome disease, or similar egregious representations.

• Sexual Bullying includes harm to another resulting from, but not limited to, making unwelcome sexual comments about the student; making vulgar, profane, or lewd comments or drawings or graffiti about the target; directing vulgar, profane, or lewd gestures toward the target; committing physical acts of a sexual nature at school, including the fondling or touching or private parts of the target's body; participation in the gossiping or spreading of false rumors about the student's sexual life; written or verbal statements directed at the target that would reasonably be interpreted as a serious threat to force the target to commit sexual acts or to sexually assault the target when considering the factual circumstances in which the threat was made and the reaction of the intended target; off-campus dating violence by a student that adversely affects the target's school performance or behavior, attendance, participation in school functions or extracurricular activities, or makes the target fearful at school of the assaulting bully; or the commission of sexual assault, rape, or homicide. Such conduct may also constitute sexual harassment, which is also prohibited by the District.

Understanding and Preventing Student Bullying

- 1. Student, Parent and Staff Communication, Education and Training
 - All staff and volunteers will be provided with a copy of this Policy. All students will be provided an age appropriate version of the Policy. The District is committed to providing appropriate and relevant training to staff regarding identification of behavior constituting student bullying and the prevention and management of such conduct. Administrators and school employees are required to take or attend annual training the first year of employment and at a minimum every 5th year as developed and provided by the State Department of Education in preventing, identifying, responding to and reporting incidents of bullying.
 - Students and parents, like staff members, shall participate in an annual education program(s), designed and developed by the State Department of Education and/or the District, which sets out expectations for student behavior and emphasizes an understanding of student bullying; it's prevention, identification; and the District's response to and prohibition of such conduct, and the reasons why the conduct is

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destructive, unacceptable and will lead to discipline. Students shall also be informed of the possible consequences of bullying conduct toward their peers.

- Notice of the Bullying Prevention policy shall be posted at various locations within each school site, including but not limited to cafeterias, school bulletin boards, and administration offices.
- The Bullying Prevention policy shall be posted on the District's Internet website. Each school site's Internet website/page will have a link to the District policy.
- The Bullying Prevention policy shall be included in all student and employee handbooks.

2. The District's Safe School Committees

The District's Safe School Committees have the responsibility of studying and making recommendations to the Principal regarding unsafe conditions, strategies for students, faculty and staff to avoid physical and emotional harm at school, student victimization, crime prevention, school violence and other issues which interfere with and adversely affect the maintenance of safe schools.

With respect to student bullying, each Safe School Committee shall consider and make recommendations regarding professional staff development needs of faculty and other staff related to methods to decrease student bullying, and understanding and identifying bullying behaviors. In addition, each Committee shall make recommendations regarding: (1) identification of methods to encourage the involvement of the community and students in addressing conduct involving bullying; (2) methods to enhance relationships between students and school staff in order to strengthen communication; and (3) using problem-solving teams and resources that include counselors and other behavioral health resources within or outside the school system.

In accomplishing its objectives each Committee shall review the District policy for the prevention of bullying and the list of research-based programs appropriate for the prevention of bullying of students at school compiled by the State Department of Education. In addition, the Committee may review traditional and accepted bullying prevention programs utilized by other states, state agencies or school districts.

Reporting Acts or Suspected Acts of Bullying

Acts or suspected acts of bullying should be immediately reported to a school official such as the school Principal or Assistant Principal. Such reports may be made and submitted through the District's website or the school's website. A printed copy of the form may be requested and submitted in person or through the mail. If desired, reports may be submitted anonymously. Please note that anonymous reports, according to state law, cannot be the sole basis for disciplinary action for a student.

Student Reporting of Bullying
 Students are encouraged to tell school personnel if they are the target of or witness acts of bullying.



2. Staff Reporting of Bullying

An important duty of any School District employee is to report acts or behavior that the employee witnesses that appears to constitute bullying, or the employee has reliable information that would lead a reasonable person to suspect that a student or person is a target of bullying shall immediately report it to the Building Principal or designee of the Principal, or other school administrator. All employees shall encourage students who tell them about such acts to complete a report form. For young students, staff members given that information will need to provide direct assistance to the student to report the incident.

Staff members who witness such events must complete reports and submit them to the employee designated by the Principal to receive them.

Investigating and Responding to Alleged Incidents of Student Bullying

1. Responsibility for Policy Enforcement

The District's bullying coordinator is the Executive Director of Student Services, who will serve as the District contact responsible for providing information to the State Board of Education. The Bullying Coordinator shall maintain updated contact information on file with the State Department of Education and the District will notify the State Department of Education within fifteen (15) days of the appointment of a new Bullying Coordinator. Building Principals are responsible for enforcing this policy at their designated school sites.

2. Investigation, Determination, and Preventive Action

The Building Principal shall investigate all reported incidents of bullying or suspected bullying and make a determination regarding whether the conduct actually occurred or is occurring, and take prompt and effective action to address confirmed incidents and prevent their recurrence. This action may impose consequences which include discipline, referral to the school counselor, referral to community mental health care providers, student social skills training and other actions. Such consequences and remedial action may also be imposed for a student found to have falsely accused another as a means of retaliation, reprisal or as a means of bullying. In addition, principals will also determine the severity of confirmed incidents and assess their potential to result in future violence. Principals shall promptly report their findings to the district's bullying coordinator.

3. Parent Notification

The Building Principal or the Principal's designee shall make timely notification to the parents or guardians of a target of documented and verified bullying, and to the parents or guardians of the perpetrator of the documented and verified bullying.

4. Law Enforcement Notification

Building Principals shall report to law enforcement officials all documented and verified acts of bullying that they reasonably believe may constitute criminal activity or reasonably have the potential to endanger school safety. All such incidents must also be reported to the Deputy Superintendent.



5. Reporting Documented and Verified Incidents of Bullying Building Principals are responsible for tracking and reporting documented and verified incidents of bullying per established procedures.

Post-Investigation Recommendations

1. Reporting and Referral

At the conclusion of the investigation, the designated employee will document the steps taken to review the matter, the conclusions reached and any additional action taken, if applicable. Further, the investigator will notify the district's bullying coordinator that an investigation has occurred and the results of the investigation. In the event the investigation reveals that bullying occurred, the district's bullying coordinator will refer the student who committed the act of bullying to a delinquency prevention and diversion program through the Office of Juvenile Affairs.

2. Community Mental Health Care Options

When designated school personnel confirm an incident of student bullying, they may also determine that it is appropriate to recommend counseling or referral to appropriate services, including guidance, academic intervention, and other protection for all students and family members affected by bullying, and that the students and parents take advantage of available community mental health care, substance abuse or other counseling options in an effort to provide additional student assistance and prevent the recurrence of further incidents. If so, designated school personnel will advise the parent in writing of such options available in the community and surrounding area.

3. Disclosure of Student Community Mental Health Care Information

Pursuant to the requirements of state law, the District may request the disclosure of any information concerning students who have received mental health, substance abuse, or other care for an incident that indicates an explicit threat to the safety of students or school personnel. The District will make any request for disclosure in compliance with applicable state and federal laws and regulations.

Student Transfers

Students who are targets of bullying, and who report the incident(s) to school administrators, may choose to apply for transfer to another school district. Any application for transfer must be made in accordance with the receiving school district's transfer policy.

Parental Responsibilities

Parents/guardians will receive an annual written notice of the District's policy and program(s) to address and prevent bullying. Parents will be informed of the program(s) and the means for students to report bullying acts toward them or other students. An administrative response to a reported and/or confirmed act of bullying may involve certain actions to be taken by parents. Parents will be advised that to help prevent bullying at school, they should:

1. Encourage their children to report bullying to them, their school Principal or other responsible adult when it occurs:





- 2. Take advantage of opportunities to talk to their children about bullying;
- 3. Inform the school Principal or Assistant Principal immediately if they think their child is being bullied or is bullying other students;
- 4. Watch for symptoms that their child may be a target of bullying and report those symptoms;
- 5. Cooperate fully with school personnel in identifying and resolving bullying incidents; and
- 6. Participate in all activities designed to eliminate bullying behavior, including activities designed to address confirmed incidents.

Source: *Broken Arrow Board of Education policy adoption, July 13, 2009.*

Broken Arrow Board of Education policy revised, December 9, 2013. Broken Arrow Board of Education policy revised, January 12, 2015. Broken Arrow Board of Education policy revised, May 9, 2022.

Broken Arrow Board of Education policy revised, November 6, 2023.



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DRUGS, ALCOHOL AND CONTRABAND SEARCHES BY CANINE DETECTION

The Broken Arrow Board of Education believes that in order to respond to the drug and alcohol abuse problems in our schools and to maintain a reasonably safe school environment, the District will occasionally_use certified / trained dogs to search for drugs, alcohol, or contraband on school property or at school events.

Such searches will be arranged by the Superintendent or designee and will target lockers, <u>bathrooms</u>, <u>classrooms</u>, vehicles, school desks or any other area of possible concealment on school grounds or inside school buildings.

Students, staff members, and other persons on school property will not be the subject of animal searches.

Staff may follow existing search policy and guidelines if reasonable suspicion arises during a search on school property.

Source: Broken Arrow Board of Education policy adoption, April 2, 2001.

Broken Arrow Board of Education policy revised, April 6, 2009. Broken Arrow Board of Education policy revised, July 13, 2009. Broken Arrow Board of Education policy revised, July 10, 2017. Broken Arrow Board of Education policy revised, November 6, 2023.



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FOREIGN EXCHANGE STUDENTS

Foreign exchange student programs are recognized as a means of improvement of international understanding. The exchange of culture through a student exchange program is viewed as a desirable supplement to the educational program.

Students from other countries who obtain student visas and who are temporary residents of the school district by virtue of living with legal resident families for a period of one or two years for the purpose of attending school in the community may be enrolled as foreign exchange students.

Because of the large number of such programs, it is necessary to restrict the number of students who may be enrolled as foreign exchange students in Broken Arrow Public Schools.

Authorization is given for the enrollment of ten (10) students per school year through approved foreign exchange programs. Not more than two (2) students from each sponsoring exchange program will be accepted as students. This limit of two (2) enrollments per exchange program may be exceeded at the discretion of the high school principal or designee in the event available enrollments exist on or after May 15th of each year.

Students seeking admission to Broken Arrow Public Schools through a student exchange program must file required application forms and related documents with the school district by June 1 of each year. Applications are to be submitted by the sponsoring program to the high school principal or designee. Applications received earliest will be given first consideration. Exceptions to the June 1 application deadline may be considered by the high school principal or designee on a case-by-case basis.

The applicant:

- Must be eligible to attend the senior high school and be at least 16 years of age as of the first day of school nor older than 19.
- Must have an J-1 student visa
- Must live with host family in the Broken Arrow School District or have a legal transfer
- Must demonstrate English speaking and reading skills
- Is preferred to stay with a host family that has a student attending Broken Arrow High School
- Must not have graduated from a high school or its equivalent
- Must provide an official transcript from the student's home school that is translated into English
- Must provide evidence of required immunizations
- Must provide evidence of health insurance
- Must not enroll if they require English as a second language, needs alternative education or special education or who wants to participate in concurrent enrollment
- Host family must be suitable, and may require an interview
- Cannot be selected as valedictorian or salutatorian
- Must understand that eligibility for participation in extracurricular activities are governed by the OSSAA



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Organizations operating a foreign exchange program within the Broken Arrow School District must meet the following criteria:

- The organization must be a J-1 member of the Council on Standards for International Education Travel (CSIET).
- The organization must be recognized by the President's Council for International Youth Exchange.

Foreign exchange students will not receive a diploma from BAHS. They will be permitted to participate in the graduation ceremonies and receive a certificate of attendance.

Foreign students (nonimmigrant alien status) who are not residents of the school district shall not be considered for enrollment if there is a requirement for processing of a U.S. Department of Justice, Immigration and Naturalization Service Form I-20, "Certificate of Eligibility for Nonimmigrant Students."

Any request for a special exception to the policy concerning enrollment of foreign students shall be submitted in writing to the Superintendent or his/her designee. The Superintendent or designee will review the request for special consideration and submit a decision in writing to the parent/guardian within ten (10) school days. Following receipt of the written decision of the Superintendent or designee, the parent/guardian may request further review by submitting a written request to the Board of Education within ten (10) school days of receiving the written decision of the Superintendent or designee.

Source: Broken Arrow Board of Education policy adoption, August, 1995.

Broken Arrow Board of Education policy revision, September 8, 1998. Broken Arrow Board of Education policy revision, July 13, 2009. Broken Arrow Board of Education policy revision, August 13, 2012.

Broken Arrow Board of Education policy revision, May 11, 2015. Broken Arrow Board of Education policy revision, December 11, 2017.

Broken Arrow Board of Education policy revision, November 6, 2023.



IMMUNIZATIONS

The board of education shall provide an environment for students to study, interact, and learn. Such an environment shall be reasonably free of known hazards that may threaten or endanger the health of our children or educators.

The board of education shall require that no child be admitted to this school district unless and until the student's parent/guardian provides (1) a current, up-to-date immunization record **OR** (2) a completed and signed state-approved exemption form. Either the up-to-date immunization record or a completed and signed state-approved exemption form must be on file with the district **PRIOR** to the student's admission to the district. The exemption form shall specify that the student has received or is in the process of receiving the immunizations currently required by Oklahoma State Department of Health regulations, unless the exemption has been granted from the immunizations on medical, religious, or personal grounds or as otherwise required by law.

The immunization requirements shall be posted at the district's website **and** in any notice or publication provided to parents/guardians regarding immunizations. The state-approved exemption form is available at the Oklahoma State Department of Health website: https://oklahoma.gov/health.html.

If a parent or guardian is unable to pay for the required immunizations, the school will refer the student to the State or Local Department of Health for assistance.

Reference: OKLA. STAT. tit. 70 §1210.191, OKLA. STAT. tit. 70 §1210.192; O.A.C. 310:535-1-2

Except as otherwise provided by law, before a student may register and attend the School District, the parent must present the principal or nurse of the school:

- 1. A certificate from a licensed physician or an authorized representative of the State Department of Public Health stating that such student has received or is in the process of receiving required immunizations or is likely to be immune as a result of the disease; or
- 2. A certificate from a licensed physician stating that the child's physical condition is such that immunization would endanger the life or health of the child; or
- 3. A written statement by the parent, guardian or legal custodian of the child objecting to immunizations.

Source: *Broken Arrow Board of Education policy adoption, July 13, 2009.*

Broken Arrow Board of Education policy revised, July 10, 2017.

Broken Arrow Board of Education policy revised, November 6, 2023.



MEDICATION TAKEN AT SCHOOL

Purpose

The purpose of this policy is to identify when district personnel are authorized to administer medication to students, when students are authorized to self-medicate and how district personnel will maintain, administer, monitor and dispose of student medication.

Definitions

For purposes of this policy, these terms have the following definitions:

"Inhaler" means a device that delivers a bronchodilator to alleviate symptoms of respiratory distress that is manufactured in the form of a metered-dose inhaler or dry-powder inhaler and that may include a spacer or holding chamber that attaches to the inhaler to improve the delivery of the bronchodilator.

"Medicine" or "medications" includes prescription medications, opioid antagonists and over-the-counter medicines such as but not limited to aspirin, cough syrup, medicated ointments and any other item used to treat an illness, disease or malady. This term shall not include "Sunscreen" as defined below.

"Parent" means a parent, a court-appointed guardian or a person having legal custody of a minor student.

"Respiratory distress" means the perceived or actual presence of coughing, wheezing or shortness of breath.

"Sunscreen" means a compound topically applied to prevent sunburn.

Policy

Under Oklahoma law, a school nurse, an administrator or a designated district employee may administer prescription and nonprescription medications and assist in applying sunscreen to students. Only designated employees who have successfully completed specific training in the administration of nonprescription and prescription medications may administer medication to students with legitimate health needs.

Except as provided in this policy and in the district's diabetes care and management policy, students may not retain possession of or self-administer any medicine. Violation of this rule will be reported to the student's parent and may result in discipline, including out-of-school suspension.

As further set out below, the district retains the discretion to reject requests for the administration of medication or application of sunscreen and to discontinue the administration of medication or application of sunscreen.

Parents are responsible for the delivery of medication to the school health office. Medication should be in its original container with the parent's written authorization for administration of the medicine. Sunscreen for application by a school nurse or designee must be delivered to the health office in its original container with the parent's written authorization for application of sunscreen. The parent's authorization for either medicine or sunscreen must identify the student, the medicine or sunscreen, and include or refer to the label for instructions on administration of the medicine. The school nurse, an administrator, or a designated

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employee will administer the medicine to the student or assist the student in applying sunscreen pursuant to the parent's instructions and the directions for use on the label or in the physician's prescription. The parent must complete a new authorization form annually and for each change of medication or sunscreen. The school will maintain the authorization form as a part of the student's health record. Authorization forms will be available in the health office. A parent who chooses to do so may come to the school and personally dispense medication or apply sunscreen to the student.

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School health staff will keep a record of the students to whom medicine is administered or sunscreen is applied, the date of administration or application, the person who administered the medicine or applied the sunscreen and the name or type of medicine or sunscreen administered.

Medications and sunscreen will be stored in a locked drawer or cabinet that is readily accessible only to the persons who will administer the medication or sunscreen. Medications requiring refrigeration will be refrigerated in a secure area.

Any person administering medicine or applying sunscreen to a student will participate in training each year conducted by a school nurse or other health care professional. The training will include:

- Review of school rules and regulations (including this policy) regarding administration of medication by school personnel;
- Procedures for administration, documentation, handling and storage of medication and sunscreen;
 and
- Medication needs of specific students, desired effects, potential side effects, adverse reactions and other observations.

Only those persons who successfully complete the training are authorized to administer medication or apply sunscreen. Each school site will maintain a current list of those authorized to administer medication and apply sunscreen at that site.

Students who are able to self-administer specific medications, such as inhaled asthma medication, anaphylaxis medication, replacement pancreatic enzymes, or use specialized equipment, such as an inhaler or Epinephrine injector, may do so provided such medication and specialized equipment are transported and maintained under the students' control in compliance with the following rules:

- A licensed physician or dentist must provide a written order that the student has a particular medical condition (asthma, anaphylaxis, cystic fibrosis, etc.), is capable of and has been instructed in the proper method of self-administration of medication. It is the parent's responsibility to contact the physician and have the physician complete and return the required order.
- The parent must provide a written authorization for self-administration of medication.



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- Parents who elect self-administration understand and agree that the school, its agents and employees shall incur no liability for any adverse reaction or injury the student suffers as a result of selfadministration of medication and/or use of specialized equipment.
- The written authorization will terminate at the end of the school year and must be renewed annually.
- If the parent and physician authorize self-medication, the district is not responsible for safeguarding the students' medications or specialized equipment.
- Students who self-medicate are prohibited from sharing or playing with their medication or special equipment. If a student engages in these activities the parent will be contacted and a conference will be scheduled with the parent, student, nurse and other appropriate persons.
- Students will not be allowed to self-administer:
 - Narcotics;
 - Prescription pain killers;
 - Medication used to treat ADD/ADHD or other psychological or behavior disorders; and
 - Other medication hereafter designated in writing by the district.
- Except as otherwise stated in an individual student's school health plan, students may self-administer non-diabetes and non-anaphylaxis-related injectables only in the health office in the presence of authorized school personnel. Diabetes-related injectables will be administered in accordance with the school's diabetes care and management policy.
- The parent will provide an emergency supply of a student's inhaled asthma medication or anaphylaxis medication or replacement pancreatic enzymes to be administered by school personnel, as required by state law.

Students who are able to self-apply sunscreen may do so provided such sunscreen is regulated by the Food and Drug Administration. Students may self-apply sunscreen without the written authorization of a parent, legal guardian or physician. All students are permitted to possess sunscreen that is regulated by the Food and Drug Administration.

Sunscreen

District staff will only assist the student in applying sunscreen with the parent's written authorization and according to label directions or, if applicable, written instructions from the student's physician. The sunscreen must be in the original container indicating:

• Ingredients; and



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• Directions for Application.

Nonprescription Medication

Standing Medical Orders are signed annually by the Broken Arrow Public Schools Physician Consultant. The orders authorize the school nurse or trained designee to administer oral and topical nonprescription medication, stocked in the health office, to students in relation to specific medical conditions as outlined on the Standing Medical Orders Document and per nursing Policy and Procedure. The orders are available for parents to review on the district website under the department of Health Services. In order for the school nurse or designee to administer stock nonprescription medication, parents must provide authorization. Parents who authorize the use of nonprescription stock medication understand and agree that the school, its agents and employees shall incur no liability for any adverse reaction or injury a student may suffer as a result of the use of stock nonprescription medication administered with parent permission and in accordance with the Standing Medical Orders.

In order to administer medications that are not listed in the district's Standing Medical Orders, parents must provide the medication and written authorization. District staff will only administer nonprescription medication according to label directions or written instructions from the minor student's physician. The medication must be in the original container that indicates:

- Student name (affixed to the container);
- Ingredients;
- Expiration date;
- Dosage and frequency;
- Administration route, i.e., oral, drops, etc.; and
- Other directions as appropriate.

School staff will only administer aspirin (acetylsalicylic acid) and products containing salicylic acid with written instructions from the student's physician.

Prescription Medication

Except for district-wide Epinephrine injectors and district-wide inhalers district staff will only administer prescription medication with written authorization and instructions. Prescription medication must be in the original container that indicates:

- Student name;
- Name and strength of medication and expiration date;



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- Dosage and directions for administration;
- Name of the licensed physician or dentist; nurse practitioner or physician's assistant
- Date, name, address and phone number of the pharmacy.

The parent must provide and maintain the supply of prescription medication for the student.

The parent must reclaim any remaining medication by the last official day of school closing or within seven days after the prescribing physician discontinues the medication. The school nurse or designated employee will destroy in a nonrecoverable fashion in the presence of a witness any medication not timely reclaimed. The person who destroys the medication will record the following information:

- Date of destruction;
- Time of destruction;
- Name and quantity of medication destroyed; and
- Manner of destruction of medication

Any and all controlled substances will be destroyed according to state law.

The school nurse or designated employee will advise the principal if discontinuance of medication to a student is appropriate and assist in informing the parent. Legitimate reasons for discontinuing administration of medication include, but are not limited to the following:

- A legitimate lack of space or facility to adequately store specific medication;
- Lack of cooperation by the student, parent and/or prescribing doctor;
- An unexpected and/or adverse medical reaction to the medication at school, i.e., mood change, allergic reaction, etc., considered to be harmful to the health and well-being of the student;
- Any apparent change in the medication's appearance, odor, or other characteristics that raise reasonable doubts about the quality of the medication; and
- The medication expiration date has passed.

Medication Administration During School-Sponsored Trips/Off-Campus Activities

Field Trip and Activity Permission Forms will be sent home by teachers/sponsors prior to any trip or off-campus activity. Each student must have a signed permission form in order to participate in a trip/off-campus activity. Parents must complete the medication preferences section of the form.

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As authorized by the parent on the Field Trip and Activity Permission Form:

- EpiPens and inhalers that parents have previously provided to the health office will be sent for as-needed use.
- All medications (prescription and nonprescription) will be sent in original, labeled packaging. The medications will be kept in a locked container for administration by trained personnel during the trip/activity.

<u>Teachers/Sponsors</u> will be trained in procedures for the safe administration of medication prior to administering medication during a school-sponsored trip or off-campus activity.

Seizure-Rescue Medication (Seizure-Safe Schools Act)

Every school site that has a student enrolled who (1) has a seizure disorder and (2) has a seizure rescue medication or other medication prescribed to treat seizure disorder symptoms approved by the Food and Drug Administration and any successor agency that is prescribed by the student's health care provider, the district shall have at least one employee who has met the training requirements necessary to (1) administer or assist with the self-administration of seizure medication, and (2) recognize the signs and symptoms of seizures and the appropriate steps to be taken to respond to these symptoms.

Before a seizure rescue medication can be administered to a student to treat seizure disorder symptoms, the student's parent or legal guardian shall do the following:

- A. provide the school with written authorization to administer the medication at school;
- B. provide a written statement from the student's health care provider that shall contain the following information:
 - the student's name,
 - the name and purpose of the medication,
 - the prescribed dosage,
 - the route of administration,
 - the frequency that the medication may be administered, and
 - the circumstances under which the medication may be administered;
- C. provide the **prescribed medication** to the school in its unopened, sealed package with the label affixed by the dispensing pharmacy; and
- D. collaborate with school personnel to create a "seizure action plan," which means a written, individualized health plan designed to acknowledge and prepare for the health care needs of a student diagnosed with a seizure disorder.

The written authorization and seizure action plan shall be kept on file in the school's health office, and it shall be distributed to any school personnel responsible for the supervision or care of the student. The written authorization and seizure action plan shall be effective only for the school year in which written

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authorization is granted and may be renewed each following school year upon fulfilling requirements A–D above.

District-Wide Use of Epinephrine Injectors

The board of education has authorized the superintendent to obtain a prescription for Epinephrine injectors in the name of the school district. This prescription will be of a quantity sufficient to provide for two (2) injectors in a secure location at each school site.

The superintendent will designate personnel to:

- be responsible for obtaining and maintaining an adequate supply of injectors for each school site;
- ensure appropriate training on the administration of the injectors for designated staff members;

Only a school nurse or school employee trained by a health care professional will be required to agree to be trained in the use of Epinephrine injectors or to administer Epinephrine injections.

<u>District employees are still required to call 911 in the event of an emergency, including any time an</u> Epinephrine injector is used.

Annual written notice will be provided to all parents/guardians that trained employees are authorized to administer Epinephrine injections to any student who appears to be having an anaphylactic reaction.

The District must also immediately notify a student's parent/guardian after administration of an Epinephrine injector.

District-Wide Use of Inhalers

The board of education has authorized the superintendent to obtain a prescription for inhalers and spacers or holding chambers in the name of the school district. This prescription will be of a quantity sufficient to provide for two (2) inhalers with spacers and holding chambers in a secure location at each school site.

The superintendent will designate personnel to:

- be responsible for obtaining and maintaining an adequate supply of inhalers with spacers and holding chambers for all school sites;
- ensure appropriate training on the administration of the inhalers with spacers and holding chambers for designated staff members;

Only a school nurse or school employee trained by a health care professional will be required to agree to be trained in the use of inhalers with spacers and holding chambers.



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District employees are still required to call 911 in the event of an emergency, including any time an employee believes a student is experiencing respiratory distress.

Annual written notice will be provided to all parents/guardians that trained employees are authorized to administer inhalers to any student who is believed to be experiencing respiratory distress.

The District must also immediately notify a student's parent/guardian after administration of an inhaler.

Administration of Emergency Opioid Antagonists (e.g., Naloxon) by District Personnel

District medical personnel or any other person designated by the Superintendent may administer, regardless of whether there is a prescription or standing order in place, an emergency opioid antagonist for a suspected opioid overdose by a student or other individual exhibiting signs of an opioid overdose.

The Superintendent may authorize one or more district employees to receive training offered by the Department of Mental Health and Substance Abuse Services, a law enforcement agency or any other entity in recognizing the signs of an opioid overdose and administering an emergency opioid antagonist. The Superintendent may designate persons to receive this training who have been required to receive annual training in cardiopulmonary resuscitation and the Heimlich maneuver (70 Okla. Stat. §1210.199). Furthermore, if a person or persons designated and trained to administer an emergency opioid antagonist are absent, the Superintendent or designee may authorize any person, regardless of whether there is a prescription or standing order in place, to administer an emergency opioid antagonist to a student or other individual exhibiting signs of an overdose.

Any person administering an emergency opioid antagonist to a student or other individual at a school site or school-sponsored event, in a manner consistent with addressing opioid overdose, shall be covered by Oklahoma's Good Samaritan Act. In the event of a suspected overdose, the district and its employees or designees shall be immune from civil liability in relation to the administration of an emergency opioid antagonist.

As used in this section, "emergency opioid antagonist" means a drug including, but not limited to, naloxone that blocks the effects of opioids and that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose.

Medical Marijuana/Cannabidiol Products

Refer to BAPS Board Policy 5375

Reference:

OKLA. STAT. tit. 70, § 1-116.2, 70 § 1-116.3

OKLA. STAT. -tit. 70, § 1210.199

OKLA. STAT. -tit. 70, §1210.242

OKLA. STAT. -tit. 63, §1-2506.1

OKLA. STAT. tit. 70, § 1210.183

OKLA. STAT. tit. 70, §1210.196.3

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medication to students, when students are authorized to self-administer medication, and how District personnel will maintain, administer, monitor, and dispose of student medication.

Policy

Under Oklahoma law, a school nurse, an administrator or a designated school employee may administer prescription, and nonprescription medications and assist in applying sunscreen to students. Only designated employees—who have successfully completed specific training in the administration—of—medication may administer medications to students. Administration—and documentation of all medications will be accurate and meet the requirements of the Oklahoma Nurse Practice Act and Oklahoma State Law.

- I. Standing Medical Orders for Administration of Non-Prescription Medications Stocked in District Health-Offices
 - **a.** Standing Medical Orders are signed annually by the Broken Arrow Public Schools Physician Consultant.
 - **b.** Standing Medical Orders will be utilized to address specific medical conditions as outlined in the Standing Medical Orders Document and per nursing Policy and Procedure.
 - e. Standing Medical Orders are available for parent/guardian review on the district website under the department of Health Services.
 - **d.** Parents acknowledge that Broken Arrow Public Schools and its employees shall incur no liability as a result of an injury arising from the employee administration of medications related to consent-granted via handwritten or electronic signature.
 - e. Consent to revoke Standing Medical Orders may be given at any time with written notice from the parent or guardian.
- II. All medication taken at school must be kept in the nurse's office, regardless of the student's age. This is for the safety of all students. If possible, parents are advised to give medication at home on a schedule other than during school hours. If it is necessary that a medication be given during school hours, these regulations must be followed:
 - a. A "Request to Give Medication" form must be completed and signed annually by the parent or guardian for each prescription and non-prescription medication (not stocked in district health offices), to be given at school, and kept on file in the nurse's office for the current school year. Parents/guardians are responsible for the delivery of medication to the health office. Medication should be accompanied by the above mentioned form which can be found on the district website under the department of Health Services.
 - b. Prescription and Non-Prescription Medications: Prescription and/or non-prescription medicine must be brought to the nurse's office in its original container with the original label intact.

 Prescription medication will be given only if the student's name is on the original label and only in the dosage listed. The child's physician must authorize in writing dosage changes. Expired medications will not be administered. Original prescription bottles may be sent home with the student when empty unless the parent requests otherwise. A written record will be kept of times and dates medication is taken. It is the student's and parent's responsibility to ensure compliance.



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- c. Acetaminophen and Ibuprofen: The District Physician Consultant has approved administration of Acetaminophen (Tylenol) and Ibuprofen (Advil, Motrin etc.) for pain or fever. These may be available upon request by students if parent/guardian permission was given on the Annual Enrollment Form.
- d. Aspirin: Aspirin is not offered at school and is not recommended for persons under 21 years of age. If a student's doctor advises aspirin for specific conditions, the nurse will administer the aspirin as directed upon receiving the doctor's written order.
- e. Homeopathic/Herbal Medication: Homeopathic and herbal medicines may be given by the nurse or designee if the medication is FDA approved and the requested dosage is age appropriate according to the directions on the manufacturer's label. Written permission from the student's physician and/or parent must accompany the request for medication administration.
- f. No experimental or investigational drug without FDA approval will be administered at school.
- g. PRN medications may be sent to school by the parent or guardian for administration on an asneeded basis. Examples include migraine medication, inhalers or nebulizer medications, EpiPens, allergy medications and glucagon. Written permission from the student's physician and/or parentmust accompany the request for medication administration.
- h. PRN medications do not include cough drops, throat lozenges, triple antibiotic ointment or othersthat are provided by the District.
- i. All medications will be administered by a licensed nurse or designee that has been trained in medication administration.

III. Sunscreen:

- a. Sunscreen for application by a school nurse or designee must be delivered to the school in an original container with a signed Request to Administer Medication form which can be found on the district website under the department of Health Services.
- b. Students who are able to self-apply sunscreen may do so without authorization of a parent or guardian or physician provided the sunscreen is regulated by the FDA.
- c. Parents may come to school to apply sunscreen.

IV. Controlled Substances

- a. The BAPS "Physician's Order to Administer Medication" Form with parent/guardian and physician's signatures must be on file for the current school year in order for controlled substances, including pain medication, to be administered during the school day. This form can be found on the district website under the department of Health Services.
- b. Students will not be allowed to self-administer narcotics, prescription painkillers, or medications used to treat ADD/ADHD or psychological or behavioral disorders.
- c. Parents/guardians are responsible for the delivery of controlled medication to the health office.

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- d. Controlled medications will be securely stored and accessible only by a licensed nurse or designee trained in medication administration.
- e. Controlled medication counts are verified upon receipt in the health office and reconciled weekly thereafter.
- f. Medications that are controlled substances will not be sent home with the student. A parent or guardian must pick up any medications at such a point that they are no longer needed or the school year ends. Exceptions to the policy will be made at the discretion of the principal and/or school nurse.

V. Asthma/Anaphylaxis Medications and EpiPens

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- a. All inhalers and EpiPens are kept in the health office. If a student is to carry and self-administer a medication, the following requirements must be met each year according to Oklahoma State Bill 343, Section 1-116.3 or Title 70:
 - 1. The parent/guardian must authorize in writing the student's self-administration of medication.
 - 2. Each school year, the parent/guardian must provide to the school a written/signed statement from the treating physician that the student has been instructed in and is capable of the proper self-administration of his/her medication.
 - 3. The parent/guardian of the student must provide the school an emergency supply of the student's medication that is within the current expiration date.
 - 4. The parent/guardian is to sign a statement provided by the school district to acknowledge that the school district shall incur no liability as a result of any injury arising from the self-administration of medication by the student.
 - 5. An Asthma/Anaphylaxis Care Plan will be on file.
- b. Where available, district provided emergency anaphylactic medication will be administered according to the anaphylaxis protocol.
- c. Where available, district provided emergency inhalers will be administered according to the emergency inhaler protocol for respiratory distress.

VI. Medical Marijuana/Cannabidiol Products

a. Please refer to BAPS Board Policy 5375

VII. Administration of Opiate Antagonists (Narcan)

a. District medical personnel or other district employees designated by the Superintendent trained in recognizing signs of opiate overdose may administer an opiate antagonist (Narcan) for a student or other individual exhibiting signs of an opiate overdose.

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- b. Persons who are authorized to administer an opiate antagonist will also be required to receive training in cardiopulmonary resuscitation and the Heimlich maneuver.
- e. If employees designated and trained to administer an opiate antagonist are absent, the Superintendent or designee may authorize any person to administer an opiate antagonist to a student or other individual exhibiting signs of an overdose.
- d. Any person administering an opiate antagonist to a student or other individual at school or a school-sponsored event, in a manner consistent with addressing opiate overdose, shall be covered by the Oklahoma Good Samaritan Act.
- e. In an event of suspected overdose, the district and its designees shall be immune from civil liability in relation to administration of an opiate antagonist.

VIII. Medication Administration During School-Sponsored Trips/Off-Campus Activities

- a. Teachers/Sponsors will be trained in procedures for the safe administration of medication prior to-administering medication during a school sponsored trip/activity.
- b. Broken Arrow Public Schools Activity Permission Forms will be sent home by the teacher/sponsor. Each student must have a signed permission form in order to participate in a trip/activity. Parents must complete the medication preferences on the form.
- c. Teachers/sponsors will notify the school nurse or designee of trips and off-campus activities at least two days in advance of departure and permission forms which indicate the need for medication administration during the trip/activity will be shared.
- d. As permitted by the parent on Broken Arrow Public Schools Activity Permission Form:
 - 1. EpiPens and inhalers that have been previously provided to the health office will be sent for as needed use. All PRN medications will be sent in original, labeled packaging with the designated teacher/sponsor.
 - 2. Daily medications and controlled substances will be sent in original, labeled packaging.

 The medications will be kept in a locked container for administration by trained personnel during the trip/activity.
- e. The school nurse/designee and trained teacher/sponsor will maintain documentation of all medication chains of custody and administration of medication to students.
- f. Upon return to campus from a field trip/off-campus activity, all medications will be returned to the school health office in a timely manner.

IX. Medication Disposal

a. Parents/Guardians must reclaim any remaining medication by the last official day of the school year or within seven days after the prescribing physician discontinues the medication. Exceptions to the policy can be made at the discretion of the principal and school nurse.

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- b. Nurses may choose to contact parents/guardians to remind them of the need toretrieve medication(s). Medication that is not retrieved will be discarded.
- c. The nurse or designee will destroy in a non-recoverable fashion and in the presence of a witness, any medication not timely reclaimed. All controlled substances will be destroyed according to state law. The nurse or designee will document the following information:
 - 1. Date and time of destruction:
 - 2. Name and quantity of medication destroyed; and
 - 3. Manner of destruction
 - 4. Signature of witness to destruction and site administrator.

Reference: Okla. Stat. tit. 70 § 1-116.2, 70 § 1-116.3

Source: Broken Arrow Board of Education policy adoption, April 4, 1983.

Broken Arrow Board of Education policy revised, August 6, 1984.

Broken Arrow Board of Education policy revised, June 2, 1997.

Broken Arrow Board of Education policy revised, April 2, 2001. Broken Arrow Board of Education policy revised, August 4, 2003.

Broken Arrow Board of Education policy revised, July 13, 2009.

Broken Arrow Board of Education policy revised, July 14, 2014.

Broken Arrow Board of Education policy revised, July 10, 2017.

Broken Arrow Board of Education policy revised, November 12,

2018.

Broken Arrow Board of Education policy revised, November 4, 2019.

Broken Arrow Board of Education policy revised, June 1, 2020.

Broken Arrow Board of Education policy revised, October 11, 2021.

Broken Arrow Board of Education policy revised, July 17, 2023.

Broken Arrow Board of Education policy revised, November 6, 2023.



POLICY 4265

USE OF MULTIPLE OCCUPANCY RESTROOMS AND CHANGING AREAS

Pursuant to SB615 (2022), each multioccupancy restroom and changing area located in public schools serving students in prekindergarten through twelfth grades shall be designated as either for the exclusive use of the male sex or for the exclusive use of the female sex.

"Sex," for the purposes of this policy is defined as the physical condition of being male or female based on genetics and physiology, as identified on the individual's original birth certificate.

"Multiple occupancy restroom or changing area" is defined as an area in a public school or public charter school building designed or designated to be used by more than one individual at a time, where individuals may be in various stages of undress in the presence of other individuals. The term may include but is not limited to a school restroom, locker room, changing room, or shower room.

"School" means any public school and public charter school that serves students in prekindergarten through twelfth grades in this state.

"Individual," for the purposes of this policy is defined as any student of the District.

"Coach," for the purposes of this policy is defined as a person employed by the district who is involved in the teaching or training of students participating in a school-sponsored athletic activity.

"School-sponsored athletic activity" for the purposes of this policy is defined as a sporting event that is supported and affiliated with the district such as games, matches and tournaments.

If an individual does not wish to comply by using the appropriate restroom or changing room based on sex as defined herein, the District shall provide a reasonable accommodation by providing access to a single-occupancy restroom or changing room.

An individual shall be disciplined by the District for refusing to (a) use the appropriate multiple occupancy restroom or changing area designated for their sex as defined herein, (b) designate multiple occupancy restrooms or changing areas for the exclusive use of one sex as defined herein, or (c) provide access to a single-occupancy restroom or changing room to an individual who does not wish to utilize the multiple occupancy restroom or changing area designated for their sex, provided that such individual is authorized to be on District premises. Students shall be disciplined pursuant to the District's student behavior policy.

This policy does not apply to individuals entering the multioccupancy restroom or changing facility for the opposite sex under the following circumstances:

- 1. For custodial, maintenance, or inspection purposes; or
- 2. To render emergency medical assistance, or
- 3. If a suitable meeting room or area is not available, a coach may enter a locker room before, during, or after a school-sponsored athletic activity, provided:
 - All students present are fully clothed;



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- The coach shall be accompanied by at least one additional adult at all times; and
- If the coach is the opposite sex of the students present, the coach shall be accompanied by at least one adult of the same sex as the students present.

The adult accompanying the coach shall not be a current high school student.

Reference: OKLA. STAT. tit. 70 § 1-125.

SBOE Emergency Rule: OKLA. ADMIN. CODE § 210: 35-3-186.

Source: *Broken Arrow Board of Education policy adoption, August 8, 2022.*

Broken Arrow Board of Education policy revised, November 7, 2022. Broken Arrow Board of Education policy revised, November 6, 2023.



POLICY 4330

STUDENT ELIGIBILITY FOR SCHOOL TRANSPORTATION SERVICE

Riding a school bus is a privilege for legally-enrolled students who reside one and one-half (1.5) miles or more by commonly traveled road from the school to which assigned by attendance zone. Each eligible rider and his/her parent or legal guardian must read and sign the official bus permit to receive service.

Students who are authorized riders should be assigned to bus loading stops located within one-half mile distance from their normal residence. For operational purposes, the transportation department reserves the right to assign and/or move student bus stops as needed. Students are to board buses and depart from buses only at home, at a designated bus stop, or the school where in attendance.

The board of education may provide transportation to students living outside the boundaries and routes established for the district by the State Board of Education.

<u>Transferred Student Transportation Service (Neighboring District)</u>

A legally transferred student residing outside the school district and otherwise eligible for transportation services may be transported to school, provided the student meets and boards the bus at a designated loading point in the Broken Arrow School District. A bus route shall not be extended to meet students living outside the authorized transportation area. Parent/legal guardian must get approval from Transportation Services before bus service begins. This is done on a space availability basis and may be revoked upon notice to student, parent or guardian.

<u>Transferred Student Transportation (Intra-District)</u>

Except as otherwise provided by law, the duty to provide transportation for a child who is granted an intra-district transfer is that of the parent and/or guardian. A student who is transferred to another school within the school district as the result of a parent or guardian-initiated request may be granted transportation services only if eligible for services at the original school and only if the regularly-scheduled bus serves both schools. Transfers must be pre-approved by the transportation department and are approved on a space availability basis.

Special Education Transportation Service

Transportation for students with disabilities will be provided when transportation has been identified as a "related service" necessary to enable the student to receive the educational services outlined in the student's individualized education program (IEP) or 504.

Students Attending Day Care Centers

The school district is not authorized to provide transportation of students from day care centers to school or from the school to day care centers. The duty to provide transportation for a child in a day care center is that of the day care center and/or parent. In the event of an emergency, upon written authorization of the building principal, a student may be granted temporary permission to depart and/or load a bus at an alternate, but regular, bus stop.

Principals are to attempt to prevent unauthorized riders from boarding buses. An effort is to be made to prevent the use of buses by unauthorized riders crossing to another part of the city or another



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school to attend non-school meetings. Courtesy transportation is provided only for school-related activities.

For students who reside one and one-half (1.5) miles or more from the school to which assigned, the distance from home to school shall be determined by the following process:

- 1. Measurement is to be made along the commonly traveled road, or combination of roads, streets, highways, and public paths.
- 2. Measurement shall be determined from a point in the street immediately in front of the school's main entrance to a point in the center of the street at the intersection with the driveway in the front of the student's residence.
- 3. The decision to transport students who reside less than one and one-half (1.5) miles to schools in areas where unsafe conditions exist will be the responsibility of the director of transportation.

The Student Management Program is implemented through Transportation Services. Students may be assigned specific seats or even lose their bus riding privileges if safety rules are violated. Both students and drivers are subject to being video and audio taped while on the bus.

Source: Broken Arrow Board of Education policy adoption, September 20, 1982.

Broken Arrow Board of Education policy revised, February 6, 1984. Broken Arrow Board of Education policy revised, October 7, 1996. Broken Arrow Board of Education policy revised, July 13, 2009. Broken Arrow Board of Education policy revised, July 10, 2017.

Broken Arrow Board of Education policy revised, November 6, 2023.





STUDENT MENTAL HEALTH CRISIS PROTOCOL

STUDENT MENTAL HEALTH CRISIS PROTOCOL

A mental health crisis is a behavioral, emotional, or psychiatric situation which results in a high level of stress or anxiety for a student and which cannot be resolved without intervention.

Mental health crises may be identified by school administrators, teachers, support employees, and school-based mental health professionals.

As required by OKLA. STAT. tit. 70, § 24-159, the District maintains a protocol for responding to students in mental health crisis with the goal of preventing student suicide, self-harm, and harm to others.

The District's protocol is maintained in partnership with local mental health treatment providers certified by the Oklahoma Department of Mental Health and Substance Abuse Services. The district ensures that at least one Provider Partner meets the following criteria:

- Has the ability to serve all school-aged children regardless of insurance status; and A.
- B. Has the ability and certification to provide mental health crisis services in the region where students attend school.

In response to an immediate or potential mental health crisis, the district will notify the student's parent or guardian as soon as possible. Except in cases of immediate or life-threatening danger to self or others, the district will seek parent or guardian consent in order to facilitate access to a mental healthcare provider who can assess the student and provide recommendations regarding their needs.

The school district and partner organizations will comply with the Health Insurance Portability and Accountability Act ("HIPAA") and Family Educational Rights and Privacy Act ("FERPA") privacy requirements when addressing student mental health crises.

The Board of Education and each of the District's Provider Partner(s) will enter into an annual working agreement establishing all obligations of the parties under the established Protocol and a strategy for regularly reviewing its effectiveness using anonymous, nonidentifiable data.

Not less than every two years, the District and its Provider Partner(s) will jointly review the Protocol and Working Agreement and consider whether updates to the Protocol are necessary to better meet the needs of students. This process will include a review of information gathered from the Oklahoma Prevention Needs Assessment Survey or an alternative survey conducted by the District as provided for in OKLA. STAT. tit. 70, § 24-158.

The District will submit the most recent version of its Protocol and Working Agreement to the Oklahoma State Department of Education, which will in turn submit those documents to the Oklahoma Department of Mental Health and Substance Abuse Services. These agencies may



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require revisions to the Protocol in order to ensure compliance with applicable laws/regulations and/or established evidence-based practices.

The District will provide administrators, teachers, support employees and school-based mental health providers with ready access to and regular training regarding the Protocol.

Reference: OKLA. STAT. tit. 70, §§ 24-158 and 24-159. OKLA. STAT. tit. 70, § 6-194.3.

Source: Broken Arrow Board of Education policy adoption, November 7, 2022.

Broken Arrow Board of Education policy revised-, November 6, 2023.