**SUBSTANCE ABUSE POLICIES AND PROCEDURES**

**To be under the influence of drugs or alcohol** at school, on school grounds or at a school-sponsored activity is a violation of school rules.

First Offense: The student will immediately move to in-house suspension. The parent/ guardian/ caretaker will be notified and will pick up the student from school immediately. If a parent/ guardian/ caretaker is unavailable, the student will remain under in-house suspension for the remainder of the school day. The sending school district will be notified of the offense by phone and in writing. Any class work missed as a result of the offense will be made up under in-house suspension on the following day.

Second Offense: All of the consequences of a first offense will apply. In addition, the student will not be allowed to return to school until a Team meeting is held with the student, parent(s)/guardian(s), program staff, and the sending school district liaison, to formulate a plan to address the substance abuse issue.

Third Offense: The student may be asked to voluntarily and successfully attend and complete a drug rehabilitation program in order to return to the program. Or, the student may be immediately terminated from school.

It should be noted that whether or not someone is under the influence will be determined after a reasonable suspicion is raised in the mind of any staff person. Changes in behavior or physical appearance, self-admission, or information provided by a peer and substantiated by any other evidence raise reasonable suspicion.

**To be in possession of drugs or alcohol** at school or any school-sponsored event is a legal offense as well as a breach of school rules.

First Offense: Any student found to be in the possession of an illicit substance will be moved immediately to in-house suspension. The police will be called and the substance will be turned over to them. The parent/guardian/caretaker will be notified to pick up the student from school immediately. The sending school district will be informed of the offense by phone and in writing. The student will be suspended from the program until the parent/guardian, the student, and the district Special Education Administrator meet with school staff regarding the offense.

Second Offense: The police will be called and the illicit substance will be turned over to them. The student’s parent/guardian/caretaker will be notified by telephone and a letter will document the event. The student may be terminated from school immediately. The student may be referred to a drug rehabilitation facility.

If a student is found selling or distributing drugs or alcohol at school, on school grounds, or at a school-sponsored event: The police will be notified immediately and the substance will be turned over to them. The student’s parent/guardian/caretaker and the sending school district will be notified immediately. The student will be suspended from school until the Team can be convened to determine the course of action to be taken. The student may be terminated from school.

**To be in possession of drug paraphernalia** is against school rules. All items of drug paraphernalia will be confiscated by school staff. The student’s parent/guardian/caretaker and the sending school district will be notified in writing of the offense. The student and parent(s) will be asked to attend an emergency Team meeting to process the issue.

**SUBSTANCE USE PREVENTION AND EDUCATION POLICY**

In accordance with state and federal law, South Coast Educational Collaborative (SCEC) shall provide age

appropriate, developmentally appropriate and collaborative learning strategies through evidence-based alcohol, tobacco and drug prevention education programs in grades K-12.

**SUBSTANCE USE PREVENTION AND EDUCATION PROTOCOL**

The alcohol, tobacco and drug prevention program shall address the health, legal, economic, and social consequences of alcohol, tobacco and drug use, with emphasis on non-use by school age youth. The program includes information about effective techniques and skill development for delaying and abstaining from substance use and resisting social pressures, as well as addressing attitudes towards alcohol, tobacco, and other drugs (ATOD).

SCEC shall provide educational training, so that all school staff know policies, procedures and protocols for prevention and intervention in preventing and responding to substance use and abuse. All SCEC staff shall be provided training on the early warning signs and behaviors that indicate a student may be experiencing substance use problems. Staff shall be made aware of building based referral systems and any related protocols to follow. Specific training shall be provided to staff responsible for implementing evidence based programs for verbal screenings, brief interventions and identifying indicators and resources when referral to treatment is indicated.

The goals of this program, as stated below, are rooted in the belief that prevention requires education, and that the most important aspect of the policies and guidelines for SCEC should be the education of children and youth about the dangers of substance use and healthy decision-making and problem-solving.

1. To prevent, delay and/or reduce ATOD use among children and youth.
2. To increase students’ knowledge and understanding of the health, legal, economic and social consequences of ATOD use.
3. To promote the development of students’ self-management skills, social skills, negotiation skills and refusal skills that will help them communicate effectively, recognize healthy alternatives to risky behavior, make healthy decisions, and avoid ATOD use.

The curriculum, instructional materials and outcomes used in this program shall be recommended by the SCEC curriculum committee and approved by the members of the leadership team, the Executive Director and the Board of Directors.

The policy and protocols shall be reviewed annually and revised in accordance with Massachusetts Department of Elementary and Secondary Education (DESE) and Massachusetts Department of Public Health (MDPH) regulations and state and federal laws. It shall be posted on SCEC’s website and notice shall be provided to all students and parents in accordance with state law. Additionally, the district shall file a copy of this policy with DESE in accordance with law in a manner requested by DESE.

**POLICY ON USE OF VERBAL SCREENING TOOLS FOR SUBSTANCE USE RISK**

South Coast Educational Collaborative (SCEC) recognizes the impact that substance use by youth can affect their health, safety, and well-being. Early identification and sustainable interventions are necessary for youth to achieve optimal health outcomes. Our ultimate goal at SCEC is for students to participate and contribute as fully as possible in the communities in which they live.

In accordance with Massachusetts General Law (M.G.L.) Chapter 71, Section 97 (as amended by St. 2016, c.52, § 15); subject to appropriation, SCEC shall utilize the state approved, evidence-based C.R.A.F.F.T verbal screening tool to assess risk levels for substance use disorders, beginning in the 2017-18 school year. C.R.A.F.F.T. is a behavioral health screening tool for use with adolescents and is recommended by the American Academy of Pediatrics' Committee on Substance Use and Prevention (COSUP). Universal screening of adolescents and young adults, using validated tools, is a proactive approach to promoting healthy choices and identifying students at risk of harm from substance use. It is not a diagnostic tool. Screenings shall be conducted with sensitivity to various student population abilities, vulnerabilities, and needs. Screenings shall occur on an annual basis of students in grades 7 and 9 at the Gallishaw School and SCEC satellite classrooms which are located at Seekonk High School and Somerset Middle School.

SCEC shall provide student and parents with written and verbal notification in their primary language prior to the start of the screening schedule. A student and/or the parent or guardian may opt out of the screening by written notification at any time prior to or during the screening. SCEC shall comply with Massachusetts Department of Elementary and Secondary Education (DESE) regulations relative to consent. Screening results shall be reported in a manner that does not identify students and in accordance with procedure outlined by Massachusetts Department of Public Health (DPH), not more than 90 days after completion of screenings.

SCEC employees shall adhere to policy on confidentiality protections and thereby will not disclose any information received during a verbal substance use screening without prior written consent of the student, parent or guardian, except in cases of immediate medical emergency or a disclosure is otherwise required by law. Such consent shall be documented on a form approved by DPH and shall not be subject to discovery or subpoena in any civil, criminal, legislative or administrative proceeding. No record of any screening shall be made in any form, written, electronic or otherwise, that includes information identifying the student.

SCEC has established a Student Assistance Team (SAT) that is overseen by the Health Service administrator and made up of school administrators, nurses, counselors, educators and support staff. A SAT has the following functions: providing opportunities for prevention, identifying and referring students, providing ongoing case management, and recommending policy and program changes to improve the school’s climate and educational and support services. Training of school professionals shall be provided in accordance with DPH regulations and standards and include instruction on proper use of the verbal screening tool, guidance on implementing evidence based education for students and parents and assistance in identifying available community resources.

SCEC acknowledges that M.G.L. c.71, § 97 is subject to appropriation, which means we may voluntarily implement the actions described in this policy, but are not required to do so unless and until funding is appropriated.

**Protocol for the Administration of Naloxone (Narcan)**

**For Suspected Opioid Overdose in the School Setting**

South Coast Educational Collaborative (SCEC) will maintain a system-wide plan for addressing potential life threatening opioid overdose reactions per Massachusetts Department of Public Health (MDPH) protocols.

* Each school nurse assigned to SCEC Public Day Sites, LIFE Academy and the Main Administrative Office will have the responsibility for the management and training of the naloxone administration program in the school setting in accordance with MDPH protocols.
* The school physician will provide oversight to monitor the program and ensure quality improvement and quality control.
* Integration with the local emergency medical services (EMS) system will be included in the implementation of this program.

**Background**

*“It is the position of the National Association of School Nurses (NASN) that the safe and effective management of opioid pain reliever (OPR) - related overdose in schools be incorporated into the school emergency preparedness and response plan.” (NASN Position Statement, June 2015)*

*MA Chapter 94C Controlled Substances Act, Section 34*

* It is strongly recommended that school nurses have access to Naloxone (Narcan) medication in the school setting to ensure its immediate availability to students, staff and building visitors.
* Recognizing that fatal and non-fatal overdoses from opioids play an increasing role in the mortality and morbidity of Massachusetts residents, MDPH launched an Overdose Education and Naloxone Distribution (OEND) prevention program using intra-nasal Naloxone (Narcan) in an attempt to reverse this trend.
* Naloxone is an opioid antagonist which means it displaces the opioid from receptors in the brain. An overdose occurs because the opioid is on the same receptor site in the brain that is responsible for breathing.
* Naloxone usually acts dramatically, allowing slowed or absent breathing to resume. It is both safe and effective and has no potential for abuse. While not a controlled substance, naloxone is what is known as a “scheduled” drug and therefore does require a prescription.

**School Nurse Responsibilities**

The school nurse is the key resource for medical direction, assessment and response to a potential life threatening opioid overdose. The school nurse **MUST** be contacted as soon as a potential opioid overdose is identified.

**Assess for responsiveness and breathing:**

1. Yell their name
2. Rub knuckles over either the upper lip or up and down the front of the rib cage called a **sternal rub**
3. **Call 911 to get help-**--make sure to say the person is unresponsive and not breathing or struggling to breathe.
4. Send for **Naloxone (Narcan)** and **Automated External Defibrillator (AED)**
5. If a barrier mask is available perform **rescue breathing** to provide oxygen---make sure nothing is in person’s mouth blocking their breathing.

* Place mask over nose and mouth
* Administer 2 slow breaths and look for chest to rise.
* Continue administering **1 breath every 5 seconds** until the person starts breathing on his/her own.
* If victim is unresponsive with no breathing or only gasping, **begin CPR.**
* If alone, perform CPR for about 2 minutes before leaving to get Naloxone and AED.

1. Give Naloxone (Narcan)---follow SCEC procedure
2. After giving naloxone, continue rescue breathing with **1 breath every 5 seconds.**
3. If the victim is still not responding in **2 to 3 minutes, give a second dose of naloxone**
4. Place victim in **rescue position** until help arrives.

**STORAGE: Places where the nasal naloxone is to be stored, should be identified, with the following consideration of the need for storage:**

* At one or more places where students/staff may be most at risk
* In such a manner as to allow rapid access by authorized persons, including to identified students who are in possession of nasal naloxone; and
* In a place accessible only to authorized persons. The storage location(s) should be secure, but not locked during those times when nasal naloxone is most likely to be administered, as determined by the school nurse.

**Annual Training**

The school nurse may train approved trainees for the purpose to administer naloxone by nasal administration in a life-threatening situation when first responders are not immediately available.

1. The school nurse will document the training and testing of competency, in accordance with standards and curriculum established by the Massachusetts Department of Health.
2. The training, at minimum, will include:
   * Procedures for risk reduction
   * Recognition of the symptoms in an individual with an opiate overdose
   * The importance of following the prescribed method of medication administration
   * Proper use of the nasal inhaler method
   * The requirement to call 911 prior to administration
   * Requirements for proper storage, and security, notification of appropriate persons following administration and record keeping.

3. The nurse shall maintain and make available upon request by the MDPH, a list of all

licensed individuals to administer naloxone by nasal administration. (Appendix A)

4. All trainings in the administration of naloxone will be done in accordance with

prescribed methods. (Appendix B - see MDPH Overdose Response Training)

5. School nurses will submit a report to the MDPH School Health Unit each time

Naloxone is administered. (Appendix C-Narcan Report Form)

6. All other medication administration procedures will hold forth including:

* Reporting any medication errors per 105 CMR 210.00
* Proper disposal of a used naloxone administration delivery system.

**Education**

Legislation in Massachusetts requires that parents, guardians and other adults in a 6th-12th grade such as school nurses, Athletic Directors, coaches and athletic trainers, receive educational materials on the dangers of opioid use and misuse.

The educational information must be distributed to students involved in an extracurricular athletic activity prior to the beginning of their athletic season.

The Massachusetts Department of Health (MDPH) and the Massachusetts Interscholastic Athletic Association (MIAA) and the Massachusetts Technical Assistance Partnership for Prevention (MassTAPP) have developed a set of four fact sheets for the extracurricular school sports community on prescription opioid misuse prevention entitled: (Appendix C)

* *Preventing Prescription Opioid Misuse Among Student Athletes*
* *Injury Management: A Key Component of Prescription Opioid Misuse Prevention*
* *What to Know About Prescription Opioids*
* *Guidance on Communications After a Non-Concussion Sports Injury*
* *http://masstapp.edc.org/*

**Protocol Review and Revision**

Review and revision of these procedures shall occur as needed but at least every two years.