

DOCUMENT A

District Enrollment as of 04/28/2017

DISTRICT	Full Time Students	Shared Time Students	Full Time Students PTC 20 LLD	Shared Time Students PTC 20 LLD	Total Student Count
Avon	36				36
Belmar	98	13	1	1	113
Brielle	228	7	7		242
Lake Como	41	4	1		46
Manasquan	285	4	4	1	294
Sea Girt	37		1		38
Spring Lake	50		1		51
Spr Lk Hts	116	1	4	1	122
Employee Child	1				1
Parent Paid	2				2
Totals	894	29	19	3	945
				TOTAL MHS	945
				TOTAL MES	628
				TOTAL ENROLLMENT	1573

**MANASQUAN SCHOOL DISTRICT ATTENDANCE COMPARISON REPORT
2016-2017 school year**

HIGH SCHOOL		<u>ATTENDANCE PERCENTAGE</u>	<u>AVERAGE DAILY ENROLLMENT</u>	<u>AVERAGE DAILY ATTENDANCE</u>
Apr-16		94.81	939.10	890.35
Apr-17		93.99	929.58	873.68
ELEMENTARY SCHOOL				
Apr-16		97.589	644.9	621.3
Apr-17		97.17	628.429	598.643

**MANASQUAN SCHOOL DISTRICT FIRE DRILL REPORT
2016 - 2017 School Year**

HIGH SCHOOL

<u>DATE OF DRILL</u>	<u>TIME OF DRILL</u>	<u>LENGTH OF DRILL</u>	<u>COMMENTS</u>	<u>SECURITY DRILLS</u>
April 11	9:15 a.m.	7 minutes		Fire Drill
April 24	10:20 a.m.	10 minutes		Testing of Emergency Communication System
ELEMENTARY SCHOOL				
<u>DATE OF DRILL</u>	<u>TIME OF DRILL</u>	<u>LENGTH OF DRILL</u>	<u>COMMENTS</u>	<u>SECURITY DRILL</u>
April 11	1:25 p.m.	4 minutes		Fire Drill
April 28	10:25 a.m.	10 minutes		Lockdown Drill Exterior Threat

[illegible]

[illegible]

	SUSPENSIONS BY GRADE				TOTAL
	9	10	11	12	
OUT OF SCHOOL SUSPENSIONS:					
Under the Influence		1		3	4
Fighting	2		3	1	6
Theft			1		1
HIB		1	1		2
Damage to Property			1		1
Defiance/Profanity			1	1	2
Pulled Fire Alarm				1	1
E-Cigarette				1	1
IN-SCHOOL SUSPENSIONS:					
Disrespectful to Another Student			2		2
Fighting	1				1
Leaving School Grounds w/o Permission/Assembly			4	9	13
Profanity to Staff Member/Disrespectful	1		2	3	6
No Show Saturday Detention		1	1	6	8
Late to School				1	1
HIB		1	1		2
Inappropriate use of a cell phone			1		1
Inappropriate gesture		1			1
Cutting class		1	1	1	3
					0
					0
TOTAL	4	6	19	27	56
SATURDAY DETENTION	2	3		6	11
SMOKING - INSIGHT PROGRAM					0

MONTHLY TARDIES REPORT

2016-2017

TIMES TARDY	SEPT	OCT	NOV	DEC	JAN	FEB	MARCH	APRIL	MAY	JUNE
1	144	189	197	195	196	184	212	180		
2	24	53	83	90	80	74	93	71		
3	19	34	35	37	23	35	39	23		
4	10	24	17	20	16	12	33	9		
5	2	10	12	8	9	6	30	7		
6	3	4	4	2	3	6	9	5		
7	3	3	2	2	3	1	5	3		
8	0	3	1		3	0	3	2		
9	1	0	1		4	1	1	0		
10	1	0	1		1	0	1	0		
11	0	1			0	1	1	1		
12	1	0			0		2			
13		1			0		1			
14					1		0			
15							1			
16							0			
17							0			
18							0			
19							0			
20							1			
21										
22										
23										
24										
25										
TOTAL STUDENTS	208	322	353	354	339	320	432	301	0	0
TOTAL TARDIES	369	636	661	632	657	578	1012	540	0	0

SUP

	SEPT.	OCT.	NOV.	DEC.	JAN.	FEB.	March	MARCH	April	MAY	JUNE
Profanity											
Cut Detention/Cut Class											
Leaving School Grounds											
Smoking											
Willful Disobedience											
Truant											
Forged Note											
Fighting											
Conduct of Such Character											
Destruction of School and Personal Property											
Threatening Staff Member											
Threatening Student											
Disturbance in Class											
Harrassment of Student											
Possession of Drug/Alcohol											
Insubordination											
Possession of Stolen Property											
Possession of a Weapon											
Simple Assault											
TOTAL	0	0	0	0	0	0	0	0	0	0	0

ELEMENTARY SCHOOL SUSPENSIONS BY GRADE

[illegible]

MANASQUAN SCHOOL DISTRICT HARRASSMENT, INTIMIDATION & BULLYING REPORT

May 23, 2017

[illegible]

All victims received counseling.

Nursing Services Plan
Manasquan School District
2016-2017

The Certified School Nurse in the Manasquan School District has a multitude of roles within the scope of professional practice. In an ongoing effort to that ensure children remain healthy and prepared to learn, the school nurse takes on the role of health care provider, investigator, communicator, counselor, educator, child advocate, community liaison, recorder and manager.

Health Care Provider

As a health care provider, the school nurse uses the nursing process to assess, plan, implement and evaluate the nursing care provided in the health office in an ongoing manner. The school nurse creates, disseminates and implements individualized health care plans (IHCPs) and emergency care plans (ECPs) for each student with acute or chronic health care concerns.

Investigator

As an investigator, the school nurse conducts surveillance and works collaboratively with others as she seeks information regarding health histories, health practices, environmental concerns, current trends, safety issues, communicable disease patterns, and disease prevention. The school nurse consults with parents/guardians, pediatricians, psychiatrists, orthopedists, gastroenterologists, neurologists, diabetes specialists and the department of health (DOH) to establish an optimum level of care for students in school, in school activities and those who are seeking Home Instruction. The school nurse consults with teachers, staff, custodians, grounds crew, administrators, student assistance counselors (SAC), guidance counselors, school psychologists, physical therapists, cafeteria staff, mobile crisis unit, grief counselors, suicide prevention coalition, community clerics, law enforcement agents, drug enforcement agents, health inspectors, and local and state agencies, such as the US Department of Health and Human Services and the US Department of Education, to gather information on an ongoing basis.

Communicator

The school nurse uses varied approaches to communicate information to and from students, parents/guardians, staff, administrators, physicians, health care agencies, government agencies and DYFS. Personal letters, pamphlets, telephone conferencing, newsletters, care plans, flyers, e-mails, website

updates, webinars, podcasts, personal conferences, department meetings, staff and coach inservices, demonstrations, powerpoints, spreadsheets, and I&RS meetings are just some of the methods and forums in which health information is communicated.

Counselor

The school nurse serves in the role of counselor to students, parent/guardians, faculty and staff alike regarding health issues and personal concerns. The school nurse is always vigilant for signs of depression, domestic violence, child abuse, sexual abuse, illicit drug abuse, harassment, intimidation and bullying and assault. Referrals are made to the SAC, guidance counselor, school psychologist, school physician, private health care providers, I&RS team, mobile crisis unit, law enforcement agents, drug enforcement agents, department of health, planned parenthood, STI clinic, QUAL CARE/workmans compensation, and community health resources as needed.

Educator

The role of educator is a vital role for the certified school nurse. Informal teaching is continuous throughout the day on a one-to-one basis during the delivery of nursing care to students and staff. Staff education on topics pertinent to a student's health (asthma, allergies, anaphylaxis, eating disorders, irritable bowel syndrome, anxiety, depression, self-harm, epilepsy, diabetes, concussion, custodial issues, pregnancies, perceived sexual identity, vision and hearing limitations and disabilities) and how their health may affect learning is provided at building meetings, small group discussions, inservice presentations and during Teachers Teaching Teachers. Parent education is provided through e-mail, written correspondences, video presentations and special programs.

Child Advocate

As childcare advocates, school nurses work closely with staff and families to help facilitate that health care needs, provisions and accommodations are identified met. Advocacy can extend beyond these areas to include referrals for health services, counseling, rehabilitation centers, camps, community programs and DYFS.

Community Liaison

In the role of community liaison, the school nurse works with local groups and organizations to bring special programs into the school and from school out into the community. Schools have benefited from the walks for Juvenile Diabetes and Autism Speaks, Epilepsy research foundation, the society for the prevention of teen suicide, the Monmouth County Health Department, the Visiting Nurse Association, SquanStrong and the Leukemia & Lymphoma Society to name a few.

Recorder

A time consuming role for the school nurse is the role of confidential health records recorder. A legal health record must be maintained for each student and documentation for each incident of nursing care is required. Each entry must include the date, time, and presenting complaint, nursing assessment, plan of care, implementation and evaluation and referrals to other professionals, so a running account of each student's visits to the health office can be reflected and maintained through the health record. This account of the student's health office visits can also reflect a pattern of behavior or environmental issues in a classroom that can be addressed. Written communication from parents/guardians and health care providers is also reflected in the health record. Data must be collected and accurately recorded for state agencies and inspectors to review in relation to immunizations, communicable diseases and outbreaks such as MRSA, home instruction requests, Tuberculosis testing, waste management of contaminated needles and syringes, year round sports participation and employee injuries.

Manager

With a variety of roles the school nurse takes on and the variety of needs that must be balanced at any given time, the school nurse takes on the role of manager. As the building's medical officer, it is essential that the school nurse be consulted with on all health issues and to aggressively manage any health related problem that is likely to compromise learning. For this reason, adequate staff must be maintained in the health office to achieve this goal. The assignment of school nurses in the Manasquan School District should not be based solely on school population. Consideration should also be given for the special education population and for the nature and complexity of the

health concerns of the entire population in each building. Severity coding can be broken down into four levels: Nursing Dependent, Medically Fragile, Medically complex, and Health Concerns.

Level I: Nursing Dependent

Nursing dependent students are those whose medical condition require 24 hours a day, skilled nursing care to maintain life. Some may be dependent on technological devices for breathing, nutritional supplementation, or continuous nursing assessment and intervention throughout the day. Without the use and management of the appropriate medical technology and nursing care, the student will experience irreversible damage and death. An example of this is vertebral defect, anal atresia, cardiac defect, tracheoesophageal fistula, renal anomalies, and limb abnormalities (VACTERL).

Level II: Medically Fragile

Students with complicated health care needs in this category face each day with the possibility of a life-threatening emergency requiring the skill and judgement of the professional nurse. Examples may include but are not limited to severe seizure disorders requiring administration of medication, severe asthma, sterile procedures, tracheostomy care with suctioning, unstable and newly diagnosed students living with Type 1 Diabetes requiring blood sugar monitoring and insulin injections, diabetics with on insulin pumps and asthmatics requiring nebulizer treatments.

Level III: Medically Complex

Students with medically complex concerns require daily treatments or close monitoring by a professional nurse. They may have unstable physical and/or mental health disorders with the potentiality for a life-threatening event. Examples include but are not limited to: Cancer, Non Hodgkins Lymphoma, Acute Lymphoblastic Leukemia (ALL), Autoimmune Lymphoproliferative Syndrome (ALPS), Pediatric Autoimmune Neuropsychiatric Disorders (PANDAS), Postural Orthostatic Tachycardia Syndrome (POTS), Hypertrophic Cardiomyopathy, Concussion, ADD/ADHD, anaphylaxis, hyperglycemia, moderate to severe asthma, adolescent pregnancy, carefully times or titrated medications, medications with major side effects, unstable metabolic conditions and continuous or intermittent use of oxygen. An increasing amount of mental health disorders are being seen with diagnoses

of mild to severe anxiety, depression, bi polar disorder, school phobia, agoraphobia, avoidance disorder, and schizophrenia to name a few.

Level IV: Health Concerns

In the category of health concerns, the student's condition is currently uncomplicated and somewhat predictable. The student may require monitoring, varying from biweekly to annually, depending on the status. Examples include, but are not limited to: dental disease, orthopedic conditions requiring accommodations and status post orthopedic surgery, headaches, migraines, sensory impairments, food allergies, seasonal allergies, eczema, dietary restrictions, eating disorders and encopresis.

Physical Examinations:

- Coordinates and assists Dr. Stephen Rice with physical exams for transfer students who are uninsured or without a medical home, or as requested by the Child Study Team.

Sports Program:

- Reviews all sports packets, remediates all incomplete applications and places eligible students on a clearance list for tryouts for all seasons.
- Meet with Athletic Director, coaches and Athletic Trainer regularly to discuss student/athlete injuries, recovery, and compliance with NJSIAA Rules and Regulations.
- Notes any unknown health concerns, charts scoliosis, vital signs, vision and physical exam date on health card and health awareness list.

Working Papers:

- Prepares medical portion of working papers for qualified students seeking employment, and reviews safe working conditions.

State Mandates:

- Confer with Dr. Rice regarding health concerns as they arise throughout the school year. Discuss any changes in school policy and or state mandates as they relate to student health.

Workman's Compensation:

- Inform staff and faculty at opening day address that all work related injuries must be brought to the attention of the School Nurse who will contact workman's compensation.
- Disseminate information to staff members who are hurt on the job.
- Act as liaison for any injured employee until care is received for injury.

Immunizations:

- Reviews immunization records for all potential students.
- Updates immunization records as needed.
- Compiles data and prepares yearly report as required.
- Reviews all charts for compliance with law and notify parents of any non-compliant situations.
- Contact parents for non-compliance then record vaccines on permanent health cards.
- Completes County and State Immunization Report annually.
- Ensure that all religious exemptions follow state guidelines.

Health Awareness List:

- Compiles and lists all medical problems of students and staff.
- Update Health Awareness List regarding.
- Meet with faculty and staff members individually to discuss the health awareness concerns of all students.
- Create care plans and emergency plans based on health awareness list.

Physical Education Excuses:

- Compiles a computerized list of students that are excluded from PE due to injury, illness or surgery.
- Removes students from computer list when cleared for gym.
- Charts all PE excuses on health cards.
- Issue elevator pass, 5 minute corridor pass and safe room pass to all students who are casted or on crutches.

Transfer Students:

- Review all incoming physicals as well as immunizations for compliance prior to the first day of school and charts all immunizations and physicals on health card. Review, evaluate and discuss any compliance issues with parents on a need-be basis.

County Schools:

- Maintain health records on Manasquan School District students attending the following county schools who participate in the sports program MHS. Monmouth Vocational School, Academy of Allied Health and Sciences, Communications High School, High Technology High School, Bio-Tech High School, Marine Academy of Science and Technology.
- Maintain open communication with the school nurses in all the county schools on a daily basis, regarding injuries and illnesses.

Sending District Elementary Schools:

- Arrange to meet with each of the elementary school nurses from each of the seven sending districts to receive 9th grade charts, health files and to discuss care plans and individual health concerns.
- Send letters to freshman families regarding sports physicals and medication policy.

Heights and Weights:

- Reviews and records heights and weights on health card.
- Follow-up with parents on obvious deviations according to normal growth and development patterns and/or BMI (Body Mass Index).

Individual Health Care Plans (IHCP):

- Write, distribute and explain Emergency and IHCP's for students to faculty and paraprofessionals on a case to case basis.

Tuberculosis Screening:

- Administers test, reads and records Mantoux tests on new faculty members as well as on transfer students per state requirements.
- Refers positive reactors to Monmouth County Health Department for chest x-ray and treatment if indicated.
- Follows up on all positive results.
- Completes Annual TB Report and submit to the Department of Health and Senior Services.
- Order and arrange for pickup of all needed supplies from Monmouth County Health Department.

Audiological Screening:

- Students screened in accordance with NJ State Guidelines.
- Recording of such on NJ Health Card (A45), referrals to parents as needed with subsequent follow-up.

Vision Screening:

- Students screened in accordance with NJ State Guidelines.
- Recording of such on NJ Health Card (A45), referrals to parents as needed with subsequent follow-up.

Scoliosis Screening:

- Performs screening every other year according to state statutes on all students age 10-18.
- Referrals forwarded to parents and follow-ups on physician visit outcomes.

Health Room Supplies:

- Submits yearly order according to projected needs and budget.
- Organize all deliveries and confirm all items against packing slips and original orders.
- Storage of new and existing supplies.

Accident Reports:

- Prepares reports for staff/students who sustain injuries at school or during school sponsored events. Reports are forwarded to the principal and Board Office.
- Follow-up on any injuries with private health care provider.

Health Room Visits:

- Daily assessment, evaluation and treatment of the emotional and physical health concerns of students, staff and visitors on both an emergency and non-emergency basis and the recording of such on the Genesis software program and health records.
- Frequent parental contact by telephone and/or conferencing accomplished on a case-to-case basis. Increased contact due to age of population.
- Utilization of local first aid squad/paramedics, as required.
- Referrals to Division of Family and Youth Services as indicated after conferring with team members.

Medication:

- All daily, emergency and as needed medication orders are data entered into the GENESIS Medical program and logged in per student visit.
- Obtains proper physician/parent authorization on a yearly and as needed basis for all meds kept in health office and administered according to physician's specific orders.
- Asthma Action Plan for asthmatics obtained from physician/parent on all students requiring possible use of inhalant/nebulizer medications as per NJ State Mandate.
- Secures Emergency Allergy Action Plan of all students requiring the administration of epinephrine for acute allergic reaction and anaphylaxis.
- Charts all meds on individual permanent health cards (A-45).
- End of the year mailing to all parents whose student had medication in the nurse's office, including proper forms for the following school year as well as pick-up and drop-off procedures for medications.

EpiPen Delegates:

- Provide training and inservice on allergic reactions and recognition of anaphylaxis for faculty staff members who volunteer to be utilized as Epinephrine injection delegates
- Updates delegates as needed prior to field trips and school sponsored events.

Glucagon Delegates:

- Provide training and inservice on recognition of hyperglycemia and hypoglycemia reactions and recognition of anaphylaxis for faculty staff members who volunteer to be utilized as Epinephrine injection delegates
- Updates delegates as needed prior to field trips and school sponsored events.

AED Response Team:

- Maintains CPR/AED, Basic Life Support and Advanced Cardiac Life Support Certification through the American Red Cross.
- Serves as member of AED/Code Blue response team in compliance with Janet's Law.
- Oversees the placement, supply and maintenance of 8 AEDs on campus in the MHS.
- Coordinates with Manasquan Police Department and First Aid Squad on the location of AEDs.

First Aid Orders:

- Reviews and updates standing orders as needed with school physician.

Substitute Nurses:

- Reviews resumes, conducts personal interviews and recommends candidates for addition to our sub-nurse list for board approval.
- Orients sub nurses to office policy and procedures.
- Secures substitute nurse for all required field trips.
- Secures substitute nurse when scoliosis screening is being conducted.

Field Trips:

- Prepares first aid boxes, medications including inhalers/nebulizer treatments with accompanying equipment and corresponding physician's orders.
- Copy of Health Awareness List for the specified group included.

- Accompany students on overnight field trip as specified by the school principal.

Policy Development:

- Develops policy or changes existing policy as need arises according to Manasquan District Policy and/or State Mandates issued.
- Keeps administration and staff fully updated on any upcoming changes as necessary.

Continuing Education:

- Attends district in-services as well as outside workshops and in-services that relate directly to school nursing in order to grow professionally as well as to meet the 100 hour/5 year mandate required of all teachers.

NJ Family Care Coordinator:

- Packets are distributed to all incoming transfer students.
- Assists families with problems encountered during enrollment process.

Flu/Pneumonia Vaccine Clinic:

- Coordinate annual Flu and Pneumonia Vaccinations for District staff with the VNA of Central Jersey. Newsletter distributed to district staff with pre-registration in nurse's offices.

Annual Blood Drive:

- Assists with registration and education of potential donors of annual Blood Drive to benefit the Central Jersey Blood Center

Intervention & Referral Services Team:

- Active member of team
- Medical screening process performed and recorded on all new referrals.
- Individual findings discussed at meetings and appropriate referrals made at that time.

Membership:

- Maintains current membership in the County, State, and National School Nurse's Associations.

Staff In-service:

- In-services staff as required by mandates and/or needs, by principal's request.

Float Nurse Training:

- Continually updates and trains part-time nurse (Susan McCoy) on continually changing office procedures, State and county mandates and oversees individual daily projects.
- Provides feedback as needed.

Communicable Disease Referrals

- Disseminate information on infectious disease prevention and communicable diseases to faculty, staff and community based on the Monmouth County Board of Health and Centers for disease control and Prevention guidelines. Conduct surveillance, track clusters of diseases and monitor outbreaks.

Crisis Team:

- As an active member of the Crisis Team, the school nurse maintains required inservice training through the mental health association and the society for the prevention of teen suicide and has completed Mental Health First Aid certification.

Counseling and Health Management:

- Counseling, accommodations and referrals for LGBTQ population for their client. Discuss the information with

Home Instruction:

- Interpret requests from health care providers who are seeking home instruction (HI) for their patient/client.
- Communicates request to school physician and obtains any other material necessary to substantiate request for HI, which may include consultation with a specialist in the area that focuses on the diagnosis of the original claim.

Special concerns:

In preparing the Nursing Services Plan each year, it is critical to review not only population size, but also the severity of health concerns and associated time requirements to make complete assessments. State mandates that include training Epinephrine and Glucagon Delegates, and compliance with Janet's Law have added an additional strain on the daily operations of the health office, which is often staffed by one individual. The expanding responsibilities of the school district health offices are related to the increased number of medically and emotionally fragile students, the increased number of students being placed on home instruction for medical and mental health reasons, the increased number of students seeking to be excused from physical education, and the concentrated needs around processing and remediating over 900 student athletic pre participation sports physicals annually. Additional concerns which tax the office are tracking down immunization records on students who are permitted into the district on a provisional status and support to exclude them from school for non compliance. Students whose parents have claimed religious exemption from immunizations are of added concern and have to be cataloged as at risk for communicable diseases such as chicken pox and measles. When such events occur, health office notices of a communicable disease are disseminated to the department of health and to the community. Another concern is the counseling and detaining of students suspected for being under the influence of an illicit substance, in the health office. When such a situation occurs, the health office can be crippled for anywhere from one to three hours. These amplified conditions support the reinstatement of a third full time nurse in the district, which was voted on by referendum in 2004. This position had been removed without forewarning or concern on how a reduction in staff would impact the health office, and the state mandated annual screenings of the student population. A goal at this time is to reinstate the third district nurse full time position to be shared by both schools to ensure safe practice for our roughly 1800 student populations. Additionally employing a full time secretary or paraprofessional for the health office, would ensure that the school nurse is not working alone in the health office and that the health office is never left unattended.

The recommendation to the board of education based on the information included is the need for three full time school nurses for the district and a secretary/paraprofessional for each health office.

The Certified School Nurse develops and implements health services in accordance with the State of New Jersey Nurse Practice Act, The American Nurses Association (ANA) and The National Association of School Nurses (NASN) Standards of School Nursing, NJ Department of Education Health Services Guidelines, and the New Jersey State Interscholastic Athletic Association Recommended Guidelines. Practicing under these guidelines, the school nurse is committed to improving health outcomes and academic achievement for all students.

MANASQUAN HIGH SCHOOL

Grade Levels: Nine through Twelve

Student Elementary Population:

General Education Enrollment:

Special Education Enrollment:

Levels of Care:

Level I: Nursing Dependent

Level II: Medically Fragile

Level III: Medically Complex

Level IV: Health Concerns

MANASQUAN ELEMENTARY SCHOOL

Grade Levels: Pre-School through 8th Grade

Student Elementary Population:

General Education Enrollment:

Special Education Enrollment:

Levels of Care:

Level I: Nursing Dependent

Level II: Medically Fragile

Level III: Medically Complex

Level IV: Health Concerns

Respectfully submitted,

Cheryl Bontales, MSN, RN, CSN
School Nurse MHS

Date: _____

Gina Melillo, RN
School Nurse MES

Date: _____

Jacqueline Szenzenstein, BSN, RN, CSN
School District Float Nurse

Date: _____

Dr. Stephen Rice
School Physician

Date: _____

NEW JERSEY DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION PROGRAMS

BOARD OF EDUCATION POLICIES AND PROCEDURES
FOR ELIGIBILITY UNDER PART B OF THE IDEA
STATEMENT OF ASSURANCES FOR 2016-17

PART I - POLICIES

COUNTY CODE _____ COUNTY NAME _____

DISTRICT CODE _____ DISTRICT NAME _____

In accordance with Part B of the IDEA and *N.J.A.C. 6A:14-1.1, N.J.A.C. 6A:14-1.2(b) and (c)*, the district board of education shall adopt and assure compliance with the following policies: *(An * indicates that the policy/procedure is a new requirement that was not included in the policies/procedures adopted in 2009, underlining indicates that a model policy or procedure has been amended from the language in the policies/procedures adopted in 2009):*

Policy #1: All students with disabilities, who are in need of special education and related services, including students with disabilities attending nonpublic schools, regardless of the severity of their disabilities, are located, identified and evaluated according to *N.J.A.C. 6A:14-3.3*.

Policy #2: Homeless students are located, identified and evaluated according to *N.J.A.C. 6A:14-3.3*, and are provided special education and related services in accordance with the IDEA, including the appointment of a surrogate parent for unaccompanied homeless youths as defined in 42 U.S.C. §§11431 *et seq.*

Policy #3: Students with disabilities are evaluated according to *N.J.A.C. 6A:14-2.5* and 3.4.

Policy #4: An individualized education program is developed, reviewed, and as appropriate, revised according to *N.J.A.C. 6A:14-3.6* and 3.7.

Policy #5: To the maximum extent appropriate students with disabilities are educated in the least restrictive environment according to *N.J.A.C. 6A:14-4.2*.

Policy #6: Students with disabilities are included in statewide and districtwide assessment programs, with appropriate accommodations, where necessary, according to *N.J.A.C. 6A:14-4.10*. All students with disabilities will participate in statewide assessments or the applicable alternate assessment, in grades 3, 4, 5, 6, 7, 8, and high school in the applicable courses.

Policy #7: Students with disabilities are afforded the procedural safeguards required by *N.J.A.C. 6A:14-2.1 et seq.*, including appointment of a surrogate parent as set forth at *N.J.A.C. 6A:14-2.2*, when appropriate.

Policy #8: The rules set forth in N.J.A.C. 6A:14 ensure a free appropriate public education is available to all students with disabilities between the ages of three and 21, including students with disabilities who have been suspended or expelled from school.

1. The obligation to make a free, appropriate public education available to each eligible student begins no later than the student's third birthday and that an individualized education program is in effect for the student by that date;
2. If a child's third birthday occurs during the summer, the child's IEP team shall determine the date when services under the IEP will begin;
3. A free, appropriate public education is available to any student with a disability who needs special education and related services, even though the student is advancing from grade to grade;
4. The services and placement needed by each student with a disability to receive a free, appropriate public education are based on the student's unique needs and not on the student's disability; and
5. The services and placement needed by each student with a disability to receive a free, appropriate public education are provided in appropriate educational settings as close to the student's home as possible, and, when the IEP does not describe specific restrictions, the student is educated in the school he or she would attend if not a student with a disability.

Policy #9: Children with disabilities participating in early intervention programs assisted under IDEA Part C who will participate in preschool programs under this chapter will experience a smooth transition and have an individualized education program developed and implemented according to N.J.A.C. 6A:14-3.3(e) and N.J.A.C. 6A:14-3.7.

Policy #10: Full educational opportunity to all students with disabilities is provided.

Policy #11: The compilation, maintenance, access to and confidentiality of student records are in accordance with N.J.A.C. 6A:32-7.

Policy #12: Provision is made for the participation of students with disabilities who are placed by their parents in nonpublic schools according to N.J.A.C. 6A:14-6.1 and 6.2.

Policy #13: Students with disabilities who are placed in private schools by the district board of education, are provided special education and related services at no cost to their parents according to N.J.A.C. 6A:14-1.1 and N.J.A.C. 6A:14-7.5(b)3.

Policy #14: All personnel serving students with disabilities are highly qualified and appropriately certified and licensed, where a license is required, in accordance with State and Federal law, pursuant to N.J.A.C. 6A:14-1.2(b)13.

Policy #15: Pursuant to N.J.A.C. 6A:14-1.2(b)4, the in-service training needs for professional and paraprofessional staff who provide special education, general education or related services are identified and that appropriate in-service training is provided. The district board of education shall maintain information to demonstrate its efforts to:

1. Prepare general and special education personnel with the content knowledge and collaborative skills needed to meet the needs of children with disabilities;
2. Enhance the ability of teachers and others to use strategies, such as behavioral interventions, to address the conduct of students with disabilities that impedes the learning of students with disabilities and others;
3. Acquire and disseminate to teachers, administrators, school board members, and related services personnel, significant knowledge derived from educational research and other sources and how the district will, if appropriate, adopt promising practices, materials and technology;
4. Insure that the in-service training is integrated to the maximum extent possible with other professional development activities; and
5. Provide for joint training activities of parents and special education, related services and general education personnel.

Policy #16: Instructional materials will be provided to blind or print-disabled students in a timely manner, consistent with a plan developed by the district.

Policy #17: For students with disabilities who are potentially eligible to receive services from the Division of Developmental Disabilities in the Department of Human Services, the district will provide, pursuant to the Developmentally Disabled Uniform Application Act, N.J.S.A. 30:4-25.10 et seq. and N.J.A.C. 6A:14-1.2(b)17, the necessary materials to the parent to apply for such services.

Policy #18: When the school district utilizes electronic mail, parents are informed as to whether they may use electronic mail to submit requests to school officials regarding referral, identification, evaluation, classification, and the provision of a free, appropriate public education. If this is permitted, parents shall be informed of the procedures to access the electronic mail system and that they may not utilize electronic mail to provide written consent when the district provides written notice and seeks parental consent as required by N.J.A.C. 6A:14-1.2(b)18.

Policy #19: The school district will provide teacher aides and the appropriate general or special education teaching staff time for consultation on a regular basis as specified in each student's IEP, pursuant to N.J.A.C. 6A:14-4.5(d).

***Policy #20:** The school district has a plan in effect to establish stability in special education programming. The plan takes into account the consistency of the location, curriculum, and staffing in the provision of special education services as required by N.J.A.C. 6A:14-3.7(c)4.

***Policy #21:** The school district screens students who have exhibited one or more potential indicators of dyslexia or other reading disabilities in accordance with *N.J.S.A. 18A:40-5.1 et seq.*

PART II – PROCEDURES

In accordance with Part B of the IDEA and *N.J.A.C. 6A:14-1.1, N.J.A.C. 6A:14-1.2(b)* and (c), the district board of education shall assure compliance with the following policies and related procedures below:

Policy #1: All students with disabilities, who are in need of special education and related services, including students with disabilities attending nonpublic schools, regardless of the severity of their disabilities, are located, identified and evaluated according to *N.J.A.C. 6A:14-3.3*.

AND

Policy #2: Homeless students are located, identified and evaluated according to *N.J.A.C. 6A:14-3.3*, and are provided special education and related services in accordance with the IDEA, including the appointment of a surrogate parent for unaccompanied homeless youths as defined in 42 U.S.C. §§11431 *et seq.*

AND

Policy #7: Students with disabilities are afforded the procedural safeguards required by *N.J.A.C. 6A:14-2.1 et seq.* including appointment of a surrogate parent as set forth at *N.J.A.C. 6A:14-2.2*, when appropriate.

Pursuant to 20 U.S.C. §1412(a)(3), procedures to locate students with disabilities (child find) must ensure that:

- ☐ Person(s) responsible to conduct child find activities are identified.
- ☐ Child find activities are conducted for all children ages three through 21, who reside within the district or attend nonpublic schools within the district.
- ☐ Child find activities are conducted at least annually.
- ☐ Child find activities (meetings, printed materials and/or public service announcements) are conducted in the native language of the population, as appropriate.
- ☐ Child find activities address public and nonpublic students, including highly mobile students such as migrant and homeless students.

- ❑ Child find activities for nonpublic school students are comparable to activities conducted for public school students.
 - Child find activities for nonpublic school children provide for consultation with appropriate representatives of the nonpublic school and parents on how to carry out these activities.
- ❑ Child find activities include outreach to a variety of public and private agencies and individuals concerned with the welfare of students, such as clinics, hospitals, physicians, social service agencies and welfare agencies.

For charter schools, renaissance schools or state agencies, procedures must ensure that:

- ❑ Child find activities are limited to the population of students enrolled in the charter or renaissance school or served by the state agency.
- ❑ Person(s) to conduct child find activities are identified.
- ❑ Child find activities are conducted at least annually.
- ❑ Child find activities (meetings, printed materials and/or public service announcements) are conducted in the native language of the population, as appropriate.

Procedures for interventions in the general education program must ensure that:

- ❑ Criteria/steps for initiating interventions in the general education program are identified.
- ❑ Parents, teachers and other school professionals, as appropriate, are informed of the procedures to initiate interventions in the general education program.
- ❑ Activities are in place to determine whether the interventions are effective.
 - School personnel who are responsible for the implementation/evaluation of the interventions are identified; and
 - The type, frequency, duration and effectiveness of the interventions are documented.

Procedures for referral must ensure that:

- ❑ Steps are in place to refer students after it has been determined that interventions in the general education program are not effective in alleviating the educational difficulties.
- ❑ Steps are in place to refer students directly to the child study team when warranted.
- ❑ Steps are in place to refer students who may have a disability but are advancing from grade to grade.

- ❑ Steps for initiating a referral to the child study team by school personnel identify:
 - The information/documentation of student performance required in the referral;
 - Forms, if any, that are to be submitted by school personnel;
 - School personnel who are responsible to process referrals; and
 - Timelines for processing referrals including the date that initiates the 20-day timeline for conducting the referral/identification meeting.
- ❑ Steps for processing written referrals received from parents identify:
 - School personnel who are responsible to process referrals from parents; and
 - Timelines for processing referrals including the date that initiates the 20-day timeline for conducting the referral/identification meeting.
- ❑ School personnel, parents and agencies are informed of referral procedures.

For students with disabilities potentially in need of a surrogate parent, procedures must ensure that:

- ❑ A surrogate parent is provided to a student in accordance with *N.J.A.C. 6A:14-2.2* when:
 - The parent of the student cannot be identified or located.
 - An agency of the State has guardianship of the student and that agency has not taken steps to appoint a surrogate parent for the student.
 - The student is a ward of the state and no State agency has taken steps to appoint a surrogate parent for the student.
 - No parent can be identified for the student in accordance with *N.J.A.C. 6A:14-1.3* except a foster parent, the foster parent does not agree to serve as the student's parent and no State agency has taken steps to appoint a surrogate parent for the student.
 - The student is an unaccompanied homeless youth and no State agency has taken steps to appoint a surrogate parent for the student.
- ❑ The district will make reasonable efforts to appoint a surrogate parent within 30 days of its determination that a surrogate parent is required for a student.
- ❑ The district will appoint a person who will be responsible for appointing surrogate parents and overseeing the process. The responsible person will:
 - Determine whether there is a need for a surrogate parent for a student;
 - Contact any State agency that is involved with the student to determine whether the State has had a surrogate parent appointed for the student; and

- Make reasonable efforts to select and appoint a surrogate parent for the student within 30 days of determining that there is a need for a surrogate parent for the student,
- The district will establish a method for training surrogate parents that includes provision of information with respect to parental rights and procedural safeguards available to parents and students in accordance with *N.J.A.C. 6A:14*.
- The district will appoint a person that will be responsible for training surrogate parents;
 - The training of surrogate parents will ensure that surrogate parents have knowledge and skills that ensure adequate representation of the child with a disability;
 - The training will be designed to make surrogate parents familiar with State and federal requirements for assessment, individualized education program development, and parental rights with respect to the referral and placement process, including their rights with respect to seeking a due process hearing if they disagree with the local procedure or decisions;
 - Surrogate parents will be provided with copies of: the Parental Rights in Special Education booklet; *N.J.A.C. 6A:14*; the Special Education Process; Code Training Materials from the Department of Education Website; and other relevant materials; and
 - Surrogate parents will be provided information to enable them to become familiar with the nature of the child's disability.
- The district will ensure that:
- All persons serving as surrogate parents have no interest that conflicts with those of the student he or she represents;
 - All persons serving as surrogate parents possess knowledge and skills that ensure adequate representation of the student;
 - All persons serving as surrogate parents are at least 18 years of age;
 - If the school district compensates the surrogate parent for providing such services, a criminal history review of the person in accordance with *N.J.S.A. 18A:6-7.1* is completed prior to his or her serving as the surrogate parent; and
 - No person appointed as a surrogate parent will be an employee of the New Jersey Department of Education, the district board of education or a public or nonpublic agency that is involved in the education or care of the child.

Policy #3: Students with disabilities are evaluated according to *N.J.A.C. 6A:14-2.5* and 3.4.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-2.5* and 3.4, no additional written procedures are required.

Policy #4: An individualized education program is developed, reviewed and as appropriate, revised according to *N.J.A.C. 6A:14-3.6* and 3.7.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-2.6* and 3.7, no additional written procedures are required.

Policy #5: To the maximum extent appropriate, students with disabilities are educated in the least restrictive environment according to *N.J.A.C. 6A:14-4.2*.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-4.2*, no additional written procedures are required.

Policy #6: Students with disabilities are included in statewide and districtwide assessment programs, with appropriate accommodations, where necessary, according to *N.J.A.C. 6A:14-4.10*. All students with disabilities will participate in statewide assessments or the applicable alternate assessment, in grades 3, 4, 5, 6, 7, 8, and high school in the applicable courses.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-4.10*, no additional written procedures are required.

Policy #8: A free, appropriate public education is available to all students with disabilities between the ages of three and 21, including students with disabilities who have been suspended or expelled from school.

Procedures regarding the provision of a free, appropriate public education to students with disabilities who are suspended or expelled must ensure that:

- ☐ School officials responsible for implementing suspensions/expulsions in the district are identified.
- ☐ Each time a student with a disability is removed from his/her current placement for disciplinary reasons, notification of the removal is provided to the case manager.
- ☐ A system is in place to track the number of days a student with disabilities has been removed for disciplinary reasons.
- ☐ Suspension from transportation is counted as a day of removal if the student does not attend school.
 - If transportation is included in the student's IEP as a required related service, the school district shall provide alternate transportation during the period of suspension from the typical means of transportation.
- ☐ Removal for at least half of the school day is reported via the Electronic Violence and Vandalism Reporting System.

- ❑ If the district has an in-school suspension program, participation in the program is **not** considered a removal when determining whether a manifestation determination must be conducted if the program provides the following:¹
 - Opportunity for the student to participate and progress in the general curriculum;
 - Services and modifications specified in the student's IEP;
 - Interaction with peers who are not disabled to the extent they would have in the current placement; and
 - The student is counted as present for the time spent in the in-school suspension program.
- ❑ When a series of short-term removals will accumulate to more than 10 school days in the year:
 - School officials and the case manager consult to determine whether the removals create a change of placement according to *N.J.A.C. 6A:14-2.8(c)2*;
 - Written documentation of the consultation between school officials and the case manager is maintained;
 - If it is determined that there is no change in placement, school officials, the case manager and special education teacher consult to determine the extent to which services are necessary to:
 - Enable the student to participate and progress appropriately in the general education curriculum; and
 - Advance appropriately toward achieving the goals set out in the student's IEP; and
 - Written documentation of the consultation and services provided is maintained.
- ❑ Steps are in place to convene a meeting of the IEP team and, as necessary or required, conduct a functional behavioral assessment and review the behavioral intervention plan according to *N.J.A.C. 6A:14 Appendix A, Individuals with Disabilities Education Act Amendments of 2004 20 U.S.C. §1415 et seq.*

Procedures regarding the provision of a free, appropriate public education to preschool age students with disabilities must ensure that:

¹ For the purpose of documenting all removals, in-school suspension must be reported via the Electronic Violence and Vandalism Reporting System even if services were provided.

- ❑ Eligible preschool age children who are not participating in an early intervention program have an IEP in effect by their third birthday. Steps include:²

- Responding to referrals according to *N.J.A.C. 6A:14-3.3(e)*
- Having a program in place no later than 90 calendar days from the date of consent.

Procedures regarding the provision of a free, appropriate public education to students with disabilities who are advancing from grade to grade must ensure that:

- ❑ A student with a disability, who is advancing from grade to grade with the support of specially designed services, may continue to be eligible when:
 - As part of a reevaluation, the IEP team determines that the student continues to require specially designed services to progress in the general education curriculum; and
 - The use of functional assessment information supports the IEP team's determination.

Policy #9: Children with disabilities participating in early intervention programs assisted under IDEA Part C who will participate in preschool programs under this chapter will experience a smooth transition and have an individualized education program developed and implemented according to *N.J.A.C. 6A:14-3.3(e)* and *N.J.A.C. 6A:14-3.7*.³

- ❑ A child study team member of the district will participate in the preschool transition planning conference arranged by the designated service coordinator from the early intervention system and will:

- Review the Part C Individualized Family Service Plan for the child;
- Provide the parent(s) written district registration requirements;
- Provide the parents written information with respect to available district programs for preschool students, including general education placement options; and
- Provide the parent(s) a form to use to request that the Part C service coordinator be invited to the child's initial IEP meeting.

- ❑ The Part C service coordinator will be invited to the initial IEP meeting for a student transitioning from Part C to Part B.

Policy #10: Full educational opportunity to all students with disabilities is provided.

² This procedure does not apply to secondary school districts or charter schools that do not serve preschool age children.

³ This procedure does not apply to secondary school districts or charter schools that do not serve preschool age children.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-1.1*, no additional written procedures are required.

Policy #11: The compilation, maintenance, access to and confidentiality of student records are in accordance with *N.J.A.C. 6A:32-7*.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:32-7*, no additional written procedures are required.

Policy #12: Provision is made for the participation of students with disabilities who are placed by their parents in nonpublic schools according to *N.J.A.C. 6A:14-6.1* and 6.2.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-6.1* and 6.2, no additional written procedures are required.

Policy #13: Students with disabilities who are placed in private schools by the district board of education, are provided special education and related services at no cost to their parents according to *N.J.A.C. 6A:14-1.1(d)* and *N.J.A.C. 6A:14-7.5(b)3*.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-1.1* and 7.5(b)3, no additional written procedures are required.

Policy #14: All personnel serving students with disabilities are highly qualified and appropriately certified and licensed, where a license is required, in accordance with State and Federal law.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-1.2(b)13*, no additional written procedures are required.

Policy #15: The in-service training needs for professional and paraprofessional staff who provide special education, general education or related services are identified and that appropriate in-service training is provided. The district board of education shall maintain information to demonstrate its efforts to:

1. Prepare general and special education personnel with the content knowledge and collaborative skills needed to meet the needs of children with disabilities;
2. Enhance the ability of teachers and others to use strategies, such as behavioral interventions, to address the conduct of students with disabilities that impedes the learning of students with disabilities and others;

3. Acquire and disseminate to teachers, administrators, school board members, and related services personnel, significant knowledge derived from educational research and other sources and how the district will, if appropriate, adopt promising practices, materials and technology;

4. Insure that the in-service training is integrated to the maximum extent possible with other professional development activities; and

5. Provide for joint training activities of parents and special education, related services and general education personnel.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-1.2(b)14*, no additional written procedures are required.

Policy #16: Instructional materials will be provided to blind or print-disabled students in a timely manner.

☐ Instructional materials will be provided to blind or print-disabled students in accordance with a plan developed by the district. The plan will be the Individualized Education Program of each student with a disability, which will set forth the instructional materials needed, how they will be provided, and address any assistive technology needed to permit the student to utilize the materials.

Policy #17: For students with disabilities who are potentially eligible to receive services from the Division of Developmental Disabilities in the Department of Human Services, the district will provide, pursuant to the Uniform Application Act, *N.J.S.A. 30:4-25.10 et seq.*, the necessary materials to the parent to apply for such services.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-1.2(b)17*, no additional written procedures are required.

Policy #18: When the school district utilizes electronic mail, parents are informed as to whether they may use electronic mail to submit requests to school officials regarding referral, identification, evaluation, classification, and the provision of a free, appropriate public education. If this is permitted, parents shall be informed of the procedures to access the electronic mail system and that they may not utilize electronic mail to provide written consent when the district provides written notice and seeks parental consent as required by *N.J.A.C. 6A:14*.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-1.2(b)18*, no additional written procedures are required.

Policy #19: The school district will provide teacher aides and the appropriate general or special education teaching staff time for consultation on a regular basis as specified in each student's IEP.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-4.5(d)*, no additional written procedures are required.

***Policy #20:** The school district has a plan in effect to establish stability in special education programming. The plan takes into account the consistency of the location, curriculum, and staffing in the provision of special education services.

Procedures: Due to the specificity of the requirements at *N.J.A.C. 6A:14-3.7(c)4*, no additional written procedures are required.

***Policy #21:** The school district screens students who have exhibited one or more potential indicators of dyslexia or other reading disabilities in accordance with *N.J.S.A. 18A:40-5.1 et seq.* The district board of education shall maintain information to demonstrate its efforts to:

1. Select and implement age-appropriate screening instruments for the early diagnosis of dyslexia and other reading disabilities;
2. Ensure that each student enrolled in the district who has exhibited one or more potential indicators of dyslexia or other reading disabilities is screened for dyslexia and other reading disabilities using the selected screening tool no later than the student's completion of the first semester of second grade;
3. Develops a procedure to screen eligible newly-enrolled students in accordance with the legislation;
4. Ensures the screening is administered by a teacher or other teaching staff member properly trained in the screening process for dyslexia and other reading disabilities; and
5. Ensures that students who are diagnosed with dyslexia or other reading disability receive appropriate evidence-based interventions.

NEW JERSEY DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION PROGRAMS

ASSURANCE STATEMENT

To demonstrate compliance with Part B of the IDEA and N.J.A.C. 6A:14-1.1(b)
and (c), the _____ District Board of Education, or
Board of the _____ Charter/Renaissance School
shall assure compliance with the above stated policies and procedures.

Director of Special Education Services* Date

Chief School Administrator** Date

Sign the Assurance Statement and attach documentation (board resolution) that the policies
have been adopted. Submit to the county office of education by April 7, 2017.

*For a charter or renaissance school, the equivalent to the Director of Special Education Services.

**For a charter or renaissance school, the equivalent to the Chief School Administrator.