

Prohibition on Recommendations for Psychotropic Drugs

In accordance with Conn. Gen. Stat. § 10-212b, The tbe Board of Education prohibits school personnel from recommending the use of psychotropic drugs for any child. Moreover, personnel may not require that a child obtain a prescription for a controlled substance (as defined in the Controlled Substances Act, 21 U.S.C. § 801 et seq.) in order for the child to: 1) attend school; 2) receive an initial evaluation or reevaluation to determine a child's eligibility for special education; or 3) receive special education and related services. Notwithstanding the foregoing, school health or mental health personnel may recommend that a child be evaluated by an appropriate medical practitioner and school personnel may consult with such practitioner with the consent of the parent(s) or guardian(s) of such child, in accordance with the procedures outlined below.

I. Definitions

For the purposes of this policy, the following definitions apply: ~~the term, “recommend” shall mean to directly or indirectly suggest that a child should use psychotropic drugs.~~

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

B. Recommend means to directly or indirectly suggest that a child should use psychotropic drugs.

C. School health or mental health personnel means:

1. school nurses or nurse practitioners appointed pursuant to Conn. Gen. Stat. § 10-212;

2. school medical advisors appointed pursuant to Conn. Gen. Stat. § 10-205;

- 31 3. school psychologists;
- 32 4. school social workers;
- 33 5. school counselors;
- 34 6. school administrators;
- 35 7. other school personnel (such as a teacher designated as a child's Case Manager)
36 who have been identified by a Planning and Placement Team, Section 504
37 team, Student Assistance Team or similar group of district professionals as the
38 person responsible for communication with a parent or guardian about a child's
39 need for medical evaluation;
- 40 8. a school professional staff member designated by the Superintendent to
41 communicate with a child's parent or guardian about a child's need for medical
42 evaluation.

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44 II. Procedures

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- 46 A. A school health or mental health personnel, as defined above, may communicate
47 with other school personnel about a child who may require a recommendation for
48 a medical evaluation, provided that 1) there is a legitimate educational interest in
49 sharing such information; and 2) such communication shall remain confidential,
50 to the extent required by law.
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- 52 B. A school health or mental health personnel, as defined above, may communicate a
53 recommendation to a parent or guardian that a child be evaluated by a medical
54 practitioner provided that 1) based on such person's professional experience,
55 objective factors indicate that a medical evaluation may be necessary to address
56 concerns relating to the child's education and overall mental health; and 2) any
57 communication includes the basis for the recommendation.
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59 C. If a parent or guardian determines that it is necessary to share medical
60 information, including results of any medical evaluation, with school personnel,
61 he or she may do so at any time. School personnel who receive such information
62 directly from a parent must maintain the confidentiality of such information, to the
63 extent required by law.

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65 D. Any school personnel with a legitimate educational interest in obtaining
66 information from a child's medical practitioner outside the school who is not a
67 school employee must obtain prior, written consent from the child's parent or
68 guardian to communicate with such outside medical practitioners. Any school
69 health or mental health personnel, as defined above, may request written consent
70 from the parent or guardian. To be valid, the written consent must: 1) be signed
71 by the child's parent or guardian; 2) be dated; 3) provide the child's name; 4)
72 provide the name of the medical practitioner and relevant contact information, to
73 the extent known; and 5) indicate the scope of the consent.

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75 Nothing in this policy shall be construed to prevent school personnel from consulting
76 with a medical practitioner who has information concerning a child, as long as the school
77 district has obtained consent from the parent(s) or guardian(s) of the child, in accordance
78 with Section II.D., above. Nothing in this policy shall prevent a Planning and Placement
79 Team from recommending a medical evaluation as part of an initial evaluation or
80 reevaluation, as needed to determine a child's (i) eligibility for special education and
81 related services, or (ii) educational needs for an individualized education program.

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83 Legal References:

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85 Conn. Gen. Stat. § 10-76d Duties and powers of boards of education
86 to provide special education programs and
87 services.

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89 Conn. Gen. Stat. § 10-212b Policies prohibiting the recommendation of
90 psychotropic drugs by school personnel.

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92 34 C.F.R. § 300.174 Prohibition on mandatory medication.
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96 ~~However, school health or mental health personnel, including school nurses or nurse~~
97 ~~practitioners and the District's medical advisor, school psychologists, school social~~
98 ~~workers, school counselors, and the Director of Special Education, may recommend that a~~
99 ~~student be evaluated by an appropriate medical practitioner. Further, upon the consent of~~
100 ~~the student's parent(s) or guardian(s), school personnel may consult with the medical~~
101 ~~practitioner regarding such use.~~

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103 ~~Communications between and among school health, mental health personnel and other~~
104 ~~school personnel pertaining to a child in possible need of a recommendation for a medical~~
105 ~~evaluation shall be accomplished through the schools' Student Study Teams (SST) and /~~
106 ~~or Planning and Placement Teams (PPT) and its procedures, in conformity with state and~~
107 ~~federal special education statutes.~~

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109 ~~The Board of Education directs personnel to recognize that according to state statutes, the~~
110 ~~refusal of a parent or other person having control of a child to administer or consent to the~~
111 ~~administration of any psychotropic drug to the child shall not, in and of itself, constitute~~
112 ~~grounds for the Department of Children and Families (DCF) to take such child into~~
113 ~~custody or for any court of competent jurisdiction to order that such child be taken into~~
114 ~~custody by the Department, unless such refusal causes such child to be neglected or~~
115 ~~abused, as defined in C.G.S. 46h.~~

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117 ~~Nothing in this policy shall be construed to prohibit a Planning and Placement Team~~
118 ~~(PPT) from discussing with parent(s) and / or guardian(s) of a child the appropriateness of~~
119 ~~consultation with, or evaluation by, medical practitioners; or to prohibit school personnel~~
120 ~~from consulting with appropriate medical practitioners with the consent of the parent(s)~~
121 ~~and / or guardian(s) of a child.~~

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

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127 (~~cf. 5120.4.2.5 Child Abuse~~)

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129 ~~Legal Reference: Connecticut General Statutes~~

130 ~~10-212b Policies prohibiting the recommendation of psychotropic~~
131 ~~drugs by school personnel (as amended by PA 03-211)~~

132 ~~P.A. 01-124: An Act Concerning Recommendations For and Refusals~~
133 ~~of the Use of Psychotropic Drugs by Children and Utilization Review~~

134 ~~Determinations related to Mental and Nervous Conditions—~~

135 ~~46b-120 Definitions~~

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142 Date of Revision: February 8, 2006

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