

# Document Status: Draft Update

## General Personnel

### 5:80 Court Duty

The District will pay full salary during the time an employee is absent due to court duty or, pursuant to a subpoena, serves as a witness or has a deposition taken in any school-related matter pending in court. [PRESSPlus1](#)

The District will deduct any fees that an employee receives for such duties court duty, less mileage and meal expenses, from the employee's compensation, or make arrangements for the employee to endorse the fee check to the District.

An employee should give at least five days' prior notice of pending court duty to the District.

### Witness Duty

The District will pay full salary during the time a licensed employee is absent due to a subpoena to serve as a witness in a trial or have a deposition taken in any school-related matter pending in court. [Q1](#)

### Jury Duty

The District will pay full salary during the time a licensed employee is absent due to jury duty. [Q2](#)

LEGAL REF.:

105 ILCS 5/10-20.7.

705 ILCS 305/4.1, Jury Act.

Adopted: March 23, 2020

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### Questions and Answers:

\*\*\*Required Question 1. The School Code mandates this provision for certificated [licensed] employees serving witness duty. 105 ILCS 5/10-20.7. Despite the statute's limitation to licensed employees, many boards apply this language to educational support personnel.

Would the Board like to apply this language to both licensed and educational support personnel?

- No (default)
- Yes (IASB will strike "licensed" from the text and correct the grammar.)

\*\*\*Required Question 2. The School Code mandates this provision for certificated [licensed] employees serving jury duty. 105 ILCS 5/10-20.7. In contrast, the Jury Act requires that employers give 5:80

any employee time off from employment for jury duty, but it does not require that employers pay the employee while on jury duty. 705 ILCS 305/4.1. Despite the statute's limitation to licensed employees, many boards apply this language to educational support personnel.

Would the Board like to apply this language to both licensed and educational support personnel?

- No (default)
  - Yes (IASB will strike licensed from the text and correct the grammar.)
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### **PRESSPlus Comments**

PRESSPlus 1. In response to a 5-year review, this text is relocated under new Witness Duty and Jury Duty subheadings, below. **Issue 109, May 2022**

# *Document Status: Draft Update*

## STUDENTS

### **7:15 Student and Family Privacy Rights**

#### Surveys

All surveys requesting personal information from students, as well as any other instrument used to collect personal information from students, must advance or relate to the District's educational objectives as identified in Board of Education policy 6:10, *Educational Philosophy and Objectives*, or assist students' career choices. This applies to all surveys, regardless of whether the student answering the questions can be identified or and regardless of who created the survey.

#### Surveys Created by a Third Party

Before a school official or staff member administers or distributes a survey or evaluation created by a third party to a student, the student's parent(s)/guardian(s) may inspect the survey or evaluation, upon their request and within a reasonable time of their request.

This section applies to every survey: (1) that is created by a person or entity other than a District official, staff member, or student, (2) regardless of whether the student answering the questions can be identified, and (3) regardless of the subject matter of the questions.

#### Survey Requesting Personal Information

School officials and staff members shall not request, nor disclose, the identity of any student who completes any survey or evaluation (created by any person or entity, including the District) containing one or more of the following items:

1. Political affiliations or beliefs of the student or the student's parent/guardian.
2. Mental or psychological problems of the student or the student's family.
3. Behavior or attitudes about sex.
4. Illegal, anti-social, self-incriminating, or demeaning behavior.
5. Critical appraisals of other individuals with whom students have close family relationships.
6. Legally recognized privileged or analogous relationships, such as those with lawyers, physicians, and ministers.
7. Religious practices, affiliations, or beliefs of the student or the student's parent/guardian.
8. Income other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program.

The student's parent(s)/guardian(s) may:

1. Inspect the survey or evaluation upon, and within a reasonable time of, their request, and/or
2. Refuse to allow their child to participate in the activity described above. The school shall not penalize any student whose parent(s)/guardian(s) exercised this option.

#### Instructional Material

A student's parent(s)/guardian(s) may inspect, upon their request, any instructional material used as part of their child's educational curriculum within a reasonable time of their request.

The term "instructional material" means instructional content that is provided to a student, regardless of its format, printed or representational materials, audio-visual materials, and materials in electronic or digital formats (such as materials accessible through the Internet). The term does not include academic tests or academic assessments.

### Physical Exams or Screenings

No school official or staff member shall subject a student to a non-emergency, invasive physical examination or screening as a condition of school attendance. The term *invasive physical examination* means any medical examination that involves the exposure of private body parts, or any act during such examination that includes incision, insertion, or injection into the body, but does not include a hearing, vision, or scoliosis screening.

The above paragraph does not apply to any physical examination or screening that:

1. Is permitted or required by an applicable State law, including physical examinations or screenings that are permitted without parental notification.
2. Is administered to a student in accordance with the Individuals with Disabilities Education Act ([20 U.S.C. §1400 et seq.](#)).
3. Is otherwise authorized by Board policy.

### Prohibition on Selling or Marketing Students' Personal Information ~~Is Prohibited~~ [PRESSplus1](#)

No school official or staff member shall market or sell personal information concerning students (or otherwise provide that information to others for that purpose). The term *personal information* means individually identifiable information including: (1) a student or parent's first and last name, (2) a home or other physical address (including street name and the name of the city or town), (3) a telephone number, (4) a Social Security identification number or (5) driver's license number or State identification card.

Unless otherwise prohibited by law, the above paragraph does not apply: (1) if the student's parent(s)/guardian(s) have consented; or (2) to the collection, disclosure or, use of personal information collected from students for the exclusive purpose of developing, evaluating or providing educational products or services for, or to, students or educational institutions, such as the following:

1. College or other postsecondary education recruitment, or military recruitment.
2. Book clubs, magazines, and programs providing access to low-cost literary products.
3. Curriculum and instructional materials used by elementary schools and secondary schools.
4. Tests and assessments to provide cognitive, evaluative, diagnostic, clinical, aptitude, or achievement information about students (or to generate other statistically useful data for the purpose of securing such tests and assessments) and the subsequent analysis and public release of the aggregate data from such tests and assessments.
5. The sale by students of products or services to raise funds for school-related or education-related activities.
6. Student recognition programs.

Under no circumstances may a school official or staff member provide a student's *personal information* to a business organization or financial institution that issues credit or debit cards.

## Notification of Rights and Procedures

The Superintendent or designee shall notify students' parents/guardians of:

1. This policy as well as its availability upon request from the general administration office.
2. How to opt their child out of participation in activities as provided in this policy.
3. The approximate dates during the school year when a survey requesting personal information, as described above, is scheduled or expected to be scheduled.
4. How to request access to any survey or other material described in this policy.

This notification shall be given to parents/guardians at least annually, at the beginning of the school year, and within a reasonable period after any substantive change in this policy.

## Transfer of Rights

The rights provided to parents/guardians in this policy transfer to the student when the student turns 18 years old, or is an emancipated minor.

LEGAL REF.:

[20 U.S.C. §1232h](#), Protection of Pupil Rights Act.

[105 ILCS 5/10-20.38.](#)

325 ILCS 17/, Children's Privacy Protection and Parental Empowerment Act.

~~105 ILCS 5/10-20.38.~~

CROSS REF.: 2:260 (Uniform Grievance Procedure), 6:210 (Instructional Materials), 6:260 (Complaints About Curriculum, Instructional Materials, and Programs), 7:130 (Student Rights and Responsibilities)

~~ADOPTED: January 28, 2019~~

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## **PRESSPlus Comments**

PRESSPlus 1. Compare *personal information* under the Protection of Pupil Rights Act (PPRA) and the Children's Privacy Protection and Parental Empowerment Act (CPPPEA) with *covered information* under the Student Online Personal Protection Act (SOPPA) (105 ILCS 85/), which districts are always prohibited from selling, renting, leasing, or trading. 105 ILCS 85/26. *Covered information* is broadly defined as personally identifiable information of students (or linked to students) that is shared with an *operator* of a website, online service, or application that is used primarily for K-12 purposes and is designed and marketed for K-12 purposes. Therefore, in cases where the *covered information* is collected, disclosed, or used that also meets the definition of *personal information* under this policy, the PPRA and CPPPEA exceptions to the prohibition on selling students' personal information may not be available. Consult the board attorney for further guidance in these situations, and see sample policy 7:345, *Use of Educational Technologies; Student Data Privacy and Security*, for more information about SOPPA requirements. **Issue 109, May 2022**

# Document Status: Draft Update

## BOARD OF EDUCATION

### 2:230 Public Participation at Board of Education Meetings and Petitions to the Board

~~For an overall minimum of 30 minutes d~~During each regular and special open meeting of the Board, [PRESSPlus1](#) any person may comment to or ask questions of the Board (*public participation*), subject to the reasonable constraints established and recorded in this policy's guidelines below. [Q1](#) The Board listens to comments or questions during public participation; responses to comments to or questions of the Board are most often managed through policy 3:30, Chain of Command. [PRESSPlus2](#) ~~During public participation, there will be a 20-minute minimum total length of time for any one subject. When public participation takes less time than these minimums, it shall end.~~

To preserve sufficient time for the Board to conduct its business, any person appearing before the Board is expected to follow these guidelines:

1. Address the Board only at the appropriate time as indicated on the agenda and when recognized by the Board President. This includes following the directives of the Board President. [PRESSPlus3](#) to maintain order and decorum for all.
2. Use a sign-in sheet, if requested. [PRESSPlus4](#)
3. Identify oneself and be brief. Ordinarily, the time for any one person to address the Board during public participation shall be limited to five minutes. In unusual circumstances, and when an individual has made a request to speak for a longer period of time, the Board President may allow a person may be allowed to speak for more than five minutes. If multiple individuals wish to address the Board on the same subject, the group is encouraged to appoint a spokesperson.
4. Observe, when necessary and appropriate, the Board President's authority to:
  - a. ~~Shortening of~~ the time for each person to address the Board during public participation to conserve time and give the maximum number of people an opportunity to speak; and/or
  - b. ~~Expansion of the overall minimum of 30 minutes for public participation and/or the 20-minute minimum total length of time for any one subject; and/or~~
  - c. ~~Determination of~~ procedural matters regarding public participation not otherwise covered in Board policy.
4. Conduct oneself with respect and civility toward others and otherwise abide by Board policy 8:30, *Visitors to and Conduct on School Property.*

Petitions or written correspondence to the Board shall be presented to the Board in the next regular Board packet.

LEGAL REF.:

105 ILCS 5/10-6 and 5/10-16.

5 ILCS 120/2.06, Open Meetings Act.

~~105 ILCS 5/10-6 and 5/10-16.~~

CROSS REF.: 2:220 (Board of Education Meeting Procedure), 8:10 (Connection with the Community), 8:30 (Visitors to and Conduct on School Property)

Adopted: September 23, 2019

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## Questions and Answers:

### \*\*\*Required Question 1. **Consult with the board attorney for guidance before adopting a maximum time limit for public participation; public comment rules are frequently challenged.**

The Ill. Public Access Counselor (PAC) has issued only unpublished, non-binding opinions approving of 30- and 60-minute overall time limits for public comment under OMA. The PAC has issued a binding opinion finding that a public body violated OMA when, pursuant to an unrecorded rule, it limited public comment on a controversial topic to 15 minutes. Public Access Opinion (PAO) 19-2. The PAC noted that while the lack of an adopted policy on the time period for public comment did not “necessarily mean that public comment must be allowed to continue indefinitely,” the public body presented “no evidence that limiting comments was necessary to maintain decorum or that extending the comment period would have unduly interfered with the orderly transaction of public business.”

If the Board would like to establish a maximum time limit for public participation, IASB will revise the first sentence of the paragraph as follows:

For a maximum of 60 minutes ~~During~~ each regular and special open meeting of the Board, any person may comment to or ask questions of the School Board (*public participation*), subject to the reasonable constraints established and recorded in this policy’s guidelines below. The time limit for public participation at a meeting may be extended upon the majority vote of the Board members at the regular or special meeting.

If a board wants to establish a time limit other than 60 minutes, substitute with the time limit desired. Note that any extension of a public comment period cannot be based on the viewpoint of a speaker(s).

Would the Board like to establish a maximum time limit for public participation?

- No (default)
  - Yes, the Board would like to establish a maximum time limit of 60 minutes.
  - Yes, the Board would like to establish a time limit other than 60 minutes. What time limit has the board established? (Enter the number of minutes.):
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## PRESSPlus Comments

PRESSPlus 1. Updated in response to subscriber feedback regarding time minimums and maximums for public participation during school board meetings and for continuous improvement. Customize this policy to ensure it is responsive to the community’s public participation needs.

While it does not apply directly to school boards, the Empowering Public Participation Act, 5 ILCS 850/, added by P.A. 102-348, prohibits law enforcement agencies or officers employed by them from intentionally conducting background checks of individuals based solely on the fact that they are speaking at an open meeting of a public body. Consult the board attorney for a discussion related to the appropriateness of board members and school officials using search engines and/or other social media platforms to search for information about individuals speaking during public

participation. **Issue 109, May 2022**

PRESSPlus 2. The law does not require board members to respond during public participation, and best practices for meetings instruct board members to refrain from engaging in commentary with members of the public during public participation. **Issue 109, May 2022**

PRESSPlus 3. Policy 2:110, *Qualifications, Term, and Duties of Board Officers*, governs the board president's duties, one of which is to preside at all meetings, including presiding over public participation and enforcing this policy. Enforcing this policy is key to the board conducting a successful meeting. The board president should speak with the board attorney to: (1) craft opening statements for the public participation portion of the meeting related to enforcement of this policy and consequences for violating it or any other related board policies, and (2) discuss whether the presence of security and/or law enforcement is advisable, especially when public participation is expected to be long or contentious. For a resource on best practices for managing challenging public comment periods, including a sample opening statement, see: [www.iasb.com/policy-services-and-school-law/guidance-and-resources/managing-challenging-public-comment-periods/](http://www.iasb.com/policy-services-and-school-law/guidance-and-resources/managing-challenging-public-comment-periods/) and other learning opportunities through IASB's Online Learning Center, at: [www.iasb.com/conference-training-and-events/training/online-learning/online-courses/](http://www.iasb.com/conference-training-and-events/training/online-learning/online-courses/). **Issue 109, May 2022**

PRESSPlus 4. Optional. A public commenter cannot be excluded for refusing to provide his or her home address. PAO 14-9. Generally, a board should consult with its attorney regarding the practice of excluding public commenters for reasons relating to the sign-in sheet. **Issue 109, May 2022**

## *Document Status: Draft Update*

### INSTRUCTION

#### **6:290 Homework**

Homework is part of the District's instructional program and has the overarching goal of increasing student achievement. Homework is assigned to further a student's educational development and is an application or adaptation of a classroom experience. The Superintendent shall provide guidance to ensure that homework:

1. Is used to reinforce and apply previously covered concepts, principles, and skills;
2. Is not assigned for disciplinary purposes;
3. Serves as a communication link between the school and parents/guardians;
4. Encourages independent thought, self-direction, and self-discipline; and
5. Is of appropriate frequency and length, and does not become excessive, according to the teacher's best professional judgment.

Missed Homework [PRESSPlus1](#)

Students absent for a valid cause may make up missed homework in a reasonable timeframe per policy 7:70, *Attendance and Truancy*.

CROSS REF.: 7:70 (Attendance and Truancy)

ADOPTED: January 28, 2019

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#### **PRESSPlus Comments**

PRESSPlus 1. Optional. Updated in response to a 5-year review to align with sample policy 7:70, *Attendance and Truancy*. **Issue 109, May 2022**

## *Document Status: Draft Update*

### STUDENTS

#### **7:270 Administering Medicines to Students**

Students should not take medication during school hours or during school-related activities unless it is necessary for a student's health and well-being. When a student's licensed health care provider and parent(s)/guardian(s) believe that it is necessary for the student to take a medication during school hours, or school-related activities, the parent/guardian must request that the school dispense the medication to the child and otherwise follow the District's procedures on dispensing medication.

No School District employee shall administer to any student, or supervise a student's self-administration of, any prescription or non-prescription medication until a completed and signed *School Medication Authorization Form (SMA Form)* is submitted by the student's parent(s)/guardian(s). No student shall possess or consume any prescription or non-prescription medication on school grounds or at a school-related function other than as provided for in this policy and its implementing procedures.

Nothing in this policy shall prohibit any school employee from providing emergency assistance to students, including administering medication.

The Building Principal shall include this policy in the Student Handbook and shall provide a copy to the parents/guardians of students within 15 days of student enrollment.

#### Self-Administration of Medication

A student may possess and self-administer an epinephrine injector, e.g., EpiPen®, and/or asthma medication prescribed for use at the student's discretion, provided the student's parent/guardian has completed and signed an *SMA Form*. The Superintendent or designee will ensure an Emergency Action Plan is developed for each self-administering student.

A student may self-administer medication required under a *qualifying plan*, provided the student's parent/guardian has completed and signed an *SMA Form*. A qualifying plan means: (1) an asthma action plan, (2) an Individual Health Care Action Plan, (3) an Ill. Food Allergy Emergency Action Plan and Treatment Authorization Form, (4) a plan pursuant to Section 504 of the federal Rehabilitation Act of 1973, or (5) a plan pursuant to the federal Individuals with Disabilities Education Act.

The District shall incur no liability, except for willful and wanton conduct, as a result of any injury arising from a student's self-administration of medication, including asthma medication or epinephrine injectors, or medication required under a qualifying plan. A student's parent/guardian must indemnify and hold harmless the District and its employees and agents, against any claims, except a claim based on willful and wanton conduct, arising out of a student's self-administration of an epinephrine injector, asthma medication, and/or a medication required under a qualifying plan.

#### School District Supply of Undesignated Epinephrine Injectors

The Superintendent or designee shall implement [Section 22-30\(f\)](#) of the School Code and maintain a supply of undesignated epinephrine injectors in the name of the District and provide or administer

them as necessary according to State law. *Undesignated epinephrine injector* means an epinephrine injector prescribed in the name of the District or one of its schools. A school nurse or trained personnel, as defined in State law, may administer an undesignated epinephrine injector to a person when they, in good faith, believe a person is having an anaphylactic reaction. Each building administrator and/or his or her corresponding school nurse shall maintain the names of trained personnel who have received a statement of certification pursuant to State law.

### School District Supply of Undesignated Glucagon

The Superintendent or designee shall implement [105 ILCS 145/27](#) and maintain a supply of undesignated glucagon in the name of the District in accordance with manufacturer's instructions.

When a student's prescribed glucagon is not available or has expired, a school nurse or delegated care aide may administer undesignated glucagon only if he or she is authorized to do so by a student's diabetes care plan.

### Administration of Medical Cannabis

The Compassionate Use of Medical Cannabis Program Act allows a *medical cannabis infused product* to be administered to a student by one or more of the following individuals:

1. A parent/guardian of a student who is a minor who registers with the Ill. Dept. of Public Health (IDPH) as a *designated caregiver* to administer medical cannabis to their child. A designated caregiver may also be another individual other than the student's parent/guardian. Any designated caregiver must be at least 21 years old and is allowed to administer a *medical cannabis infused product* to a child who is a student on the premises of his or her school or on his or her school bus if:
  - a. Both the student and the designated caregiver possess valid registry identification cards issued by IDPH;
  - b. Copies of the registry identification cards are provided to the District;
  - c. That student's parent/guardian completed, signed, and submitted a *School Medication Authorization Form - Medical Cannabis*; and
  - d. After administering the product to the student, the designated caregiver immediately removes it from school premises or the school bus.
2. A properly trained school nurse or administrator, who shall be allowed to administer the *medical cannabis infused product* to the student on the premises of the child's school, at a school-sponsored activity, or before/after normal school activities, including while the student is in before-school or after-school care on school-operated property or while being transported on a school bus.
3. The student him or herself when the self-administration takes place under the direct supervision of a school nurse or administrator.

*Medical cannabis infused product* (product) includes oils, ointments, foods, and other products that contain usable cannabis but are not smoked or vaped. Smoking and/or vaping medical cannabis is prohibited.

The product may not be administered in a manner that, in the opinion of the District or school, would create a disruption to the educational environment or cause exposure of the product to other students. A school employee shall not be required to administer the product.

Discipline of a student for being administered a product by a designated caregiver, or by a school nurse or administrator, or who self-administers a product under the direct supervision of a school nurse or administrator pursuant to this policy is prohibited. The District may not deny a student attendance at a school solely because he or she requires administration of the product during school hours.

#### Void Policy

The **School District Supply of Undesignated Epinephrine Injectors** section of the policy is void whenever the Superintendent or designee is, for whatever reason, unable to: (1) obtain for the District a prescription for undesignated epinephrine injectors from a physician or advanced practice nurse licensed to practice medicine in all its branches, or (2) fill the District's prescription for undesignated school epinephrine injectors.

The **School District Supply of Undesignated Glucagon** section of the policy is void whenever the Superintendent or designee is, for whatever reason, unable to: (1) obtain for the District a prescription for glucagon from a qualifying prescriber, or (2) fill the District's prescription for undesignated school glucagon.

The **Administration of Medical Cannabis** section of the policy is void and the District reserves the right not to implement it if the District or school is in danger of losing federal funding.

#### Administration of Undesignated Medication

Upon any administration of an undesignated medication permitted by State law, the Superintendent or designee(s) must ensure all notifications required by State law and administrative procedures occur.

#### Undesignated Medication Disclaimers

Upon implementation of this policy, the protections from liability and hold harmless provisions applicable under State law apply.

No one, including without limitation, parents/guardians of students, should rely on the District for the availability of undesignated medication. This policy does not guarantee the availability of undesignated medications. Students and their parents/guardians should consult their own physician regarding these medication(s).

#### LEGAL REF.:

[105 ILCS 5/10-20.14b](#), [5/10-22.21b](#), [5/22-30](#), and [5/22-33](#).

[105 ILCS 145/](#), Care of Students with Diabetes Act.

[410 ILCS 130/](#), Compassionate Use of Medical Cannabis Program Act, ~~and scheduled to be repealed on July 1, 2020.~~

[720 ILCS 550/](#), Cannabis Control Act.

[23 Ill.Admin.Code §1.540](#).

CROSS REF.: 7:285 ([Food Allergy Anaphylaxis Prevention, Response, and Management Program](#)) [PRESSPlus1](#)

Adopted: December 16, 2019

## **PRESSPlus Comments**

PRESSPlus 1. Boards must adopt a policy that addresses the prevention of anaphylaxis and a district's response to medical emergencies resulting from anaphylaxis. See policy 7:285, *Anaphylaxis Prevention, Response, and Management Program*. Due to the structure of the School Code and the IASB Policy Reference Manual, policy 7:285, *Anaphylaxis Prevention, Response, and Management Program*, does not address the administration of epinephrine and instead refers to this policy 7:270, *Administering Medicine to Students*. The accompanying administrative procedure for policy 7:285, 7:285-AP, *Anaphylaxis Prevention, Response, and Management Program*, is available at **PRESS Online** by logging in at [www.iasb.com](http://www.iasb.com). **Issue 109, May 2022**

## *Document Status: Draft Update - Rewritten*

### **STUDENTS**

#### **7:285 Anaphylaxis Prevention, Response, and Management Program**

*Title has been updated. Original Title: Food Allergy Management Program*

School attendance may increase a student's risk of exposure to allergens that could trigger anaphylaxis. [PRESSPlus1](#) Students at risk for anaphylaxis benefit from a Board of Education policy that coordinates a planned response in the event of an anaphylactic emergency. [PRESSPlus2](#) Anaphylaxis is a severe systemic allergic reaction from exposure to allergens that is rapid in onset and can cause death. Common allergens include animal dander, fish, latex, milk, shellfish, tree nuts, eggs, insect venom, medications, peanuts, soy, and wheat. A severe allergic reaction usually occurs quickly; death has been reported to occur within minutes. An anaphylactic reaction can also occur up to one to two hours after exposure to the allergen.

While it is not possible for the District to completely eliminate the risks of an anaphylactic emergency when a student is at school, an Anaphylaxis Prevention, Response, and Management Program using a cooperative effort among students' families, staff members, students, health care providers, emergency medical services, and the community helps the District reduce these risks and provide accommodations and proper treatment for anaphylactic reactions. [PRESSPlus3](#)

The Superintendent or designee shall develop and implement an Anaphylaxis Prevention, Response, and Management Program for the prevention and treatment of anaphylaxis that:

1. Fully implements the Ill. State Board of Education (ISBE)'s model policy required by the School Code that: (a) relates to the care and response to a person having an anaphylaxis reaction, (b) addresses the use of epinephrine in a school setting, (c) provides a full food allergy and prevention of allergen exposure plan, and (d) aligns with 105 ILCS 5/22-30 and 23 Ill.Admin.Code §1.540. [PRESSPlus4](#)
2. Ensures staff members receive appropriate training, including: (a) an in-service training program for staff who work with students that is conducted by a person with expertise in anaphylactic reactions and management, and (b) training required by law for those staff members acting as *trained personnel*, as provided in 105 ILCS 5/22-30 and 23 Ill.Admin.Code §1.540. [PRESSPlus5](#)
3. Implements and maintains a supply of undesignated epinephrine in the name of the District, in accordance with policy 7:270, *Administering Medicines to Students*. [Q1](#)
4. Follows and references the applicable best practices specific to the District's needs in the Centers for Disease Control and Prevention's *Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs* and the *National Association of School Nurses Allergies and Anaphylaxis Resources/Checklists*. [PRESSPlus6](#)
5. Provides annual notice to the parents/guardians of all students to make them aware of this policy. [PRESSPlus7](#)
6. Complies with State and federal law and is in alignment with Board policies.

Monitoring [PRESSPlus8](#)

Pursuant to State law and policy 2:240, *Board Policy Development*, the Board monitors this policy at least once every three years by conducting a review and reevaluation of this policy to make any necessary and appropriate revisions. The Superintendent or designee shall assist the Board with its reevaluation and assessment of this policy's outcomes and effectiveness. Any updates will reflect any necessary and appropriate revisions.

LEGAL REF.:

105 ILCS 5/2-3.182, 5/10-22.39(e), and 5/22-30.

23 Ill.Admin.Code §1.540.

*Anaphylaxis Response Policy for Illinois Schools*, published by ISBE.

CROSS REF.: 4:110 (Transportation), 4:120 (Food Services), 4:170 (Safety), 5:100 (Staff Development Program), 6:120 (Education of Children with Disabilities), 6:240 (Field Trips), 7:180 (Prevention of and Response to Bullying, Intimidation and Harassment), 7:250 (Student Support Services), 7:270 (Administering Medicines to Students), 8:100 (Relations with Other Organizations and Agencies)

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**Questions and Answers:**

\*\*\*Required Question 1. Has the Board adopted the School District Supply of Undesignated Epinephrine Injectors subhead in policy 7:270, *Administering Medicine to Students*?

**Note:** Be sure that the Board's adoption of the subhead regarding Undesignated Epinephrine Injectors in policy 7:270 is in alignment with the District's implementation of 105 ILCS 5/22-30, amended by P.A. 102-413. If the district maintains a supply of undesignated epinephrine injectors, but has not adopted the subhead in policy 7:270, see the **PRESS** sample, available at **PRESS** Online by logging in at [www.iasb.com](http://www.iasb.com), at f/n 12.

- Yes (default)
  - No (IASB will delete #3 in alignment with policy 7:270.)
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**PRESSPlus Comments**

PRESSPlus 1. This policy is updated in response to 105 ILCS 5/2-3.182, added by P.A. 102-413, requiring districts to adopt or update by 8-17-22 an anaphylaxis policy addressing prevention of and response to anaphylaxis in accordance with the model policy developed by the Ill. State Board of Education (ISBE), *Anaphylaxis Response Policy for Illinois Schools*, (*ISBE Model*), available at: [www.isbe.net/Documents/Anaphylactic-policy.pdf](http://www.isbe.net/Documents/Anaphylactic-policy.pdf).

It is presented as rewritten for PRESS Plus subscribers, however, a redlined version showing the changes made is available at **PRESS** Online by logging in at [www.iasb.com](http://www.iasb.com).

The law requires the *ISBE Model*, and in turn a board's policy based on the *ISBE Model*, to include: (a) a procedure and treatment plan, including emergency protocols and responsibilities for school nurses and other appropriate school personnel, for responding to anaphylaxis, (b) requirements for a training course for appropriate school personnel on prevention and responding to anaphylaxis, (c) a

procedure and appropriate guidelines for the development of an individualized emergency health care plan for children with a food or other allergy that could result in anaphylaxis, (d) a communication plan for intake and dissemination of information provided by Illinois regarding children with a food or other allergy that could result in anaphylaxis, including a discussion of methods, treatments, and therapies to reduce the risk of allergic reactions, including anaphylaxis, (e) strategies for reducing the risk of exposure to anaphylactic causative agents, including food and other allergens, and (f) a communication plan for discussion with children who have developed adequate verbal communication and comprehension skills and with the parents or guardians of all children about foods that are safe and unsafe and about strategies to avoid exposure to unsafe food. 105 ILCS 5/2-3.182(b).

The *ISBE Model* is primarily focused on item (a). Little to no guidance for schools regarding items (b)-(f) exists in it other than to generally cite to voluminous resources made available by the Centers for Disease Control and Prevention (CDC) and National Association of School Nurses (NASN). This policy and its implementing procedures (available at **PRESS** Online by logging in at [www.iasb.com](http://www.iasb.com)) are designed to supplement the *ISBE Model* and further lead school officials to resources regarding items (b)-(f). 105 ILCS 5/2-3.182(b)(1-6).

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PRESSPlus 2. The *ISBE Model* does not provide a specific definition for *anaphylactic emergency*, but it appears to use that term and *anaphylaxis* interchangeably. **Issue 109, May 2022**

PRESSPlus 3. The *ISBE Model* provides that students at risk for anaphylaxis benefit from a policy that coordinates a planned response in the event of an anaphylactic emergency, and it emphasizes that an emergency plan should include all stakeholders. The clause “using a cooperative effort among students’ families, staff members, students, health care providers and emergency medical services, and the community” is optional and can be removed. The purpose of the clause is to share responsibility for management among all stakeholders. **Issue 109, May 2022**

PRESSPlus 4. Number one outlines the goals that the legislature directed ISBE to include in the topics covered by the *ISBE Model*. 105 ILCS 5/2-3.149(a)-(c). The *ISBE Model* is based on the *Virginia Dept. of Education Anaphylaxis Policy*, available at: [www.doe.virginia.gov/support/health\\_medical/anaphylaxis\\_epinephrine/](http://www.doe.virginia.gov/support/health_medical/anaphylaxis_epinephrine/), and it incorporates NASN recommendations for a comprehensive anaphylaxis school policy. See the *NASN Sample Anaphylaxis Policy*, at: [www.nasn.org/nasn-resources/resources-by-topic/allergies-anaphylaxis](http://www.nasn.org/nasn-resources/resources-by-topic/allergies-anaphylaxis). Boards may add further expectations and include additional goals that reflect those expectations here. Ensure that any additional expectations or goals align with policy 7:270, *Administering Medicines to Students*. **Issue 109, May 2022**

PRESSPlus 5. Number two includes the biennial in-service training program required by 105 ILCS 5/10-22.39(e) and training required by 105 ILCS 5/22-30(g) for those staff members who will be *trained personnel*, authorized by 105 ILCS 5/22-30(b-10), to provide or administer undesignated epinephrine in specific situations. The law authorizes *school nurses* and *trained personnel* to administer undesignated epinephrine. See policy 5:100, *Staff Development Program* (or, if the board has not adopted the list of all training in the policy, see f/n 5 of the sample policy at **PRESS** Online, available by logging in at [www.iasb.com](http://www.iasb.com)), and 7:270-AP2, *Checklist for District Supply of Undesignated Asthma Medication, Epinephrine Injectors, Opioid Antagonists, and/or Glucagon* (available at **PRESS** Online by logging in at [www.iasb.com](http://www.iasb.com)).

105 ILCS 5/22-30(b-5) does not specifically state that staff members authorized to administer (student-specific) epinephrine under a student's specific individual plan must also complete the more rigorous training required for *trained personnel*. However, the *ISBE Model* is clear that “[o]nly trained personnel should administer epinephrine to a student believed to be having an anaphylactic reaction,” and it requires each building-level administrator to identify at least two employees, in addition to the school nurse (if any), to be *trained personnel*. The more in-depth training for staff members who may administer epinephrine (whether student-specific or undesignated) is also a best practice emphasized in the *CDC Guidelines*, which is referenced in the *ISBE Model*. **Issue 109, May 2022**

PRESSPlus 6. Number four refers to the CDC's *Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs*, at: [www.cdc.gov/healthyschools/foodallergies/pdf/20\\_316712-A\\_FA\\_guide\\_508tag.pdf](http://www.cdc.gov/healthyschools/foodallergies/pdf/20_316712-A_FA_guide_508tag.pdf) (*CDC Guidelines*), which is cited in the *ISBE Model* as a resource for a “full food allergy and prevention of allergen exposure plan.” Adopting the entire, voluminous *CDC Guidelines* document as policy is not practical. The *CDC Guidelines* also state that not every recommendation will be appropriate or feasible for every district's needs. The *National Association of School Nurses Allergies and Anaphylaxis Resources/Checklists*, at: <http://www.nasn.org/nasn-resources/resources-by-topic/allergies-anaphylaxis>, are also linked as a resource in the *ISBE Model*. The *ISBE Model* acknowledges that not all schools have access to school nurses or other health staff on a regular basis, and it encourages districts to take this into consideration when developing building-level plans. **Issue 109, May 2022**

PRESSPlus 7. Number five is required by 105 ILCS 5/2-3.182(c), added by P.A. 102-413. The notification must include contact information for parents/guardians to engage further with the district to learn more about individualized aspects of the policy. For ease of administration, districts may want to include this notification in student handbook(s). The Ill. Principal's Association (IPA) maintains a handbook service that coordinates with **PRESS** material, *Online Model Student Handbook (MSH)*, at: [www.ilprincipals.org/resources/model-student-handbook](http://www.ilprincipals.org/resources/model-student-handbook). **Issue 109, May 2022**

PRESSPlus 8. 105 ILCS 5/2-3.182(e) provides that ISBE shall review and update its model policy at least once every three years. Although this section does not expressly state that boards must also conduct a review within this time frame, that is the logical conclusion based on a board's duty in 105 ILCS 5/10-16.7 to direct the superintendent through policy. **Issue 109, May 2022**