

Southington Board of Education Meeting

Thursday, October 23, 2025 7:00 PM
John Weichsel Municipal Center Public Assembly Room
200 North Main Street
Southington, CT 06489



COMMITTEE OF THE WHOLE

1. CALL TO ORDER
2. Pledge of Allegiance - Moment of Silence
3. Celebration of Excellence
4. Approval of Minutes - October 9, 2025
5. Public Communications
 - a. Communications from Student Board Representatives
 - b. Communications from Board of Education
 - c. Communications from Administration
 - d. Communications from Public - Agenda Items Only
6. Old Business
 - a. Town Government Communications
 - b. Policy 3541 - Transportation - Revised - Second Reading
 - c. Policy 5131.911- CT School Climate - Revised - Second Reading
 - d. Policy 5141.21 - Administering Medication - Revised - Second Reading
 - e. Adoption of Southington Public Schools Strategic Plan, 2025 - 2030
7. New Business
 - a. District Data Presentation
8. Public Communications
 - a. Public
9. Adjournment

The minutes presented within the document provide a summary of the discussion that took place at the Board of Education meeting. For the complete discussion of the agenda items, please view the video of the Board meeting on our website at <https://www.southingtonschools.org>. These minutes are considered a draft until approved at the following regular Board of Education Meeting.

**SOUTHINGTON BOARD OF EDUCATION, SOUTHINGTON, CT
Regular Meeting**

Committee of the Whole

October 9, 2025, at 7:00 PM

John Weichsel Municipal Center Public Assembly Room

200 North Main Street Southington, CT 06489

1. CALL TO ORDER

Board Members Present: Mr. Joseph Baczewski, Mr. Robert Brown, Mrs. Terri Carmody, Mr. Sean Carson, Mrs. Colleen Clark, Mr. David Derynoski, Mr. Zachary Foti, Mr. Zaya Oshana

Board Members Absent: Mr. Cecil Whitehead

Cabinet Members Present: Mr. Steven Madancy, Superintendent; Mr. Frank Pepe, Assistant Superintendent; Mrs. Amy Aresco, Interim Pupil Services Director

Student Board Representatives Present: Mr. Ethan Hoffman, Ms. Arshi Roy, Mr. Samrath Singh

2. Regular Session 7:00 p.m.

Mrs. Clark called the meeting to order at 7:00 p.m.

3. Pledge of Allegiance

4. Celebration of Excellence

a. Dept of Mental Health and Addiction Services Prevention Impact Award - STEPS Youth Council - Katie Cavanaugh, Ava LeBlanc and Jackie Liebler

Mr. Madancy introduced Katie Cavanaugh, Ava LeBlanc and Jackie Liebler, along with Kristen Sandler, STEPS Coalition Administrative Assistant.

- Ms. Sandler spoke about the accomplishment of winning the Dept of Mental Health and Addiction Services Prevention Impact Award at the second annual Connecticut Prevention Summit. Not only were the girls presenters, but they also ran one of the 8 workshops at the Summit. Ms. Sandler indicated the award recognized programs that have expanded the reach and effectiveness of prevention efforts in Connecticut, creating models that can inspire and be replicated by others statewide. STEPS Youth Council earned this distinction for their innovative and impactful prevention work including; “It’s Not Cheesy To Talk To Your Kids” campaign; Legislative advocacy to limit youth access to Kratom; their leadership in youth prevention. STEPS is lucky to have Grant funding to allow the three girls to be student workers. The three girls are representatives for the entire group of students who meet twice a month to work on prevention, campaigns, and advocacy efforts. Ms. Sandler is very proud of them and their representation for the town.
- Mrs. Clark spoke of her privilege of being able to attend the STEPS meeting

every month. The work that is done and the message that STEPS puts out is very impactful. Mrs. Clark let the girls know how proud she is of them and thanked them on behalf of the Board and the Town. Mrs. Clark presents Ms. Cavanaugh, Ms. LeBlanc and Ms. Liebler with an Award of Excellence.

- Ms. Cavanaugh, Ms. Leblanc, and Ms. Liebler thanked Ms. Sandler for all the work she does for STEPS Coalition to be able to get their message out to the public. They are also grateful and appreciate they were able to go to the conference; it was an eye-opening experience. This is not the first thing STEPS has done, and it won't be the last.

b. United Way of Southington's Ellie Lombardi *Philanthropist of the Future* Award - Addison Rodrigues

Mr. Madancy was notified a couple weeks back that one of our students received Southington's Ellie Lombardi *Philanthropist of the Future* Award – He invited Addison Rodrigues up to be celebrated for winning the award.

- The Ellie Lombardi Philanthropist of the Future Award is named after one of United Way of Southington's 2023 unsung heroes.
- Ellie Lombardi, at 3 years old, started her philanthropic journey raising funds for her own charity, The Race for Grace Foundation. With support from her parents, the annual car shows have become a Southington tradition, raising thousands of dollars for the community
- The criteria for winning this award is:
 - Being a Southington resident, under 18 years old.
 - Demonstrating creative approaches to supporting Southington's economic health, education, social or environmental issues.
 - Showing measurable, positive outcomes in their philanthropic efforts.
 - Exhibits strong leadership qualities and mobilizing resources in inspiring others.
 - Actively collaborate and evolve the community in their efforts.
 - Display a desire for long term dedication to philanthropy and community service.
 - Consistently participate in charitable activities.
- Mr. Madancy read one of the nominations Ms. Rodrigues received to be considered for winning the award. It described her involvement in the Agricultural Science program being the student beekeeper. She is dedicated all year round and truly understands the social enterprise aspect of Bread for Life and Southington Honey Company requiring the hives to survive. She volunteers her time and understands community and service over self, more than the average student and deserves to be recognized.
- Ms. Clark asked how Mrs. Rodrigues became interested in bees; Ms. Rodrigues replied she saw another girl doing it in the AgSci Program and she became very interested to learn about the bees and the hive. Mrs. Clark thanked her for her service to the community. Ms. Rodrigues indicated she would like to continue her work when she goes to college.
- Mrs. Clark presented Ms. Rodrigues with a Certificate of Excellence.
- Mr. Rodrigues thanked Bread for Life and United Way for giving her

opportunities to help out within the community. She also thanked the AgSci program for introducing her to so many people and experiences.

Mrs. Clark called for a brief recess at 7:13 p.m. for the Board members to Congratulate the students.

The regular meeting reconvened at 7:21 p.m.

5. **Approval of Minutes - September 25, 2025**

MOTION made by Mr. Oshana and seconded by Mr. Brown, “Move to approve the Minutes for the September 25, 2025, BOE meeting with an amendment - correction of attendance: Board Members Present: Mr. Joseph Baczewski, Mr. Robert Brown, Mrs. Terri Carmody, Mr. Sean Carson, Mrs. Colleen Clark, Mr. David Derynoski, Mr. Zachary Foti, Mr. Cecil Whitehead; Board Members Absent: Mr. Zaya Oshana.” Motion carried 8-0. Attachments: (1)

6. **Public Communications**

a. Communications from Student Board Representatives

Mr. Hoffman gave the School Report:

- This past Tuesday a dozen or so students attended the CIAC Sportsmanship Conference - The event brought together 670 student athlete leaders from across the state to discuss ways to improve sportsmanship on and off the field. They had speakers: NBA ref and a sports reporter from WTNH.
- Wall of Honor Ceremony will be held at 6:00 p.m. at the High school honoring two high school alumni.
- On October 8, 2025, the AgSci program hosted their annual Fall Festival
- On October 16, 2025, the National Honor Society is hosting their annual Fall Induction
- On October 16, 2025, sophomores and juniors will be taking the PSATs
- On October 9, 2025, the seniors took their overhead drone photo during BKAP.
- On October 21, 2025, the Music department will be hosting their annual Fall Performance at 6:00 p.m.
- Southington High School was well represented in the annual Apple Harvest Parade; DECA, robotics, marching band and color guard all showing school spirit

Ms. Roy gave the District Report:

- South End Elementary's first ever Color Run will take place Friday, October 10, 2025. They raised over \$18,000 in donations and pledges.
- Last week, Thalberg hosted their “Special Persons Night” where students were able to bring a parent, grandparent or friend to school an ice cream social and to enjoy the book fair. Later this month, they will have their annual Trunk or Treat event.
- The newly formed Student Leadership Team at JFK has begun and is composed of eight students. This dynamic and diverse group were selected to meet with school administration to provide prospective, feedback, and suggestions to improve the student experience at JFK.
- The Eagle Marching Band and Cologuard performed on Sunday at the Apple Harvest Parade.

- Every Thursday morning during JFK's morning announcements, a ten second clip of a theme song is broadcasted, and homerooms submit their guesses. The winning homeroom is presented with the Kennedy Cup.
- From September 15 - October 15, 2025, JFK recognizes notable Hispanic influencers as part of National Hispanic Heritage Month.

Mr. Singh gave the Sports Report

- The Boys Golf Team continues to play well and improved to a 11-3 record with victories over Avon and Farmington.
- The Girls Swim Team improved to 6-1 with a win against Newington on October 8, 2025.
- Both the Boys and Girls Cross Country teams remain undefeated in divisional meets.
- The Girls Soccer Team qualified for the State Tournament with a 1-0 victory over Berlin.
- The Field Hockey Team celebrated their senior night on October 7, 2025.
- The Football Team defeated Hall High School last week and traveled to New Britain this coming Friday, October 10, 2025.
- The Boys Soccer Team hosted a youth soccer night on October 8, 2025, and collected nonperishable items for Bread for Life in Southington.

Mr. Singh presented the Board with a concern:

- Diwali: A common holiday for Indian folks: celebrated by 68,000+ Indians in Connecticut. Ned Lamont on August 27, 2025, made legislation to make this a State Holiday.
- Schools around CT have made this a day off for celebration and observance for this popular holiday. Glastonbury, South Windsor, West Hartford, Newington, Farmington, Bristol, Avon, Ellington, Rocky Hill, Trumbull, Stamford.
- Even though students are able to take the day off with no penalty as it is a recognized holiday, missing one day of school is like missing a week. It is hard and does put a burden on the students to make up the missing time.
- This should apply to not just Diwali but other religions and other cultures.
- The Board appreciated bringing this to their attention and would take it into consideration when adapting the new school calendar. Teachers should not be giving large assignments or tests on recognized holidays, so the student don't miss too much work if they are not in school. The Board will look at all the feedback from the public provided by Mr. Madancy when deciding on the school calendar. The Board did recognize that they cannot allow every major holiday to be a day off of school unless school were to be in session all year long.

b. Communications from Board of Education

Mr. Brown reminded everyone about the Wall of Honor Ceremony that will take place at the High School on October 22, 2025, at 6:00 p.m. The honorees will be Bill Pesce and Chris Palmieri.

Mr. Oshana recognized a comment made earlier in the night, "this is not the first big thing STEPS has done and it won't be the last thing that STEPS will do." He wanted Ms. Cavanaugh, Ms. LeBlanc and Ms. Liebler to realize, even though they are part of a

larger group that have done, and will do great things, they are the representatives. Ms. Rodregues is also making a difference and being a representative in the community. He commended the Student Council Representatives for bringing a concern to the Board for their awareness and attention. All the students should be very proud of themselves.

c. Communications from Administration

Mr. Madancy spoke about the following topics:

- Last week he had the opportunity to visit the Plantsville Congregational Church for Operation Stay Warm. Southington Community service and Rosemary Salerno put a lot of work into preparation. The amount of coats, gloves, hats, etc... distributed to families is amazing. SPS homeless liaison, Ken Seltzer along with school social workers was able to attend to help connect families in need to the resources. Not only does Operation Stay Warm take used items, many organizations in the community donate brand new items. The items are distributed to children and adults.
- Mr. Madancy will be selling french fries in the Rotary Booth at the Apple Harvest Festival on Friday evening and on Sunday. Rotary is a great organization that does a lot for the community as well.
- Basically, everything is finalized for the design and architecture of the Barn Project. We are at the stage where we are going to offer an RFP to a company that is willing to come and build it. The build probably won't start until the spring, but the concrete pad may be poured before the winter.
- On October 8, 2025, at the UCONN Waterbury campus, Mr. Madancy attended the Statewide Dyslexia Awareness Kickoff. There were two amazing keynote speakers. Deon Butler from the Detroit Lyons told his story about only reading at a 4th grade level from grade school, through college, and into the NFL. He finally decided to tackle his dyslexia just in time to be able to read to his daughter. Dr. Fumiko Hoeft, Campus Dean and Chief Administrator Office Professor has two decades of research in learning dyslexia and has won many awards. She shared statistics to kick off awareness:
 - About 5-10% of the population in CT may have undiagnosed dyslexia only 0.8% of students have been identified.
 - Of all the learning disorders, dyslexia/dysgraphia/dyscalculia, 80% are dyslexia.
 - Early intervention is 4x more effective; each year without intervention there is a 25-50% diminished effectiveness on the intervention.
 - Some of the screening and progress tools that districts can use are 60-80% accurate in terms of risk predictors.
 - There is a huge genetic component.
 - For every \$1 spent on prevention of dyslexia or early intervention, there is \$16 spent on a return; if you don't intervene early the supports costs perpetuate long term.

This was only the first series of events that will be occurring each month. Mr. Madancy, Mrs. Lawlor, Mrs. Battaglia, and Mrs. Pajor were all able to attend; it was time well spent.

Attachments: (1)

d. Communications from Public - Agenda Items Only

No comment made

7. Committee Reports

a. Policy and Personnel Meeting - September 30, 2025

Mr. Baczewski reviewed the minutes from the Policy and Personnel Meeting.

He discussed the following topics:

- Review of Policy 6173 – Enrollment in Advances Course/Program and Challenging Curriculum.
 - Mrs. Carmody expressed her concern that this should have been brought to the C&I committee.
 - Mr. Baczewski and Mr. Pepe explained it was a review of the policy itself, and the policy was not changed.
- Review of Policy 3541 – Transportation.
- Review of Policy 5121.3 – Academic Dishonesty.
 - There are challenges and advantages of AI. AI should be used as a tool not in place of a child’s cognitive ability.
- Review of Policy 5131.911 – CT School Climate.
 - Replaces Policy 5130 and 5130.1.
- Review of Policy 5121.21 – Administering Medication.
- The Job Description of Therapy Department Lead was presented as a stipend
- Review dates for Policy & Personnel Committee Meetings for 2025-2026 School Year.

Attachments: (1)

Mr. Oshana commented on what a great meeting it was and how AI is going to change the paradigm of education. He also thought the School Climate Policy was very important.

The members of the Board agreed the topic of AI should be used as a tool but it does not always give you accurate information. There will be an evolution of learning how to teach with AI. AI would be discussed in further detail at a later date.

8. Superintendent's Report

a. Personnel Report

MOTION made by Mr. Baczewski and seconded by Mr. Derynoski, “Recommend that the Board of Education approve the Personnel Report as submitted by the human resource department.” Motion carried 8-0.

Attachments: (1)

9. Old Business

a. Town Government Communications

No comment made.

b. Strategic Plan Steering Committee Presentation

Mr. Madancy introduced Dr. Lemons to present the final iteration of the SPS Strategic Plan. Mr. Madancy spoke a bit about the history of the Strategic Plan. Through a comprehensive interview process, over 3000 survey responses, dozens and dozens of focus groups, the feedback was synthesized into something manageable. Mr. Madancy

recognized and thanked the Steering Committee. The content of this presentation is the most important piece. Mr. Madancy asked that all questions be held until a later time to be answered.

Mr. Lemons spoke about the process and a timeline of how they got to where they are with this Strategic Plan. He presented the areas of assets to work on.

He identified broad Action Items also with timelines that the community came together to agree on as big focal areas.

Some Core Values

- Student First
- Whole-Child Development
- Belonging and Inclusion
- Collaboration and Community Engagement
- Integrity and Accountability
- Innovation and Growth
- Empowered Educators

Strategic Priorities

- High Quality Teaching & Learning
- Talent Management & Workforce Sustainability
- School Facilities & Infrastructure
- Communication, Engagement & Community Partnership
- Social-Emotional Learning & Student Wellbeing
- Special Education Efficiency & Effectiveness.

Dr. Lemons then showed a breakdown how the Steering Committee dove into each Strategic Priority to get more specific on how to approach improvement.

He and Mr. Madancy spoke about the big picture and how everyone should be able to see how what they are doing plays into and helps the goal of the Strategic Plan.

Once again, the Steering Committee was thanked for all their hard work.

Mrs. Clark thanked Dr. Lemons and the Steering Committee for bringing all these diverse groups and thoughts together to come through with a final plan.

Mr. Baczewski thanked Dr. Lemons for his hard work and working with the community to continue to make things better.

Attachments: (1)

10. New Business

a. Proposal to Modify Parking Lot at Strong Elementary School

MOTION made by Mr. Baczewski and seconded by Mr. Brown, “Move that the Board of Education approve the proposal to modify parking lot at Strong Elementary School as recommended by the Administration.” Motion carried 8-0.

Mr. Carson asked Mr. Romano to come up and address some of his concerns.

Mr. Romano clarified the inability to add an island to the parking lot as that would take away parking spaces. The alternative is to add a stop sign and add line striping hatching to clearly make it obvious that they need to be cautious. This striping and signage will mitigate the safety risk.

Attachments: (1)

b. Proposal for Establishment of Elementary Diagnostic Classroom at South End School

Mr. Madancy introduced a proposal that is a product of the SEED Grant.

There is already a process for secondary students in need of diagnostic placement for instruction and programing; at this time SPS does not have this for elementary students.

Some challenges being faced by elementary students:

- They are being placed in a school that does not always meet their needs.
- If they are in need of a diagnostic placement and are dysregulating or having a crisis at their home school, all support personnel in the building are responding, taking away from their case load.
- Students that are new to district aren't always placed in the appropriate program right away because we know little about them.

This program will be staffed by a full time Special Education Teacher Applied Behavioral Analysis Therapists, and a full time School Psychologist allowing us to evaluate student effectively. This would not be a permanent placement for students; they would be in the program ideally for 4-6 weeks, when we know what's best for the child. This program would be fully grant funded. Mr. Madancy read exactly for the legislative what the SEED Grant could be used for. The SEED Grant cannot be used for any administrative costs or 3rd party contracting.

Mr. Madancy acknowledged Mrs. Aresco for all her hard work and wanted to specifically point out the purpose and rationale for this program:

- The establishment of an Elementary Diagnostic Classroom is intended to provide targeted, specialized support for students with complex learning and behavioral needs who require intensive assessment and intervention before determining the most appropriate long-term educational placement.

This diagnostic classroom will enable the district to:

- Conduct comprehensive, multidisciplinary evaluations within a structured educational setting.
- Implement individualized interventions aligned with diagnostic findings.
- Reduce out-of-district placements by accurately identifying and addressing student needs in district
- Support teachers and families through detailed progress data and collaboration.

MOTION made by Mr. Derynoski and seconded by Mr. Baczewski, "Move that the Board approve the proposal to establish an elementary diagnostic classroom at South End School." Motion carried 8-0.

Mr. Brown indicated we have had some concerns from parents in the past and this classroom will help with some of these concerns. He also pointed out the information from the dyslexia conference proves this early intervention is important.

Mr. Oshana thinks this is a long time coming, he is happy we are doing this in our town.

Mr. Baczewski asked about classroom numbers. Mr. Madancy explains it would depend on the needs of the students; it could be upwards of 5-6 students at any given time or as little as 3 students. Mr. Madancy indicated what if the program is successful, it will continue to be granted funded from year to year. It is not a program to make money on but a program to focus on our students to help them succeed. There will be a huge fine if the money from the SEED grant is not used as intended.

Mr. Carson stated it is so great to receive financial backing to care for and educate our students. He thanks Mrs. Aresco for applying for the Grant.

Attachments: (1)

- c. Policy 3541 - Transportation - Revised - First Reading

Attachments: (1)

- d. Policy 5131.911 - CT School Climate - Revised - First Reading

Attachments: (1)

- e. Policy 5141.21 - Administering Medication - First Reading

Attachments: (1)

- f. Approval of Job Description - Therapy Department Lead – Revised

MOTION made by Mr. Baczewski and seconded by Mrs. Carmody, “Move that the Board of Education approve the job description presented by the administration for the Therapy Department Lead.” Motion carried 8-0.

Attachments: (1)

- g. Testing and Balancing Services for IAQ Assessment at Three Schools

MOTION made by Mr. Carson and seconded by Mr. Derynoski, “Move that the Board of Education approve the testing and balancing services for Indoor Air Quality Assessment at three schools as recommended by the Administration.” Motion carried 8-0.

Attachments: (1)

11. Public Communications

- a. Public

Robin Beauchemin, 175 Farmingberry Drive, Marion, CT 06444

Ms. Beauchemin expressed concerns about her children’s access to appropriate educational supports and services. She shared her belief that delays in identifying and addressing their learning needs led to additional costs for the district and unnecessary challenges for her children. She discussed the difficulties her children faced in receiving timely evaluations and her need to obtain private assessments to identify needs that were not initially addressed by the district. She urged the Board to recognize what she sees as a broader pattern of delayed responses that affect students and increase costs for the district, requesting that all students receive the support they need without families having to advocate so extensively.

Ryan Ogren, 599 Mount Vernon Road, Plantsville CT, 06479

Mr. Ogren wanted to wish everyone the best of luck with the elections coming up.

He congratulated Mr. Foti on his new seat on the Board.

Josh Polverari 118 Monarch Drive, Southington, CT 06489

Mr. Polverari indicated that Mr. Ogren is the Class Present at Bentley University for the class of 2027. He also shared that he was just elected at Bentley University as Class President for the class of 2029. Both boys have got some great leadership positions at Bentley University and are looking forward to working together.

12. Adjournment

MOTION made by Mr. Derynoski and seconded by Mr. Oshana, "Move to adjourn."

Motion carried 8-0.

Meeting adjourned at 8:53 p.m.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Jackie Hudson".

Recording Secretary

Board of Education

Administrative Report

October 23, 2025



1. The Friends Room
2. Veteran's Committee Meeting
3. Music of the Knight

**BOARD OF EDUCATION
SOUTHINGTON, CONNECTICUT**

Informational Only _____ Board Meeting Date October 23, 2025

Decision Requested X Agenda Code 6 b.

AGENDA REPORTING FORM

Agenda Topic: Policy 3541 – Transportation - Revised – Second Reading.

Summary of Issue: The Policy & Personnel Committee has reviewed Policy 3541 – Transportation.

Background: The Policy and Personnel Committee reviews policies with the
administration to ensure they are current and appropriate.

Alternative Strategies: N/A

Cost (if applicable): N/A **Funding Source:** N/A

Beginning Date of Program or Project: N/A

Ending Date of Program or Project: N/A

Recommendation or Comment: Move that the Board of Education approve Policy 3541 as
presented by the Policy & Personnel Committee.

Titles of Attachments:

1. DRAFT Policy 3541



Signature of Staff Member Submitting Report



Signature of Superintendent of Schools

Policy 3541
Transportation – Revised Policy
Draft

Series 3000: Business and Non-Instructional Operations

Non-Instructional Operations

Transportation

The Board of Education will provide transportation for students under provisions of state law and regulations. The Superintendent of Schools shall administer the operation so as to:

1. provide for the safety of students
2. supplement and reinforce desirable student behavior patterns
3. ~~assist handicapped students appropriately~~ **assist students who receive service under special education or Section 504 of the Rehabilitation Act**
4. enrich the instructional program through carefully planned field trips as recommended by the staff

Parents may be reimbursed for transportation of eligible students whenever such practice is more economical or convenient.

Legal Reference:

Connecticut General Statutes

10-220, Duties of boards of education

10-186, Duties of local and regional boards of education

14-275a, Use of standard school bus required

14-275b, Transportation of handicapped students

14-275c, Regulations re school buses and motor vehicles used to transport special education students

Policy adopted: October 1988

Policy reviewed: April 2003

Policy revised: May 2018

Policy reviewed: June 2023

Policy Revised: September 2025

**BOARD OF EDUCATION
SOUTHINGTON, CONNECTICUT**

Informational Only _____ Board Meeting Date October 23, 2025

Decision Requested X Agenda Code 6 c.

AGENDA REPORTING FORM

Agenda Topic: Policy 5131.911 – CT School Climate - Revised – Second Reading.

Summary of Issue: The Policy & Personnel Committee has reviewed Policy 5131.911 – CT School Climate.

Background: The Policy and Personnel Committee reviews policies with the administration to ensure they are current and appropriate.

Alternative Strategies: N/A

Cost (if applicable): N/A **Funding Source:** N/A

Beginning Date of Program or Project: N/A

Ending Date of Program or Project: N/A

Recommendation or Comment: Move that the Board of Education approve Policy 5131.911 as presented by the Policy & Personnel Committee.

Titles of Attachments:

1. DRAFT Policy 5131.911



Signature of Staff Member Submitting Report



Signature of Superintendent of Schools

Policy 5131.911
CT School Climate – Revised Policy
Draft

Students:
Connecticut School Climate Policy
Policy Statement

All schools must support and promote teaching and learning environments where all students thrive academically and socially, have a strong and meaningful voice, and are prepared for lifelong success.

Implementation of the following set of guiding principles and systemic strategies will promote a positive school climate, which is essential to achieving these goals.

This policy sets forth the framework for an effective and informed school climate improvement process, which includes a continuous cycle of (i) planning and preparation, (ii) evaluation, (iii) action planning, and (iv) implementation, and serves to actualize the Connecticut School Climate Standards, as detailed herein.

The Board recognizes that improving school climate is contextual. Each school needs to consider its history, strengths, needs, and goals. Furthermore, this policy will support and promote the development of restorative action plans that will create and sustain safe and equitable learning environments.

The Southington Board of Education adopts this policy.

Definitions

1. "**School climate**" means the quality and character of the school life, with a particular focus on the quality of the relationships within the school community, and which is based on patterns of people's experiences of school life and that reflects the norms, goals, values, interpersonal relationships, teaching, learning, leadership practices and organizational structures within the school community.
2. "**Positive Sustained School Climate**" is the foundation for learning and positive youth development and includes:
 - a. Norms, values, and expectations that support people feeling socially, emotionally, culturally, racially, intellectually, and physically safe.
 - b. People who treat one another with dignity and are engaged, respected and solve problems restoratively.
 - c. A school community that works collaboratively together to develop, live, and contribute to a shared school vision.
 - d. Adults who model and nurture attitudes that emphasize the benefits and satisfaction gained from learning; and
 - e. A school community that contributes to the operations of the school and the care of the physical environment.

Students:
Connecticut School Climate Policy
Policy Statement

3. "**Social and emotional learning**" means the process through which children and adults achieve emotional intelligence through the competencies of self-awareness, self-management, social awareness, relationship skills and responsible decision-making.
4. "**Emotional intelligence**" means the ability to (A) perceive, recognize, and understand emotions in oneself or others, (B) use emotions to facilitate cognitive activities, including, but not limited to, reasoning, problem solving and interpersonal communication, (C) understand and identify emotions, and (D) manage emotions in oneself and others.
5. "**Bullying**" means unwanted and aggressive behavior among children in grades kindergarten to twelve, inclusive, that involves a real or perceived power imbalance.
6. "**School environment**" means a school-sponsored or school-related activity, function or program, whether on or off school grounds, including at a school bus stop or on a school bus or other vehicle owned, leased or used by a local or regional board of education, and may include other activities, functions or programs that occur outside of a school-sponsored or school-related activity, function or program if bullying at or during such other activities, functions or programs negatively impacts the school environment.
7. "**Cyberbullying**" means any act of bullying through the use of the Internet, interactive and digital technologies, cellular mobile telephone or other mobile electronic devices or any other electronic communication.
8. "**Teen dating violence**" means any act of physical, emotional or sexual abuse, including stalking, harassing and threatening, that occurs between two students who are currently in or who have recently been in a dating relationship.
9. "**Mobile electronic device**" means any hand-held or other portable electronic equipment capable of providing data communication between two or more individuals, including, but not limited to, a text messaging device, a paging device, a personal digital assistant, a laptop computer, equipment that is capable of playing a video game or a digital video disk or equipment on which digital images are taken or transmitted.
10. "**Electronic communication**" means any transfer of signs, signals, writing, images, sounds, data or intelligence of any nature transmitted in whole or in part by a wire, radio, electromagnetic, photoelectronic or photo-optical system.
11. "**School climate improvement plan**" means a building-specific plan developed by the school climate committee, in collaboration with the school climate specialist, using school climate survey data and any other relevant information, through a process that engages all members of the school community and involves such members in a series of overlapping systemic improvements, school-wide instructional practices and relational practices that prevent, identify and respond to challenging behavior, including, but not limited to alleged bullying and harassment in the school environment.
12. "**Restorative practices**" means evidence and research-based system-level practices that focus on (A) building high-quality, constructive relationships among the school community,

Students:
Connecticut School Climate Policy
Policy Statement

(B) holding each student accountable for any challenging behavior, and (C) ensuring each such student has a role in repairing relationships and reintegrating into the school community.

13. "**School climate survey**" means a research-based, validated and developmentally appropriate survey administered to students, school employees and families of students, in the predominant languages of the members of the school community, that measures and identifies school climate needs and tracks progress through a school climate improvement plan.

14. "**Connecticut school climate policy**" means the school climate policy developed, updated and approved by an association in the state that represents boards of education and adopted by the Social and Emotional Learning and School Climate Advisory Collaborative, established pursuant to section [10-222q](#) of the general statutes, as amended by this act, that provides a framework for an effective and democratically informed school climate improvement process that serves to implement Connecticut school climate standards, and includes a continuous cycle of (A) planning and preparation, (B) evaluation, (C) action planning, and (D) implementation.

15. "**School employee**" means (A) a teacher, substitute teacher, administrator, school superintendent, school counselor, school psychologist, social worker, school nurse, physician, paraeducator or coach employed by a local or regional board of education, or (B) any other individual who, in the performance of his or her duties, has regular contact with students and who provides services to or on behalf of students enrolled in a public school, pursuant to a contract with a local or regional board of education.

16. "**School community**" means any individuals, groups, businesses, public institutions and nonprofit organizations that are invested in the welfare and vitality of a public school system and the community in which it is located, including, but not limited to, students and their families, members of the local or regional board of education, volunteers at a school and school employees.

17. "**Challenging behavior**" means behavior that negatively impacts school climate or interferes, or is at risk of interfering, with the learning or safety of a student or the safety of a school employee.

18. "**Evidence Based Practices**" in education refers to instructional and school-wide improvement practices that systematic empirical research has provided evidence of statistically significant effectiveness.

19. "**Effective School Climate Improvement**" is a restorative process that engages all stakeholders in the following six essential practices:

A. Promoting decision-making that is collaborative and actively involves all stakeholders (e.g., school personnel, students, families, community members) with varied and meaningful roles and perspectives where all voices are heard;

B. Utilizing psychometrically sound quantitative (e.g., school climate survey, discipline data) and qualitative (e.g., interviews, focus groups) data to drive action planning, preventive and

Students:
Connecticut School Climate Policy
Policy Statement

intervention practices and implementation strategies that continuously improve all dimensions of school climate, including regularly collecting data to evaluate progress and inform the improvement process;

C. Tailoring improvement goals to the unique needs of the students, educators, and broader school community. These goals shall be integrated into overall school improvement efforts thereby leveraging school strengths to address evidence-based areas of need, while sustaining the improvement process over time;

D. Building among school personnel and develop common staff skills to educate the whole child;

E. Basing curriculum, instruction, student supports, and interventions on scientific research and grounding in cognitive, social-emotional, and psychological theories of youth development. Interventions include strength-based programs and practices that together represent a comprehensive continuum of approaches to promote healthy student development and positive learning environments as well as address individual student barriers to learning and adult barriers to teaching; and

F. Strengthening policies and procedures related to:

- a. climate and restorative informed teaching and learning environments;
- b. infrastructure to facilitate data collection, analysis, and effective planning;
- c. implementation of school climate improvement plans with the goal of becoming restorative;
- d. evaluation of the school climate improvement process; and
- e. sustainability of school climate and restorative improvement efforts.

G. Fostering adult learning in teams and/or professional learning communities to build capacity

School Climate Coordinator Roles and Responsibilities

For the school year commencing July 1, 2025, and each school year thereafter, the superintendent of schools for each school district, or an administrator appointed by the superintendent, shall serve as the school climate coordinator for the school district.

The school climate coordinator shall be responsible for:

1. providing district-level leadership and support for the implementation of the school climate improvement plan for each school;

Students:
Connecticut School Climate Policy
Policy Statement

2. collaborating with the school climate specialist, for each school to (A) develop a continuum of strategies to prevent, identify and respond to challenging behavior, including, but not limited to, alleged bullying and harassment in the school environment, and (B) communicate such strategies to the school community, including, but not limited to, through publication in the district student handbook;
3. collecting and maintaining data regarding school climate improvement, including, but not limited to, school discipline records, school climate assessments, attendance rates, social and emotional learning assessments, academic growth data, types and numbers of alleged and verified bullying complaints submitted by members of the school community, types and numbers of challenging behaviors addressed using the restorative practices response policy, and data concerning the implementation and outcome of restorative practices; and
4. meeting with the school climate specialist for each school at least twice during the school year to (A) identify strategies to improve school climate, including, but not limited to, by responding to challenging behavior and implementing evidence and research-based interventions, such as restorative practices, (B) propose recommendations for revisions to the school climate improvement plan, and (C) assist with the completion of the school climate survey.

School Climate Specialist

For the school year commencing July 1, 2025, and each school year thereafter, the principal of each school, or a school employee who holds professional certification pursuant to section [10-145](#) of the general statutes, is trained in school climate improvement or restorative practices and is designated as the school climate specialist by the school principal, shall serve as the school climate specialist for the school.

The school climate specialist shall be responsible for:

1. leading in the prevention, identification, and response to challenging behavior, including, but not limited to, reports of alleged bullying and harassment;
2. implementing evidence and research-based interventions, including, but not limited to, restorative practices;
3. scheduling meetings for and leading the school climate committee; and
4. leading the implementation of the school climate improvement plan.

School Climate Committee

For the school year commencing July 1, 2025, and each school year thereafter, each school climate specialist shall appoint members to the school climate committee who are diverse, including members who are racially, culturally, and linguistically representative of various roles in the school community.

Students:
Connecticut School Climate Policy
Policy Statement

The school climate committee shall consist of:

1. the school climate specialist;
2. a teacher selected by the exclusive bargaining representative for certified employees chosen pursuant to section [10-153b](#) of the general statutes;
3. a demographically representative group of students enrolled at the school, as developmentally appropriate;
4. families of students enrolled at the school; and
5. at least two members of the school community, as determined by the school climate specialist.

Membership of the school climate committee shall be annually reviewed and approved by the school climate specialist, in coordination with the school climate coordinator.

The school climate committee shall be responsible for:

1. assisting in the development, annual scheduling, and administration of the school climate survey, and reviewing of the school climate survey data.
2. using the school climate survey data to identify strengths and challenges to improve school climate, and to create or propose revisions to the school climate improvement plan.
3. assisting in the implementation of the school climate improvement plan and recommending any improvements or revisions to the plan.
4. advising on strategies to improve school climate and implementing evidence and research-based interventions, including, but not limited to, restorative practices, in the school community.
5. annually providing notice of the uniform challenging behavior and/or bullying complaint form, or similar complaint form used by the school, to the school community.

School Climate Survey

For the school year commencing July 1, 2025, and biennially thereafter, the school climate committee, for each school, shall administer a school climate survey to students, school employees and families of students, provided the parent or guardian of each student shall receive prior written notice of the content and administration of such school climate survey and shall have a reasonable opportunity to opt such student out of such school climate survey.

Students:
Connecticut School Climate Policy
Policy Statement

School Climate Improvement Plan

For the school year commencing July 1, 2025, and each school year thereafter, the school climate specialist, for each school, in collaboration with the school climate coordinator, shall develop, and update as necessary, a school climate improvement plan. Such plan shall be based on the results of the school climate survey, any recommendations from the school climate committee, including the protocols, supports, and any other data the school climate specialist and school climate coordinator deem relevant. Such plan shall be submitted to the school climate coordinator for review and approval on or before December thirty-first of each school year. Upon approval of such plan, a written or electronic copy of such plan shall be made available to members of the school community and such plan shall be used in the prevention of, identification of and response to all challenging behavior.

Additionally, districts may place the school climate improvement plans into their district and school improvement plans.

Training

For the school year commencing July 1, 2024, and each school year thereafter, each local and regional Board of Education shall provide resources and training to school employees regarding:

1. social and emotional learning;
2. school climate and culture and evidence and research-based interventions; and
3. restorative practices.

Such resources and training may be made available at each school under the jurisdiction of such board and include technical assistance in the implementation of a school climate improvement plan. Any school employee may participate in any such training offered by the board under this section. The school climate coordinator, shall select, and approve, the individuals or organizations that will provide such training.

Funding

The school district shall in its discretion allocate sufficient funding to satisfy the requirements of this policy for all schools in the district. Such funding shall be distributed accordingly, with Superintendent approval, for assessments and professional development, as well as for school community outreach, training, and technical assistance.

Accountability

The Board shall adopt and allocate adequate resources to support the Connecticut School Climate Policy and adhere to state regulations set forth in Public Act 23-167.

Students:
Connecticut School Climate Policy
Policy Statement

Connecticut School Climate Standards

1. The school district community¹ has a shared vision and plan for promoting and sustaining a positive school climate² that focuses on prevention, identification, and response to all challenging behavior³.
2. The school district community adopts policies that promote:
 - a. a sound school environment that develops and sustains academic, social, emotional, ethical, civic, and intellectual skills; and
 - b. a restorative school environment focused on overcoming barriers to teaching and learning by building and supporting meaningful school-wide relationships, and intentionally re-engaging any disengaged students, educators, and families of students in the school community.
3. The school community's practices are identified, prioritized, and supported to:
 - a. promote learning and the positive academic, social, emotional, ethical, and civic development of students;
 - b. enhance engagement in teaching, learning, and school-wide activities;
 - c. address barriers to teaching and learning; and
 - d. develop and sustain a restorative infrastructure that builds capacity, accountability, and sustainability.
4. The school community creates a school environment⁴ where everyone is safe, welcomed, supported, and included in all school-based activities.
5. The school community creates a restorative system that cultivates a sense of belonging through norms and activities that promote social and civic responsibility, and a dedication to cultural responsiveness, diversity, equity, and inclusion.

Legal Reference

Per Public Act. No. 24-45, the Collaborative was tasked with designing a School Climate Improvement Plan. In accordance with Public Act No. 23167.

Policy Adopted: June 2025

Policy Revised: September 2025

**BOARD OF EDUCATION
SOUTHINGTON, CONNECTICUT**

Informational Only _____ Board Meeting Date October 23, 2025

Decision Requested X Agenda Code 6 d.

AGENDA REPORTING FORM

Agenda Topic: Policy 5141.21 – Administering Medication - Revised – Second Reading.

Summary of Issue: The Policy & Personnel Committee has reviewed Policy 5141.21 – Administering Medication.

Background: The Policy and Personnel Committee reviews policies with the administration to ensure they are current and appropriate.

Alternative Strategies: N/A

Cost (if applicable): N/A **Funding Source:** N/A

Beginning Date of Program or Project: N/A

Ending Date of Program or Project: N/A

Recommendation or Comment: Move that the Board of Education approve Policy 5141.21 as presented by the Policy & Personnel Committee.

Titles of Attachments:

1. DRAFT Policy 5141.21



Signature of Staff Member Submitting Report



Signature of Superintendent of Schools

Policy 5141.21
Administering Medication
– Revised Policy
Draft

ADMINISTRATION OF STUDENT MEDICATIONS IN THE SCHOOLS

A. Definitions

Administration of medication means any one of the following activities: handling, storing, preparing or pouring of medication; conveying it to the student according to the medication order; observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.

Authorized prescriber means a physician, dentist, optometrist, advanced practice registered nurse or physician assistant, and, for interscholastic and intramural athletic events only, a podiatrist.

Before or after school program means any child care program operated and administered by the _____ Board of Education (the “Board”) and exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs do not include public or private entities licensed by the Office of Early Childhood or Board enhancement programs and extra-curricular activities.

Cartridge injector or Nasal Spray means an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

Coach means any person holding a coaching permit who is hired by the Board to coach for a sport season.

Controlled drugs means those drugs as defined in Conn. Gen. Stat. Section 21a-240.

Cumulative health record means the cumulative health record of a pupil mandated by Conn. Gen. Stat. Section 10-206.

Director means the person responsible for the day-to-day operations of any school readiness program or before or after school program.

Eligible student means a student who has reached the age of eighteen or is an emancipated minor.

Error means:

- (1) the failure to do any of the following as ordered:
 - (a) administer a medication to a student;
 - (b) administer medication within the time designated by the prescribing physician;
 - (c) administer the specific medication prescribed for a student;
 - (d) administer the correct dosage of medication;
 - (e) administer medication by the proper route;
 - (f) administer the medication according to generally accepted standards of practice; or
- (2) the administration of medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student, except for the administration of epinephrine or naloxone for the purpose of emergency first aid as set forth in Sections D and E below.

Guardian means one who has the authority and obligations of guardianship of the person of a minor, and includes: (1) the obligation of care and control; and (2) the authority to make major decisions affecting the minor's welfare, including, but not limited to, consent determinations regarding marriage, enlistment in the armed forces and major medical, psychiatric or surgical treatment.

Intramural athletic events means tryouts, competition, practice, drills, and transportation to and from events that are within the bounds of a school district for the purpose of providing an opportunity for students to participate in physical activities and athletic contests that extend beyond the scope of the physical education program.

Interscholastic athletic events means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests that are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills and transportation to and from such events.

Investigational drug means any medication with an approved investigational new drug (IND) application on file with the Food and Drug Administration (FDA), which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects and which has not yet received FDA approval.

Licensed athletic trainer means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.

Medication means any medicinal preparation, both prescription and non-prescription, including controlled drugs, as defined in Conn. Gen. Stat. Section 21a-240. This definition includes Aspirin, Ibuprofen or Aspirin substitutes containing Acetaminophen.

Medication emergency means a life-threatening reaction of a student to a medication.

Medication plan means a documented plan established by the school nurse in conjunction with the parent and student regarding the administration of medication in school. Such plan may be a stand-alone plan, part of an individualized health care plan, an emergency care plan or a medication administration form.

Medication order means the authorization by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the name and generic name of the medication, the dosage of the medication, the route of administration, the time of administration, the frequency of administration, the indications for medication, any potential side effects including overdose or missed dose of the medication, the start and termination dates not to exceed a 12-month period, and the written signature of the prescriber.

Nurse means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut in accordance with Chapter 378, Conn. Gen. Stat.

Occupational therapist means an occupational therapist employed full time by the Board and licensed in Connecticut pursuant to Chapter 376a of the Connecticut General Statutes.

Optometrist means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.

Paraeducator means a health care aide or assistant or an instructional aide or assistant employed by the Board who meets the requirements of the Board for employment as a health care aide or assistant or instructional aide or assistant.

Physical therapist means a physical therapist employed full time by the Board and licensed in Connecticut pursuant to Chapter 376 of the Connecticut General Statutes.

Physician means a doctor of medicine or osteopathy licensed to practice medicine in Connecticut pursuant to Chapter 370 of the Connecticut General Statutes, or licensed to practice medicine in another state.

Podiatrist means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.

Principal means the administrator in the school.

Qualified school employee means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or paraeducator.

Research or study medications means FDA-approved medications being administered according to an approved study protocol. A copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.

School means any educational facility or program which is under the jurisdiction of the Board excluding extracurricular activities.

School nurse means a nurse appointed in accordance with Conn. Gen. Stat. Section 10-212.

School nurse supervisor means the nurse designated by the Board as the supervisor or, if no designation has been made by the Board, the lead or coordinating nurse assigned by the Board.

School readiness program means a program that receives funds from the State Department of Education for a school readiness program pursuant to subsection (b) of Section 10-16p of the Connecticut General Statutes and exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.

Self-administration of medication means the control of the medication by the student at all times and is self-managed by the student according to the individual medication plan.

Teacher means a person employed full time by the Board who has met the minimum standards as established by the Board for performance as a teacher and has been approved by the school medical advisor and school nurse to be designated to administer medications pursuant to the Regulations of Connecticut State Agencies Sections 10-212a-1 through 10-212a-7.

B. General Policies on Administration of Medications

- (1) Except as provided below in Sections D and E, no medication, including non-prescription drugs, may be administered by any school personnel without:

- (a) the written medication order of an authorized prescriber;
 - (b) the written authorization of the student's parent or guardian or eligible student; and
 - (c) the written permission of a parent for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of such medication.
- (2) Prescribed medications shall be administered to and taken by only the person for whom the prescription has been written.
- (3) Except as provided in Sections D and E, medications may be administered only by a licensed nurse or, in the absence of a licensed nurse, by:
- (a) a full-time principal, a full-time teacher, or a full-time licensed physical or occupational therapist employed by the school district who has been trained in the administration of medication in accordance with Section J of this policy. A full-time principal, teacher, licensed physical or occupational therapist employed by the school district may administer oral, topical, intranasal or inhalant medications. Such individuals may administer injectable medications only to a student with a medically diagnosed allergic condition that may require prompt treatment to protect the student against serious harm or death.
 - (b) students with chronic medical conditions who are able to possess, self-administer, or possess and self-administer medication, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written medication order, including the recommendation for possession, self-administration, or possession and self-administration;
 - (ii) there is a written authorization for possession, self-administration, or possession and self-administration from the student's parent or guardian or eligible student;
 - (iii) the school nurse has developed a plan for possession, self-administration, or possession and self-administration, and general supervision, and has documented the plan in the student's cumulative health record;
 - (iv) the school nurse has assessed the student's competency for self-administration and deemed it safe and appropriate, including that the student: is capable of identifying and selecting the appropriate medication by size, color, amount

or other label identification; knows the frequency and time of day for which the medication is ordered; can identify the presenting symptoms that require medication; administers the medication appropriately; maintains safe control of the medication at all times; seeks adult supervision whenever warranted; and cooperates with the established medication plan;

- (v) the principal, appropriate teachers, coaches and other appropriate school personnel are informed the student is possessing, self-administering, or possessing and self-administering prescribed medication;
 - (vi) such medication is transported to school and maintained under the student's control in accordance with this policy; and
 - (vii) controlled drugs, as defined in this policy, may not be possessed or self-administered by students, except in extraordinary situations, such as international field trips, with approval of the school nurse supervisor and the school medical advisor in advance and development of an appropriate plan.
- (c) a student diagnosed with asthma who is able to self-administer medication shall be permitted to retain possession of an asthmatic inhaler at all times while attending school, in order to provide for prompt treatment to protect such student against serious harm or death, provided all of the following conditions are met:
- (i) an authorized prescriber provides a written order requiring the possession of an inhaler by the student at all times in order to provide for prompt treatment in order to protect the student against serious harm or death and authorizing the student's self-administration of medication, and such written order is provided to the school nurse;
 - (ii) there is a written authorization from the student's parent or guardian regarding the possession of an inhaler by the student at all times in order to protect the student against serious harm or death and authorizing the student's self-administration of medication, and such written authorization is provided to the school nurse;
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's

competency to self-administer an inhaler for asthma in the school setting shall not be used to prevent a student from retaining and self-administering an inhaler for asthma. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student; and

- (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (d) a student diagnosed with an allergic condition who is able to self-administer medication shall be permitted to retain possession of a cartridge injector or nasal spray or any other medical equipment approved by the United States Food and Drug Administration (FDA) at all times while attending school, in order to provide for prompt treatment to protect such student against serious harm or death, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written order requiring the possession of a cartridge injector or nasal spray or any other medical equipment approved by the FDA by the student at all times in order to provide for prompt treatment in order to protect the student against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written order is provided to the school nurse;
 - (ii) there is a written authorization from the student's parent or guardian regarding the possession of a cartridge injector or nasal spray or any other medical equipment approved by the FDA by the student at all times in order to protect the student against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written authorization is provided to the school nurse;
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer cartridge injectors or nasal spray or any other medical equipment approved by the FDA for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-administering a cartridge injector or nasal spray or any

other medical equipment approved by the FDA for medically-diagnosed allergies. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student; and

- (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (e) a student with a medically diagnosed life-threatening allergic condition may possess, self-administer, or possess and self-administer medication, including but not limited to medication administered with a cartridge injector or nasal spray or any other medical equipment approved by the FDA, to protect the student against serious harm or death, provided the following conditions are met:
 - (i) the parent or guardian of the student has provided written authorization for the student to possess, self-administer, or possess and self-administer such medication; and
 - (ii) a qualified medical professional has provided a written order for the possession, self-administration, or possession and self-administration.
- (f) a coach of intramural or interscholastic athletic events or licensed athletic trainer who has been trained in the administration of medication in accordance with Section J of this policy, during intramural or interscholastic athletic events, may administer inhalant medications prescribed to treat respiratory conditions and/or medication administered with a cartridge injector for students with medically diagnosed allergic conditions which may require prompt treatment to protect the student against serious harm or death, provided all of the following conditions are met:
 - (i) the school nurse has determined that a self-administration plan is not viable;
 - (ii) the school nurse has provided to the coach a copy of the authorized prescriber's order and parental permission form;
 - (iii) the parent/guardian has provided the coach or licensed athletic trainer with the medication in accordance with Section K of this policy, and such medication is separate

from the medication stored in the school health office for use during the school day; and

- (iv) the coach or licensed athletic trainer agrees to the administration of emergency medication and implements the emergency care plan, identified in Section H of this policy, when appropriate.
- (g) an identified paraeducator who has been trained in the administration of medication in accordance with Section J of this policy, provided medication is administered only to a specific student in order to protect that student from harm or death due to a medically diagnosed allergic condition, and the following additional conditions are met:
- (i) there is written authorization from the student's parents/guardian to administer the medication in school;
 - (ii) medication is administered pursuant to the written order of (A) a physician licensed under chapter 370 of the Connecticut General Statutes, (B) an optometrist licensed to practice optometry under chapter 380 of the Connecticut General Statutes, (C) an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a of the Connecticut General Statutes, or (D) a physician assistant licensed to prescribe in accordance with section 20-12d of the Connecticut General Statutes;
 - (iii) medication is administered only with approval by the school nurse and school medical advisor, if any, in conjunction with the school nurse supervisor and under the supervision of the school nurse;
 - (iv) the medication to be administered is limited to medications necessary for prompt treatment of an allergic reaction, including, but not limited to, a cartridge injector; and
 - (v) the paraeducator shall have received proper training and supervision from the school nurse in accordance with this policy and state regulations.
- (h) a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or paraeducator, provided medication is antiepileptic medication, including by rectal syringe, administered only to a specific student with a medically diagnosed epileptic condition that requires

prompt treatment in accordance with the student's individual seizure action plan, and the following additional conditions are met:

- (i) there is written authorization from the student's parents/guardians to administer the medication;
 - (ii) a written order for such administration has been received from the student's physician licensed under Chapter 370 of the Connecticut General Statutes;
 - (iii) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or paraeducator is selected by the school nurse and school medical advisor, if any, and voluntarily agrees to administer the medication;
 - (iv) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or paraeducator annually completes the training program established by the Connecticut State Department of Education and the Association of School Nurses of Connecticut as required by Connecticut General Statutes § 10-212a, and the school nurse and medical advisor, if any, have attested, in writing, that such training has been completed; and
 - (v) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or paraeducator receives monthly reviews by the school nurse to confirm competency to administer antiepileptic medication.
- (i) a director of a school readiness program or a before or after school program, or the director's designee, provided that the medication is administered:
- (i) only to a student enrolled in such program; and
 - (ii) in accordance with Section L of this policy.
- (j) a licensed practical nurse, after the school nurse has established the medication plan, provided that the licensed practical nurse may not train or delegate the administration of medication to another individual, and provided that the licensed practical nurse can demonstrate one of the following:

- (i) training in administration of medications as part of their basic nursing program;
 - (ii) successful completion of a pharmacology course and subsequent supervised experience; or
 - (iii) supervised experience in the administration of medication while employed in a health care facility.
- (4) Medications may also be administered by a parent or guardian to the parent or guardian's own child on school grounds.
- (5) Investigational drugs or research or study medications may be administered only by a licensed nurse. For FDA-approved medications being administered according to a study protocol, a copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered.

C. Diabetic Students

- (1) The Board permits blood glucose testing by students who have a written order from a physician or an advanced practice registered nurse stating the need and capability of such student to conduct self-testing, or the use of continuous blood glucose monitors (CGM) by students diagnosed with Type 1 diabetes, who have a written order from a physician or an advanced practice registered nurse.
- (2) The Board will not restrict the time or location of blood glucose testing by a student with diabetes on school grounds who has written authorization from a parent or guardian and a written order from a physician or an advanced practice registered nurse stating that such student is capable of conducting self-testing on school grounds.
- (3) The Board will not require a student using a continuous glucose monitor approved by the Food and Drug Administration for use without finger stick verification to undergo finger stick verification of blood glucose readings from a continuous glucose monitor on a routine basis. Finger stick testing of a student using a continuous glucose monitor so approved by the Food and Drug Administration shall only be conducted: (1) as ordered by the student's physician or advanced practice provider; (2) if it appears that the continuous glucose monitor is malfunctioning; or (3) in an urgent medical situation.
- (4) The Board shall purchase or use existing equipment owned by the Board to monitor blood glucose alerts transmitted from continuous glucose

monitors of students with Type 1 diabetes to dedicated receivers, smartphone/tablet applications, or other appropriate technology on such equipment.

- (5) In the absence or unavailability of the school nurse, select school employees may administer medication with injectable equipment or nasal spray or any other medical equipment approved by the FDA used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death, under the following conditions:
- (a) The student's parent or guardian has provided written authorization;
 - (b) A written order for such administration has been received from the student's physician licensed under Chapter 370 of the Connecticut General Statutes;
 - (c) The school employee is selected by either the school nurse or principal and is a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or paraeducator;
 - (d) The school nurse shall provide general supervision to the selected school employee;
 - (e) The selected school employee annually completes any training required by the school nurse and school medical advisor in the administration of medication with injectable equipment used to administer glucagon or nasal spray or any other medical equipment approved by the FDA;
 - (f) The school nurse and school medical advisor have attested in writing that the selected school employee completed the required training; and
 - (g) The selected school employee voluntarily agrees to serve as one who may administer medication with injectable equipment or nasal spray or any other medical equipment approved by the FDA used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death.

D. Epinephrine for Purposes of Emergency First Aid Without Prior Authorization

- (1) For purposes of this Section D, “regular school hours” means the posted hours during which students are required to be in attendance at the individual school on any given day.
- (2) The school nurse shall maintain epinephrine in cartridge injectors or nasal spray or any other medical equipment approved by the FDA for the purpose of emergency first aid to students who experience allergic reactions and do not have prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine.
 - (a) The school nurse, in consultation with the school nurse supervisor, shall determine the supply of epinephrine in cartridge injectors or nasal spray or any other medical equipment approved by the FDA that shall be available in the individual school.
 - (b) In determining the appropriate supply of epinephrine in cartridge injectors or nasal spray or any other medical equipment approved by the FDA, the nurse may consider, among other things, the number of students regularly in the school building during the regular school day and the size of the physical building.
- (3) The school nurse or school principal shall select principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or paraeducator(s) to maintain and administer the epinephrine in cartridge injectors or nasal spray or any other medical equipment approved by the FDA for the purpose of emergency first aid as described in Paragraph (2) above, in the absence of the school nurse.
 - (a) More than one individual must be selected by the school nurse or school principal for such maintenance and administration in the absence of the school nurse.
 - (b) The selected personnel, before conducting such administration, must annually complete the training made available by the Department of Education for the administration of epinephrine in cartridge injectors or nasal spray or any other medical equipment approved by the FDA for the purpose of emergency first aid, as described in Connecticut General Statutes § 10-212g.
 - (c) The selected personnel must voluntarily agree to complete the training and administer epinephrine in cartridge injectors or nasal spray or any other medical equipment approved by the FDA for the purpose of emergency first aid.

- (4) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (3) above shall be on the grounds of each school during regular school hours.
 - (a) The school principal, in consultation with the school nurse supervisor, shall determine the level of nursing services and number of selected and trained personnel necessary to ensure that a nurse or selected and trained personnel is present on the grounds of each school during regular school hours.
 - (b) If the school nurse, or a substitute school nurse, is absent or must leave school grounds during regular school hours, the school nurse, school administrator or designee shall use an effective and reasonable means of communication to notify one or more qualified school employees and other staff in the school that the selected and trained personnel identified in Paragraph (3) above shall be responsible for the emergency administration of epinephrine.
- (5) The administration of epinephrine pursuant to this section must be done in accordance with this policy, including but not limited to the requirements for documentation and record keeping, errors in medication, emergency medical procedures, and the handling, storage and disposal of medication, and the Regulations adopted by the Department of Education.
- (6) The parent or guardian of any student may submit, in writing, to the school nurse or school medical advisor, if any, that epinephrine shall not be administered to such student pursuant to this section.
 - (a) The school nurse shall notify selected and trained personnel of the students whose parents or guardians have refused emergency administration of epinephrine.
 - (b) The Board shall annually notify parents or guardians of the need to provide such written notice.
- (7) Following the emergency administration of epinephrine by selected and trained personnel as identified in this section:
 - (a) Such emergency administration shall be reported immediately to:
 - (i) The school nurse or school medical advisor, if any, by the personnel who administered the epinephrine; and

- (ii) The student’s parent or guardian, by the school nurse or personnel who administered the epinephrine.
- (b) A medication administration record shall be:
 - (i) Submitted to the school nurse by the personnel who administered the epinephrine as soon as possible, but no later than the next school day; and
 - (ii) filed in or summarized on the student’s cumulative health record, in accordance with the Document and Record Keeping section of this policy.

E. Opioid Antagonists for Purposes of Emergency First Aid Without Prior Authorization

- (1) For purposes of this Section E, “regular school hours” means the posted hours during which students are required to be in attendance at the individual school on any given day. “Regular school hours” does not include after-school events such as athletics or extracurricular activities that take place outside the posted hours.
- (2) For purposes of this section, an “opioid antagonist” means naloxone hydrochloride (e.g., Narcan) or any other similarly acting and equally safe drug that the FDA has approved for the treatment of a drug overdose.
- (3) In accordance with Connecticut law and this policy, a school nurse may maintain opioid antagonists for the purpose of administering emergency first aid to students who experience a known or suspected opioid overdose and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of such opioid antagonist.
 - (a) The school nurse, in consultation with the Board’s medical advisor, shall determine the supply of opioid antagonists that shall be maintained in the individual school.
 - (b) In determining the appropriate supply of opioid antagonists, the nurse may consider, among other things, the number of students regularly in the school building during the regular school day and the size of the physical building.
 - (c) The school nurse shall be responsible for the safe storage of opioid antagonists maintained in a school and shall ensure any supply of opioid antagonists maintained is stored in a secure manner, in

accordance with the manufacturer's instructions, and in a location where it can be obtained in a timely manner if administration is necessary.

- (d) The school nurse shall be responsible for maintaining an inventory of opioid antagonists maintained in the school, tracking the date(s) of expiration of the supply of opioid antagonists maintained in a school, and, as appropriate, refreshing the supply of opioid antagonists maintained in the school.
- (4) The school nurse, in consultation with the Superintendent and the building principal, shall provide notice to parents and guardians of the Board's policies and procedures regarding the emergency administration of opioid antagonists in the event of a known or suspected opioid overdose.
- (5) A school nurse shall be approved to administer opioid antagonists for the purpose of emergency first aid, as described in Paragraph (3) above, in the event of a known or suspected opioid overdose, in accordance with this policy and provided that such nurse has completed a training program in the distribution and administration of an opioid antagonist (1) developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.
- (6) The school nurse or school principal shall select principal(s), teacher(s), security attendant(s), licensed athletic trainer(s), coach(es), paraeducator(s), and/or licensed physical or occupational therapist(s) employed by the Board to maintain and administer the opioid antagonists for the purpose of emergency first aid as described in Paragraph (3) above, in the absence of the school nurse.
 - (a) More than one individual must be selected by the school nurse or school principal for such maintenance and administration in the absence of the school nurse.
 - (b) The selected personnel, before administering an opioid antagonist pursuant to this section, must complete a training program in the distribution and administration of an opioid antagonist (1) developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration

of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.

- (c) All school personnel shall be notified of the identity of qualified school employees authorized to administer an opioid antagonist in the absence of the school nurse.
- (7) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (6) above, shall be on the grounds of each school during regular school hours.
- (a) The school principal, in consultation with the school nurse supervisor, shall determine the level of nursing services and number of selected and trained personnel necessary to ensure that a nurse or selected and trained personnel is present on the grounds of each school during regular school hours.
 - (b) If the school nurse, or a substitute school nurse, is absent or must leave school grounds during regular school hours, the school nurse, school administrator or designee shall use an effective and reasonable means of communication to notify one or more qualified school employees and other staff in the school that the selected and trained personnel identified in Paragraph (6) above shall be responsible for the emergency administration of opioid antagonists.
 - (c) If a Board employee becomes aware of a student experiencing a known or suspected opioid overdose on school grounds but outside of regular school hours and opioid antagonists and/or the school nurse or other qualified school employee is not available to administer opioid antagonists for the purpose of emergency first aid, the Board employee will call 9-1-1.
- (8) The District may also maintain intranasally or orally administered opioid antagonists in a secure box, pursuant to an agreement with a prescriber or pharmacist that permits the District to install on the District's premises a secure box. For the purposes of this section, a "secure box" means a container that (A) is securely affixed in a public location, (B) can be accessed by individuals for public use, (C) is temperature controlled or stored in an environment with temperature controls, (D) is tamper-resistant, (E) is equipped with an alarm capable of detecting and transmitting a signal when accessed by individuals, and (F) is equipped with an alarm capable of alerting first responders when accessed by individuals, unless equipping the container with such an alarm is commercially impracticable. Such agreement shall address the

environmental controls necessary to store such opioid antagonist, establish procedures for replenishment of such opioid antagonist, and establish a process for monitoring the expiration dates of such opioid antagonist and disposing of any expired opioid antagonist. The secure box shall not contain an opioid antagonist in an amount greater than the amount necessary to serve the community in which it is installed. The secure box may also contain an automatic external defibrillator or other products used to treat a medical emergency. The District shall post signage disclosing the presence of such opioid antagonists and usage directions for such opioid antagonist, in the language or languages spoken in the community in which the secure box is installed. If the District is unable to maintain the secure box, or the supplies necessary to maintain the secure box are unavailable, the District shall remove such secure box, and all signs required under this policy concerning such secure box, as soon as practicable but in no event later than five days after the District discovers that it is unable to maintain such secure box or the supplies necessary to maintain such secure box.

- (9) The parent or guardian of any student may submit, in writing, to the school nurse or school medical advisor, if any, that opioid antagonists shall not be administered to such student pursuant to this section.
 - (a) The school nurse shall notify selected and trained personnel of the students whose parents or guardians have refused emergency administration of opioid antagonists.
 - (b) The Board shall annually notify parents or guardians of the need to provide such written notice of refusal.

- (10) Following the emergency administration of an opioid antagonist by a school nurse or selected and trained personnel as identified in this section:
 - (a) Immediately following the emergency administration of an opioid antagonist by a school nurse or selected and trained personnel as identified in this section, the person administering the opioid antagonist must call 911.
 - (b) Such emergency administration shall be reported immediately to:
 - (i) The school nurse or school medical advisor, if any, by the personnel who administered the opioid antagonist;
 - (ii) The Superintendent of Schools; and
 - (iii) The student's parent or guardian.

- (c) A medication administration record shall be:
 - (i) Created by the school nurse or submitted to the school nurse by the personnel who administered the opioid antagonist, as soon as possible, but no later than the next school day; and
 - (ii) filed in or summarized on the student's cumulative health record, in accordance with Section F of this policy.

F. Documentation and Record Keeping

- (1) Each school or before or after school program and school readiness program where medications are administered shall maintain an individual medication administration record for each student who receives medication during school or program hours. This record shall include the following information:
 - (a) the name of the student;
 - (b) the student's state-assigned student identifier (SASID);
 - (c) the name of the medication;
 - (d) the dosage of the medication;
 - (e) the route of the administration, (e.g., oral, topical, inhalant, etc.);
 - (f) the frequency of administration;
 - (g) the name of the authorized prescriber;
 - (h) the dates for initiating and terminating the administration of medication, including extended-year programs;
 - (i) the quantity received at school and verification by the adult delivering the medication of the quantity received;
 - (j) the date the medication is to be reordered (if any);
 - (k) any student allergies to food and/or medication(s);
 - (l) the date and time of each administration or omission, including the reason for any omission;
 - (m) the dose or amount of each medication administered;
 - (n) the full written or electronic legal signature of the nurse or other authorized school personnel administering the medication; and
 - (o) for controlled medications, a medication count which should be conducted and documented at least once a week and co-signed by the assigned nurse and a witness.
- (2) All records are either to be made in ink and shall not be altered, or recorded electronically in a record that cannot be altered.

- (3) Written orders of authorized prescribers, written authorizations of a parent or guardian, the written parental permission for the exchange of information by the prescriber and school nurse to ensure safe administration of such medication, and the completed medication administration record for each student shall be filed in the student's cumulative health record or, for before or after school programs and school readiness programs, in the student's program record.
- (4) Authorized prescribers may make verbal orders, including telephone orders, for a *change* in medication order. Such verbal orders may be received only by a school nurse and must be followed by a written order, which may be faxed, and must be received within three (3) school days.
- (5) Medication administration records will be made available to the Department of Education for review until destroyed pursuant to Section 11-8a and Section 10-212a(b) of the Connecticut General Statutes.
 - (a) The completed medication administration record for non-controlled medications may, at the discretion of the school district, be destroyed in accordance with Section M8 of the Connecticut Record Retention Schedules for Municipalities upon receipt of a signed approval form (RC-075) from the Office of the Public Records Administrator, so long as such record is superseded by a summary on the student health record.
 - (b) The completed medication administration record for controlled medications shall be maintained in the same manner as the non-controlled medications. In addition, a separate medication administration record needs to be maintained in the school for three (3) years pursuant to Section 10-212a(b) of the Connecticut General Statutes.
- (6) Documentation of any administration of medication by a coach or licensed athletic trainer shall be completed on forms provided by the school and the following procedures shall be followed:
 - (a) a medication administration record for each student shall be maintained in the athletic offices;
 - (b) administration of a cartridge injector or nasal spray or any other medical equipment approved by the FDA shall be reported to the school nurse at the earliest possible time, but no later than the next school day;

- (c) all instances of medication administration, except for the administration of cartridge injector medication or nasal spray, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
- (d) the administration of medication record must be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

G. Errors in Medication Administration

- (1) Whenever any error in medication administration occurs, the following procedures shall apply:
 - (a) the person making the error in medication administration shall immediately implement the medication emergency procedures in this policy if necessary;
 - (b) the person making the error in medication administration shall in all cases immediately notify the school nurse, principal, school nurse supervisor, and authorized prescriber. The person making the error, in conjunction with the principal, shall also immediately notify the parent or guardian, advising of the nature of the error and all steps taken or being taken to rectify the error, including contact with the authorized prescriber and/or any other medical action(s); and
 - (c) the principal shall notify the Superintendent or the Superintendent's designee.
- (2) The school nurse, along with the person making the error, shall complete a report using the authorized medication error report form. The report shall include any corrective action taken.
- (3) Any error in the administration of medication shall be documented in the student's cumulative health record or, for before or after school programs and school readiness programs, in the student's program record.
- (4) These same procedures shall apply to coaches and licensed athletic trainers during intramural and interscholastic events, except that if the school nurse is not available, a report must be submitted by the coach or licensed athletic trainer to the school nurse the next school day.

H. Medication Emergency Procedures

- (1) Whenever a student has a life-threatening reaction to administration of a medication, resolution of the reaction to protect the student's health and safety shall be the foremost priority. The school nurse and the authorized prescriber shall be notified immediately, or as soon as possible in light of any emergency medical care that must be given to the student.
- (2) Emergency medical care to resolve a medication emergency includes but is not limited to the following, as appropriate under the circumstances:
 - (a) use of the 911 emergency response system;
 - (b) application by properly trained and/or certified personnel of appropriate emergency medical care techniques, such as cardio-pulmonary resuscitation;
 - (c) administration of emergency medication in accordance with this policy;
 - (d) contact with a poison control center; and
 - (e) transporting the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.
- (3) As soon as possible, in light of the circumstances, the principal shall be notified of the medication emergency. The principal shall immediately thereafter contact the Superintendent or the Superintendent's designee, who shall thereafter notify the parent or guardian, advising of the existence and nature of the medication emergency and all steps taken or being taken to resolve the emergency and protect the health and safety of the student, including contact with the authorized prescriber and/or any other medical action(s) that are being or have been taken.

I. Supervision

- (1) The school nurse is responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned.
- (2) The school nurse's duty of general supervision includes, but is not limited to, the following:
 - (a) availability on a regularly scheduled basis to:
 - (i) review orders or changes in orders and communicate these to personnel designated to give medication for appropriate follow-up;
 - (ii) set up a plan and schedule to ensure medications are given properly;

- (iii) provide training to licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and interscholastic athletics, licensed athletic trainers and identified paraeducators designated in accordance with Section B(3)(g), above, which training shall pertain to the administration of medications to students, and assess the competency of these individuals to administer medication;
 - (iv) support and assist other licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, licensed athletic trainers and identified paraeducators designated in accordance with Section B(3)(g), above, to prepare for and implement their responsibilities related to the administration of specific medications during school hours and during intramural and interscholastic athletics as provided by this policy;
 - (v) provide appropriate follow-up to ensure the administration of medication plan results in desired student outcomes, including providing proper notification to appropriate employees or contractors regarding the contents of such medical plans; and
 - (vi) provide consultation by telephone or other means of telecommunications, which consultation may be provided by an authorized prescriber or other nurse in the absence of the school nurse.
- (b) In addition, the school nurse shall be responsible for:
- (i) implementing policies and procedures regarding the receipt, storage, and administration of medications;
 - (ii) reviewing, on a periodic basis, all documentation pertaining to the administration of medications for students;
 - (iii) performing observations of the competency of medication administration by full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified

paraeducators designated in accordance with Section B(3)(g), above, who have been newly trained to administer medications; and,

- (iv) conducting periodic reviews, as needed, with licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraeducators designated in accordance with Section B(3)(g), above, regarding the needs of any student receiving medication.

J. Training of School Personnel

- (1) Full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraeducators designated in accordance with Section B(3)(g), above, who are designated to administer medications shall at least annually receive training in their safe administration, and only trained full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraeducators designated in accordance with Section B(3)(g), above, shall be allowed to administer medications.
- (2) Training for full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraeducators designated in accordance with Section B(3)(g), above, shall include, but is not necessarily limited to, the following:
 - (a) the general principles of safe administration of medication;
 - (b) the procedures for administration of medications, including the safe handling and storage of medications, and the required record-keeping; and
 - (c) specific information related to each student's medication plan, including the name and generic name of the medication, indications for medication dosage, routes, time and frequency of administration, therapeutic effects of the medication, potential side

effects, overdose or missed doses of the medication, and when to implement emergency interventions.

- (3) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school paraeducator(s) who administer epinephrine pursuant to Sections B and D above or naloxone pursuant to E above, shall annually complete the training program developed by the Departments of Education and Public Health and training in cardiopulmonary resuscitation and first aid, as described in Connecticut General Statutes § 10-212g.
- (4) The Board shall maintain documentation of medication administration training as follows:
 - (a) dates of general and student-specific trainings;
 - (b) content of the trainings;
 - (c) individuals who have successfully completed general and student-specific administration of medication training for the current school year; and
 - (d) names and credentials of the nurse or school medical advisor, if any, trainer or trainers.
- (6) Licensed practical nurses may not conduct training in the administration of medication to another individual.

K. Handling, Storage and Disposal of Medications

- (1) All medications, except those approved for transporting by students for self-medication, those administered by coaches of intramural or interscholastic athletics or licensed athletic trainers in accordance with Section B(3)(f) above, and epinephrine or naloxone to be used for emergency first aid in accordance with Sections D or E above, must be delivered by the parent, guardian, or other responsible adult to the nurse assigned to the student's school or, in the absence of such nurse, the school principal who has been trained in the appropriate administration of medication. Medications administered by coaches of intramural or interscholastic athletics or licensed athletic trainers must be delivered by the parent or guardian directly to the coach or licensed athletic trainer in accordance with Section B(3)(f) above.

- (2) The nurse shall examine on-site any new medication, medication order and the required authorization to administer form, and, except for epinephrine and naloxone to be used as emergency first aid in accordance with Sections D and E above, shall develop a medication administration plan for the student before any medication is given to the student by any school personnel. No medication shall be stored at a school without a current written order from an authorized prescriber.
- (3) The school nurse shall review all medication refills with the medication order and parent authorization prior to the administration of medication, except for epinephrine or naloxone intended for emergency first aid in accordance with Sections D and E above.
- (4) Emergency Medications
 - (a) Except as otherwise determined by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse or, in the absence of the school nurse, the principal or the principal's designee who has been trained in the administration of medication.
 - (b) Emergency medication shall be locked beyond the regular school day or program hours, except as otherwise determined by a student's emergency care plan.
- (5) All medications, except those approved for keeping by students for self-medication, shall be kept in a designated and locked location used exclusively for the storage of medication. Controlled substances shall be stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet.
- (6) Access to stored medications shall be limited to persons authorized to administer medications. Each school or before or after school program and school readiness program shall maintain a current list of such authorized persons.
- (7) All medications, prescription and non-prescription, shall be delivered and stored in their original containers and in such a manner that renders them safe and effective.
- (8) At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before or after school program and school readiness program. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be

under the direct control of the principal and, if necessary, the program director or lead teacher who has been trained in the general principles of the administration of medication shall also have a set of keys.

- (9) Medications that must be refrigerated shall be stored in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator must be located in the health office that is maintained for health services with limited access. Non-controlled medications may be stored directly on the refrigerator shelf with no further protection needed. Controlled medication shall be stored in a locked box that is affixed to the refrigerator shelf.
- (10) All unused, discontinued or obsolete medications shall be removed from storage areas and either returned to the parent or guardian or, if the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse:
 - (a) non-controlled drugs shall be destroyed in the presence of at least one witness;
 - (b) controlled drugs shall be destroyed in pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies; and
 - (c) accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue, and jointly documented on the student medication administration record and on a medication error form pursuant to Section 10-212a(b) of the Connecticut General Statutes. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies.
- (11) Medications to be administered by coaches of intramural or interscholastic athletic events or licensed athletic trainers shall be stored:
 - (a) in containers for the exclusive use of holding medications;
 - (b) in locations that preserve the integrity of the medication;
 - (c) under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and
 - (d) in a locked secured cabinet when not under the general supervision of the coach or licensed athletic trainer during intramural or interscholastic athletic events.

- (12) In no event shall a school store more than a three (3) month supply of a medication for a student.

L. School Readiness Programs and Before or After School Programs

- (1) As determined by the school medical advisor, if any, and school nurse supervisor, the following procedures shall apply to the administration of medication during school readiness programs and before or after school programs run by the Board, which are exempt from licensure by the Office of Early Childhood:
- (a) Administration of medication at these programs shall be provided only when it is medically necessary for participants to access the program and maintain their health status while attending the program.
 - (b) Except as provided by Sections D and E above, no medication shall be administered in these programs without:
 - (i) the written order of an authorized prescriber; and
 - (ii) the written authorization of a parent or guardian or an eligible student.
 - (c) A school nurse shall provide consultation to the program director, lead teacher or school administrator who has been trained in the administration of medication regarding the safe administration of medication within these programs. The school medical advisor and school nurse supervisor shall determine whether, based on the population of the school readiness program and/or before or after school program, additional nursing services are required for these programs.
 - (d) Only school nurses, directors or directors' designees, lead teachers or school administrators who have been properly trained may administer medications to students as delegated by the school nurse or other registered nurse. Properly trained directors or directors' designees, lead teachers or school administrators may administer oral, topical, intranasal or inhalant medications. Investigational drugs or research or study medications may not be administered in these programs.
 - (e) Students attending these programs may be permitted to self-medicate only in accordance with the provisions of Section B(3) of this policy. In such a case, the school nurse must provide the program director, lead teacher or school administrator running the

program with the medication order and parent permission for self-administration.

- (f) In the absence of the school nurse during program administration, the program director, lead teacher or school administrator is responsible for decision-making regarding medication administration.
 - (g) Cartridge injector medications or nasal spray may be administered by a director, lead teacher or school administrator only to a student with a medically-diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.
- (2) Local poison control center information shall be readily available at these programs.
 - (3) Procedures for medication emergencies or medication errors, as outlined in this policy, must be followed, except that in the event of a medication error a report must be submitted by the program director, lead teacher or school administrator to the school nurse the next school day.
 - (4) Training for directors or directors' designees, lead teachers or school administrators in the administration of medication shall be provided in accordance with Section J of this policy.
 - (5) All medications must be handled and stored in accordance with Section K of this policy. Where possible, a separate supply of medication shall be stored at the site of the before or after or school readiness program. In the event that it is not possible for the parent or guardian to provide a separate supply of medication, then a plan shall be in place to ensure the timely transfer of the medication from the school to the program and back on a daily basis.
 - (6) Documentation of any administration of medication shall be completed on forms provided by the school and the following procedures shall be followed:
 - (a) a medication administration record for each student shall be maintained by the program;
 - (b) administration of a cartridge injector medication or nasal spray shall be reported to the school nurse at the earliest possible time, but no later than the next school day;

- (c) all instances of medication administration, except for the administration of cartridge injector medication or nasal spray, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
 - (d) the administration of medication record must be submitted to the school nurse at the end of each school year and filed in the student's cumulative health record.
- (7) The procedures for the administration of medication at school readiness programs and before or after school programs shall be reviewed annually by the school medical advisor, if any, and school nurse supervisor.

M. Review and Revision of Policy

In accordance with the provisions of Conn. Gen. Stat. Section 10-212a(a)(2) and Section 10-212a-2 of the Regulations of Connecticut State Agencies, the Board shall review this policy periodically, and at least biennially, with the advice and approval of the school medical advisor, if any, or other qualified licensed physician, and the school nurse supervisor. Any proposed revisions to the policy must be made with the advice and approval of the school medical advisor, school nurse supervisor or other qualified licensed physician.

Legal References:

Connecticut General Statutes:

Public Act No. 24-93, "An Act Concerning Various and Assorted Revisions to the Education Statutes."
Section 10-206
Section 10-212
Section 10-212a
Section 10-212c
Section 10-212g
Section 10-220j
Section 14-276b
Section 19a-900
Section 21a-240
Section 21a-286
Section 52-557b

Regulations of Conn. State Agencies:

Sections 10-212a-1 through 10-212a-10, inclusive

Memorandum of Decision, In Re: Declaratory Ruling/Delegation by Licensed Nurses to Unlicensed Assistive Personnel, Connecticut State Board of Examiners for Nursing (April 5, 1995)

Storage and Administration of Opioid Antagonists in Schools: Guidelines for Local and Regional Boards of Education, Connecticut State Department of Education (October 1, 2022)

ADOPTED: _____
REVISED: _____

8/13/2024



[NOTE: This form makes reference to a school medical advisor. If your district does not, and is not required to, have a medical advisor, all references to such should be deleted before providing this form to parents.]

**[Board of Education/School Letterhead]
REFUSAL TO PERMIT ADMINISTRATION
OF EPINEPHRINE FOR EMERGENCY FIRST AID**

Name of Student: _____ Date of Birth: _____

Address of Student:

Name of Parent(s): _____

Address of Parent(s): _____
(if different from child)

Connecticut law requires the school nurse and other qualified school personnel in all public schools to maintain epinephrine in cartridge injectors (EpiPens) for the purpose of administering emergency first aid to students who experience allergic reactions and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine. State law permits the parent or guardian of a student to submit a written directive to the **school nurse or school medical advisor** that epinephrine shall not be administered to such student in emergency situations. **This form is provided for those parents who refuse to have epinephrine administered to their child.** The refusal is valid for only for the 20__-20__ school year.

I, _____, the parent/guardian of _____,
Print name of parent/guardian Print name of student

refuse to permit the administration of epinephrine to the above named student for purposes of emergency first aid in the case of an allergic reaction.

Signature of Parent/Guardian

Date

**Please return the completed original form to your child’s school nurse or school medical advisor,
_____ *[Insert name of medical advisor]* at**

_____ *[Insert address of medical advisor]*.

9/27/2023



[NOTE: This form makes reference to a school medical advisor. If your district does not, and is not required to, have a medical advisor, all references to such should be deleted before providing this form to parents.]

**[Board of Education/School Letterhead]
REFUSAL TO PERMIT ADMINISTRATION
OF OPIOID ANTAGONISTS FOR EMERGENCY FIRST AID**

Name of Student: _____ Date of Birth: _____

Address of Student:

Name of Parent(s): _____

Address of Parent(s): _____
(if different from child)

Connecticut law authorizes the school nurse and other qualified school personnel in all public schools to maintain opioid antagonists (Narcan) for the purpose of administering emergency first aid to students who experience an opioid-related drug overdose and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of opioid antagonists. State law permits the parent or guardian of a student to submit a written directive to the **school nurse or school medical advisor** that opioid antagonists shall not be administered to such student in emergency situations. **This form is provided for those parents who refuse to have opioid antagonists administered to their child.** The refusal is valid for only for the 20__-20__ school year.

I, _____, the parent/guardian of _____,
Print name of parent/guardian Print name of student
refuse to permit the administration of opioid antagonists to the above named student for purposes of emergency first aid in the case of an opioid-related drug overdose.

Signature of Parent/Guardian

Date

**Please return the completed original form to your child’s school nurse or school medical advisor,
_____ [Insert name of medical advisor] at
_____ [Insert address of medical
advisor].**

9/27/2023

**BOARD OF EDUCATION
SOUTHINGTON, CONNECTICUT**

Informational Only _____ Board Meeting Date October 23, 2025

Decision Requested X Agenda Code 6 e.

AGENDA REPORTING FORM

Agenda Topic: Adoption of Southington Public Schools Strategic Plan, 2025-2030

Summary of Issue: The Southington Public Schools strategic planning process was a collaborative, data-driven effort aligning district goals with community needs. Rooted in stakeholder engagement, it began with a comprehensive needs assessment, including surveys, focus groups, and interviews. A Strategic Planning Task Force—representing educators, administrators, students, families, and community leaders—synthesized insights to identify key strengths, challenges, and opportunities. Through reflection, analysis, and consensus-building, the task force developed multi-year priorities to enhance student learning, support staff, and strengthen school culture. This plan provides a clear roadmap for sustainable, student-centered change, grounded change, grounded in transparency and inclusivity.

Background: _____ N/A _____

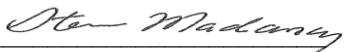
Alternative Strategies: _____ N/A _____

Cost (if applicable): _____ N/A _____ **Funding Source:** _____ N/A _____

Beginning Date of Program or Project: _____ 2025 _____

Ending Date of Program or Project: _____ 2030 _____

Recommendation or Comment: Adopt the Southington Public School Strategic Plan, 2025-2030 as presented by the administration.


Signature of Superintendent of Schools

Care. Engage. Inspire. Prepare.

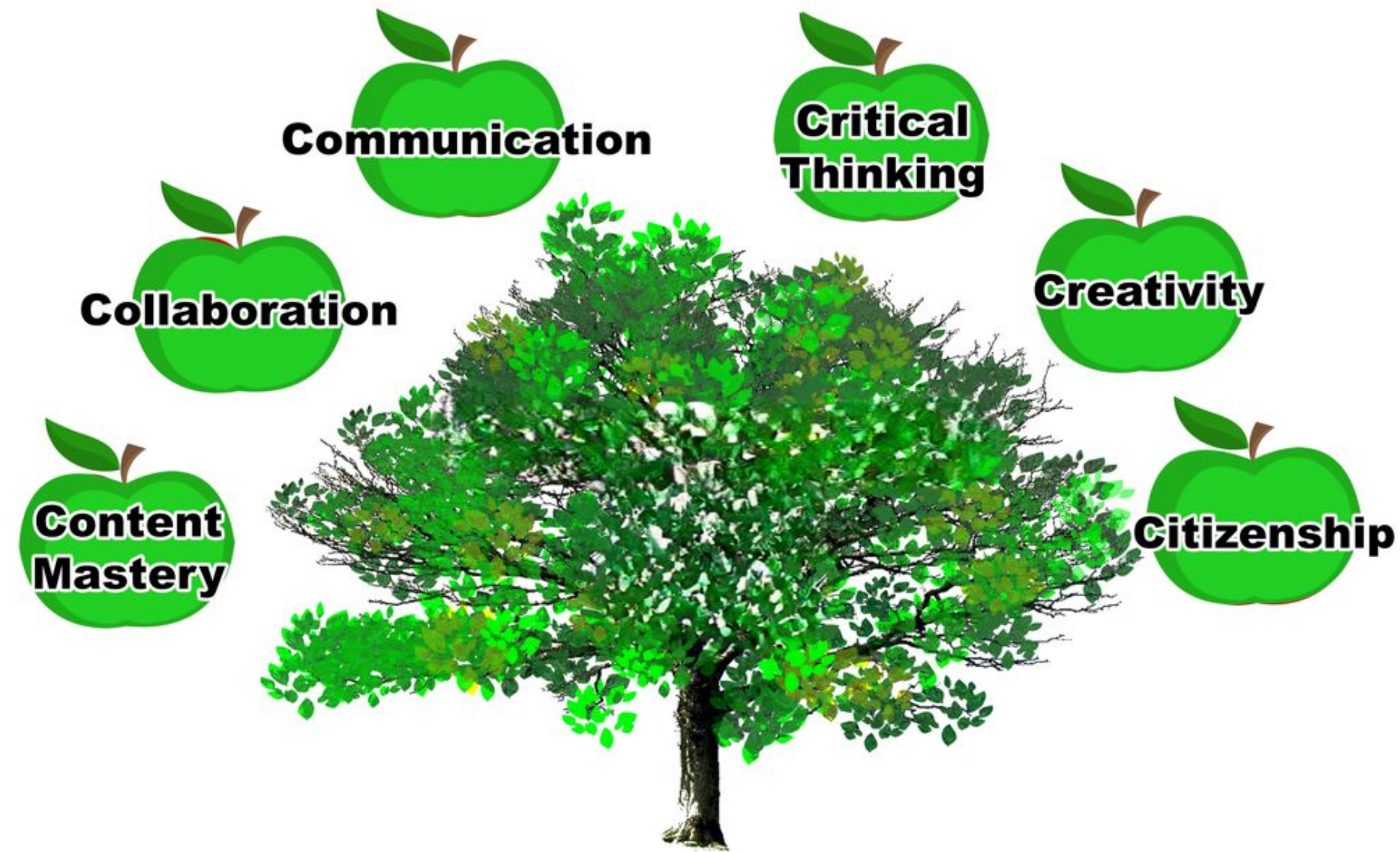
The Southington Public Schools Strategic Plan
2025-2030



Southington Public Schools

Vision of a Graduate

A
wi
fo
an
eff



A graduate of the Southington Public Schools will be college or career ready and prepared for life beyond by mastering the knowledge and demonstrating the skills to communicate effectively, think creatively and critically, and contribute to the global community.



Care. Engage. Inspire. Prepare!

Dear Southington Community,

We are proud to present **Care. Engage. Inspire. Prepare: The Southington Public Schools Strategic Plan**, a shared vision for the future of our schools that reflects the voices, aspirations, and priorities of our students, families, educators, staff, and community partners. This plan is the result of **months of collaboration, thoughtful dialogue, and collective commitment** to ensuring every student in Southington receives a **high-quality, engaging, and future-focused education**. It will serve as our roadmap toward helping every student achieve our Vision of the Graduate!

We extend our deepest gratitude to the **Strategic Planning Steering Committee** for their leadership and dedication throughout this process. We also want to thank each person who **participated in an interview, focus group, or community forum, as well as the thousands of individuals who completed surveys** to share their perspectives. Your insights and feedback were essential in shaping the priorities and strategies that will guide our district in the years ahead.

This plan is more than a document—it is a **commitment to action**. With your continued partnership and support, we will bring this vision to life, ensuring that Southington Public Schools remains a place where **all students are prepared to learn, lead, and thrive—today and in the future**.

Thank you for your engagement, trust, and dedication to our schools. We look forward to the journey ahead.

Sincerely,

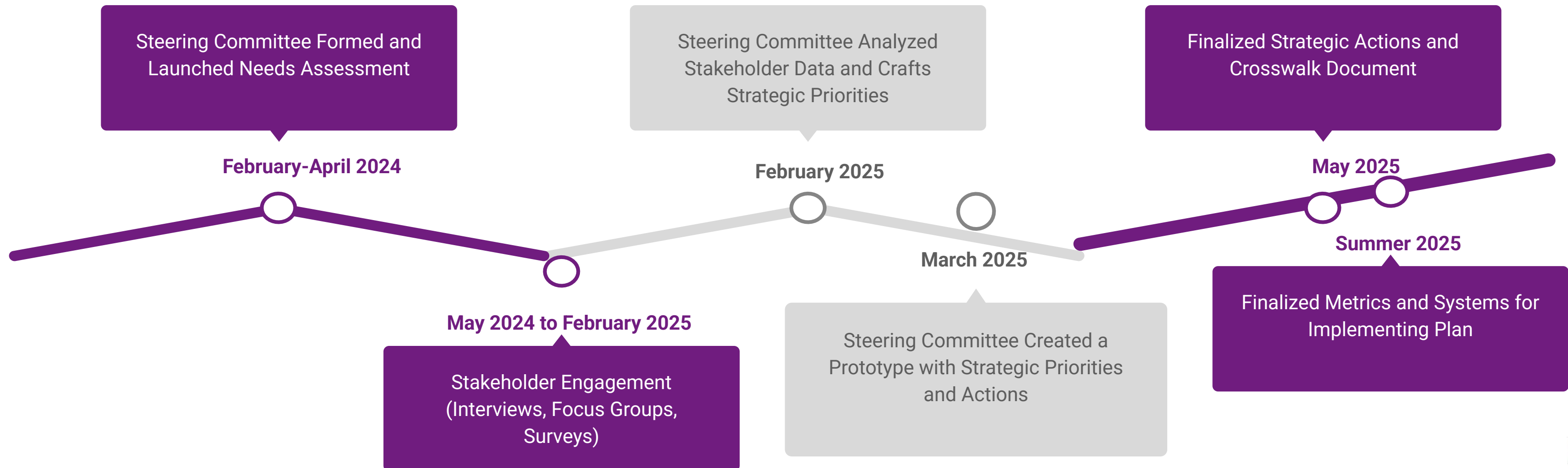
Steve Madancy
Superintendent, Southington Public Schools

Colleen Clark
Chair, Southington Board of Education



Our Strategic Planning Process

The Southington Public Schools strategic planning process was a **collaborative, data-driven effort** aligning district goals with community needs. Rooted in **stakeholder engagement**, it began with a **comprehensive needs assessment**, including surveys, focus groups, and interviews. A **Strategic Planning Task Force**—representing educators, administrators, students, families, and community leaders—synthesized insights to identify **key strengths, challenges, and opportunities**. Through **reflection, analysis, and consensus-building**, the task force developed **multi-year priorities** to enhance student learning, support staff, and strengthen school culture. This plan provides a **clear roadmap for sustainable, student-centered change**, grounded in **transparency and inclusivity**.



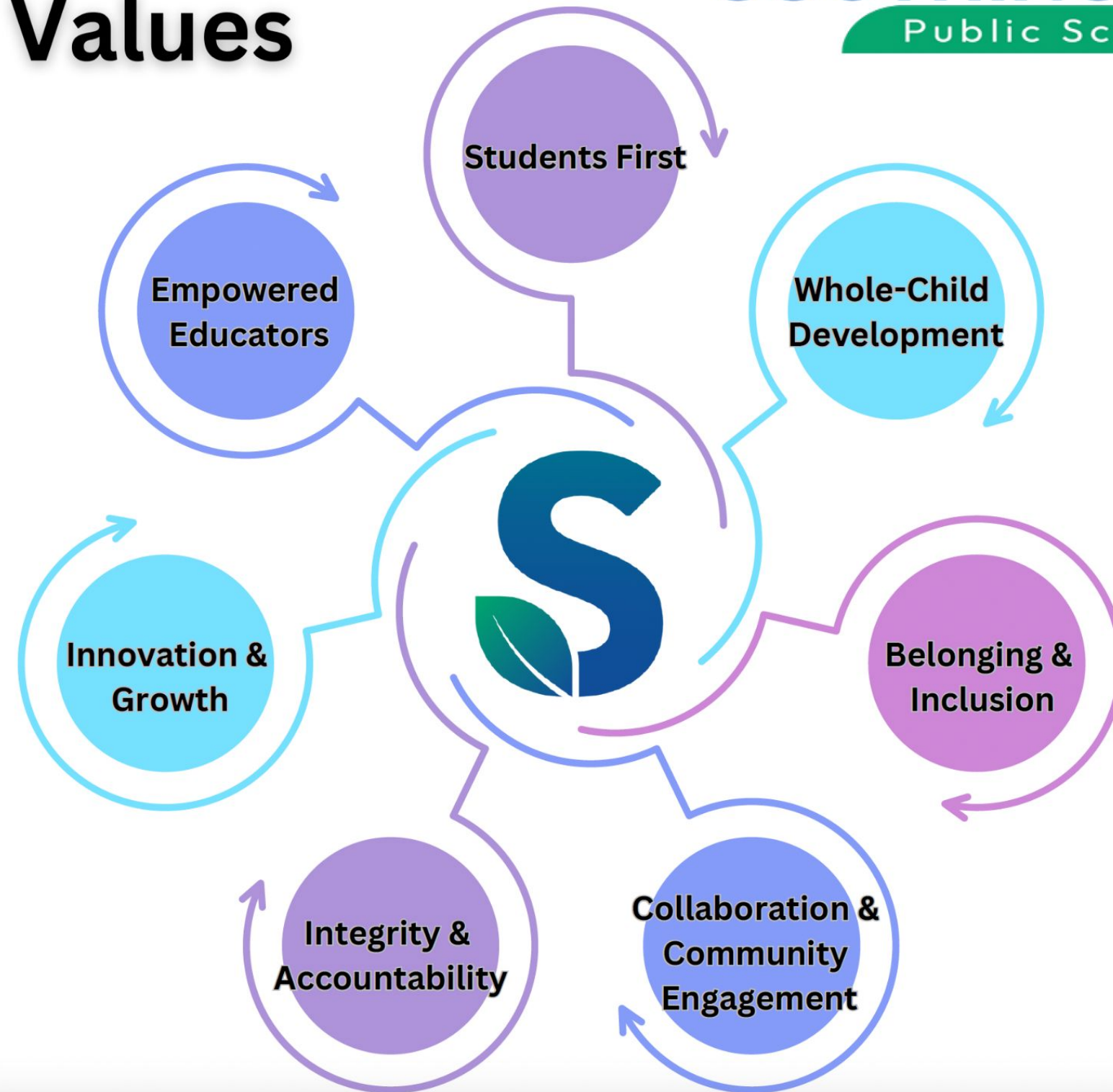
Stakeholder Input--By the Numbers

Stakeholder input is essential in a strategic planning process because it ensures the plan reflects the needs, priorities, and perspectives of those most impacted by its implementation. Engaging diverse stakeholders—such as educators, students, families, and community members—not only supports shared ownership but also leads to more informed, innovative, and sustainable decisions that drive meaningful improvement. Over the last year, the Steering Committee has engaged thousands of stakeholders through a variety of methods.

3,067	Survey Responses
30	Interviews (administrators, board members)
20	Focus Groups (student, teacher, parent, community)
10	Steering Committee Meetings
1	Community Forum



Core Values



Zoom W

A school district's core values serve as a foundation for decision-making, guiding leadership, instruction, and community engagement. When clearly defined and consistently upheld, they create a shared sense of purpose, shape the district's culture, and ensure alignment between strategic priorities and daily practices, ultimately supporting student success.

Southington Public Schools Core Values

The core values listed below were identified through patterns that emerged during the information-gathering process across stakeholder groups and were further refined through several synthesis activities conducted by the Steering Committee.

Students First – Every decision, action, and learning experience is designed with student success and well-being at the core.

Whole-Child Development – Academic success, social-emotional learning, and mental health are equally important in creating safe, supportive environments where students thrive.

Belonging and Inclusion – Every student, educator, and staff member deserves to feel valued, respected, and empowered in a diverse and welcoming community.

Collaboration and Community Engagement – Strong partnerships and a shared purpose are foundational for ensuring that all students thrive.

Integrity and Accountability – Transparency, ethical decision-making, and follow-through build trust and serve the best interests of students and the community.

Innovation and Growth – Curiosity, adaptability, and bold thinking fuel continuous improvement and help meet the evolving needs of students.

Empowered Educators – Investing in educators ensures they have the support, resources, and recognition needed to make a lasting impact on students.



Strategic Priorities

A small set of clear, well-chosen priorities is essential for promoting coherence across a school district. By focusing energy and resources on what matters most, we ensure every classroom, school, and department is working toward shared goals. These priorities provide a common language for decision-making, align professional learning and resource allocation, and help the district stay focused even as new challenges arise. Over time, this focus builds the conditions for sustained improvement—ensuring that progress is not only made, but also maintained and deepened for future generations of Southington students.

- ❖ **High Quality Teaching and Learning**
- ❖ **Student Social Emotional Learning & Student Well-Being**
- ❖ **Talent Management & Workforce Sustainability**
- ❖ **Communication, Engagement, & Community Partnerships**
- ❖ **School Facilities & Infrastructure**
- ❖ **Special Education Systems and Structures**



Strategic Priorities



Strategic Priority 1:

Support High-Quality Teaching and Learning

Strategic Actions	Point Person/Unit	Timeline
Review and update the formal curriculum revision process, as defined in the SPS Policies, to better reflect our philosophy of continuous improvement	Office of Curriculum & Instruction	Completed by June 2026
Create a yearly review tool and process to ensure the curriculum is consistent, rigorous, aligned, and supports student growth and high quality instruction.	Office of Curriculum & Instruction	Completed by June 2027
Redesign and implement a professional learning system for administrators and teachers that aligns with best practices in adult learning and supports the district’s vision for high-quality instruction	Office of Curriculum & Instruction	Completed by June 2027
Create a protocol and routine for instructional rounds to continuously gather school and classroom-level data that fosters improvement	Office of Curriculum & Instruction	Completed by June 2028
Establish and implement a district-wide vision that promotes equitable, high-quality teaching and learning	Office of Curriculum & Instruction	Completed by June 2029
Evaluate the alignment of SPS Vision of a Graduate with curriculum, instruction and assessment	Office of Curriculum & Instruction	Completed by June 2030
<p>Measures of Progress:</p> <ul style="list-style-type: none"> ● Progress on State Accountability Index, in comparison with reference districts (state performance data) ● Progress on district benchmark assessments (all subgroups) ● Instructional rounds data patterns ● Professional learning feedback surveys ● Annual curriculum evaluation tool 		



Strategic Priority 2:

Enhance Student Social Emotional Learning & Student Well-Being

Strategic Actions	Point Person/Unit	Timeline
Implement response to recently enacted CT School Climate Policy (PA 23-167) provisions	District Climate Committee Building Committee	Launch: August 2025 Survey roll-out: Spring 2025 Revise: Winter 2027
STEPS/EI Curriculum crosswalk with Restorative Practices	Town/District Committee (already developed)	Refine K-5: Fall 2025 9-12 Roll-out: 2026-2027 6-8 Roll-out: TBD
Expand Access to Mental Health Supports	Middle School Support Sub-Committee	Data Review: Summer 2025 Launch Sub-Committee: Fall 2025 Present Revised Log-Entry Protocol: Fall 2025 Pilot Student Support Meeting: Winter 2026
Design and deliver professional development on mental health topics	PDEC/Pupil Services	Launch: November 2025
Expand Community Partnerships to support student mental health	ASET/Truancy Committee	Launch: Fall 2025 (and ongoing)

- **Measures of Progress:**

- Completed Draft of District and School Plans
- Connections to 'the work' add to the 26/27 Survey
- Data driven recommendations for expansion of mental health and wellness supports (staff, curriculum, programming)
- Monthly student surveys for SEL curriculum



Strategic Priority 3:

Strengthen Talent Management & Workforce Sustainability

Strategic Actions	Point Person/Unit	Timeline
Enhance recruitment strategies to address shortages and implement district Increasing Educator Diversity Plan.	Human Resources	Policy and Practice Review: 2025-2026 Implement, Gather Data and Refine: 2026-2027
Revamp and enhance the hiring process	Human Resources	Update Applications--Summer 2025 Update Forms in Applicant System--Fall 2025 ~ update forms in application system Provide Training to Admins and Hiring Managers: Spring 2026 Analyze Data and Refine--Ongoing
Design a comprehensive orientation and training plan for all new hires	Human Resources	Research and Develop Plan: 2025-26 Implement Plan: Summer 2026 Analyze Data and Refine--Ongoing
Establish a plan to ensure the district is providing quality, meaningful professional development and training opportunities for all district employees that is tailored to support their assignment (teacher, paraeducator, ABA, administrative assistant, custodian, nurse, etc.).	<ol style="list-style-type: none"> 1. Human Resources 2. PDEC 3. Administrators responsible for oversight of each department 	Establish committee to expand current practice: 2025-2026 Implement Expanded offerings to all employees: 2026-2027 Analyze Data and Refine--Ongoing
Develop a district-wide employee handbook to provide at hiring.	Human Resources	Finalize and Distribute Handbook--August 2025
Conduct comparative compensation and working conditions study to inform future contract negotiations and ensure long-term competitiveness.	Human Resources	Conduct study: 2025-26 Identify future compensation and working conditions priorities: Spring 2026

Measures of Progress:

- Retention rates
- Attendance
- Unfilled positions/shortage areas
- Survey results from new hires and exited staff



Strategic Priority 4:

Improve Communication, Engagement, & Community Partnerships

Strategic Actions	Point Person/Unit	Timeline
Create an inventory of current partnerships that exist between schools and local businesses/community organizations	School Counseling Director and Career Liaison with Maia Learning as the tool	Spring 2026
Assess the efficacy of our existing tools used to communicate with families	IT Department	Complete Study: Winter 2026
Create communications strategy to elevate awareness and participation in school engagement events (i.e. College Fairs, Career Fair, Course Fair, MS Open House)	School Counseling Departments and School-based administration	Ongoing
Create student engagement team to enhance and coordinate communications with students, parents and educators via social media	Superintendent and Digital Learning Coordinator	Ongoing
Identify and promote college dual enrollment and ECE class experiences for students	School Counseling Department and Director of Teaching and Learning	Ongoing
<p>Measures of Progress:</p> <ul style="list-style-type: none"> • Number of parents who have activated a Parent Square account will increase (is there a way to identify how many are using another language)? • Annual survey data around district communications • Student and Parent Attendance at Events • Followers on Social Media and Class Intercom social media data • Number of students participating in internships/job shadows • Number of students participating in dual enrollment classes 		



Strategic Priority 5: Modernize School Facilities & Infrastructure

Strategic Actions	Point Person/Unit	Timeline
Develop a Five (5) year plan of action for school facilities	Elementary Facilities Committee in place	BOE Vote on May 22, 2025 regarding Phase 1 of 3 (KES, DES/KSA, FES) May 2026
Create a long-term plan for continuous improvements and upgrades to all schools to (1) ensure all students have access to quality learning spaces necessary to support teaching and learning and (2) enhance student and family engagement.	<ul style="list-style-type: none"> ● Operations Dept./Purchasing Mgr./Outside vendor (based on bid) ● Roof project: BOE/BOF/TC-referendum project ● Technology Department ● Ag Sci Dept/Operations Dept./Purchasing Mgr. ● SHS Athletic Dept/Superintendent ● Purchasing Mgr./BOE Capital Improvement Plan ● Superintendent/Operations/ Purchasing Mgr. 	Launch Plan: July 2026 Complete Implementation: June 2031
Develop a public relations strategy to disseminate information, solicit input, and garners support.	BOE/Superintendent/BOF	Ongoing

Measures of Progress:

- The completed plan
- Completion of Projects in a timely manner



Strategic Priority 6:

Improve Efficiency and Effectiveness of District Special Education Operations and Services

Strategic Actions	Point Person/Unit	Timeline
Review historical costs and trends associated with special education and identify areas for improvement resulting in savings	Pupil Services Director, Accounting Manager	Fall 2025-Winter 2026
Analyze staffing levels of certified and non certified staff by caseload and support hours	Human Resources Manager, Building Administrators, Pupil Services Administrators	25-26 School Year
Monitor, adjust, and innovate the district's Continuum of Services'	Pupil Services Department, Director of Business and Finance, Superintendent, District Literacy Coordinator	Ongoing
Analyze trends and patterns in student identification rates by category	Special Education Coordinators	Ongoing
Streamline professional development through PDEC to focus on increasing educator awareness of various disabilities and associated best practices across levels and certification areas	Pupil Services PDEC Reps, Dir. of Teaching and Learning	Ongoing
<p>Measures of Progress:</p> <ul style="list-style-type: none"> • Savings in costs associated with outplacement tuitions, independent evaluations, mediations, and due process filings. • Assigned support and staffing levels that align with service hours rather than size of schools. • PDEC survey results • Expansion or Innovation of within the district's 'Continuum of Services' i.e. Elementary Reading Academy, Elementary Diagnostic Placement Program, Middle and High School Autism Programs 		



Measures and Metrics

Monitoring progress is critical to sustaining improvement over time. Southington's measures are intentionally holistic: they include **outcome measures** that show whether we are achieving long-term goals for student learning and well-being, **leading indicators** that signal whether key strategies are on track, and **practical, real-time measures** that create short feedback loops for continuous learning and adjustment. Together, these metrics ensure that we celebrate progress, identify challenges early, and stay focused on what matters most for students.

Strategic Priority	Measures
High-Quality Teaching & Learning	- Increase in State Accountability Index (all subgroups) - % of curriculum areas reviewed annually - Trends from instructional rounds data - Educator satisfaction with professional learning
SEL & Student Well-Being	- Completion of district climate plan - Annual school climate survey scores - Access/utilization rates for mental health services - Reduction in chronic absenteeism & discipline incidents - Monthly student surveys for SEL curriculum
Talent Management & Workforce Sustainability	- Educator diversity metrics year over year - Retention and attendance rates - % of staff completing professional learning plans - Satisfaction of new hires from survey data
Communication & Community Engagement	- % of parents using district communication platforms (ParentSquare) - Growth in social media followers and engagement rates - Attendance at school/district events - Number of students participating in internships, dual enrollment
Facilities & Infrastructure	- Completion of 5-year facilities plan - % of projects completed on schedule and within budget - Technology refresh cycle completion rates - Family/community satisfaction with facilities (annual survey)
Special Education Efficiency and Effectiveness	-Savings in costs associated with special education, aligned staffing levels- PDEC survey results- Expansion or Innovation of the district's 'Continuum of Services'



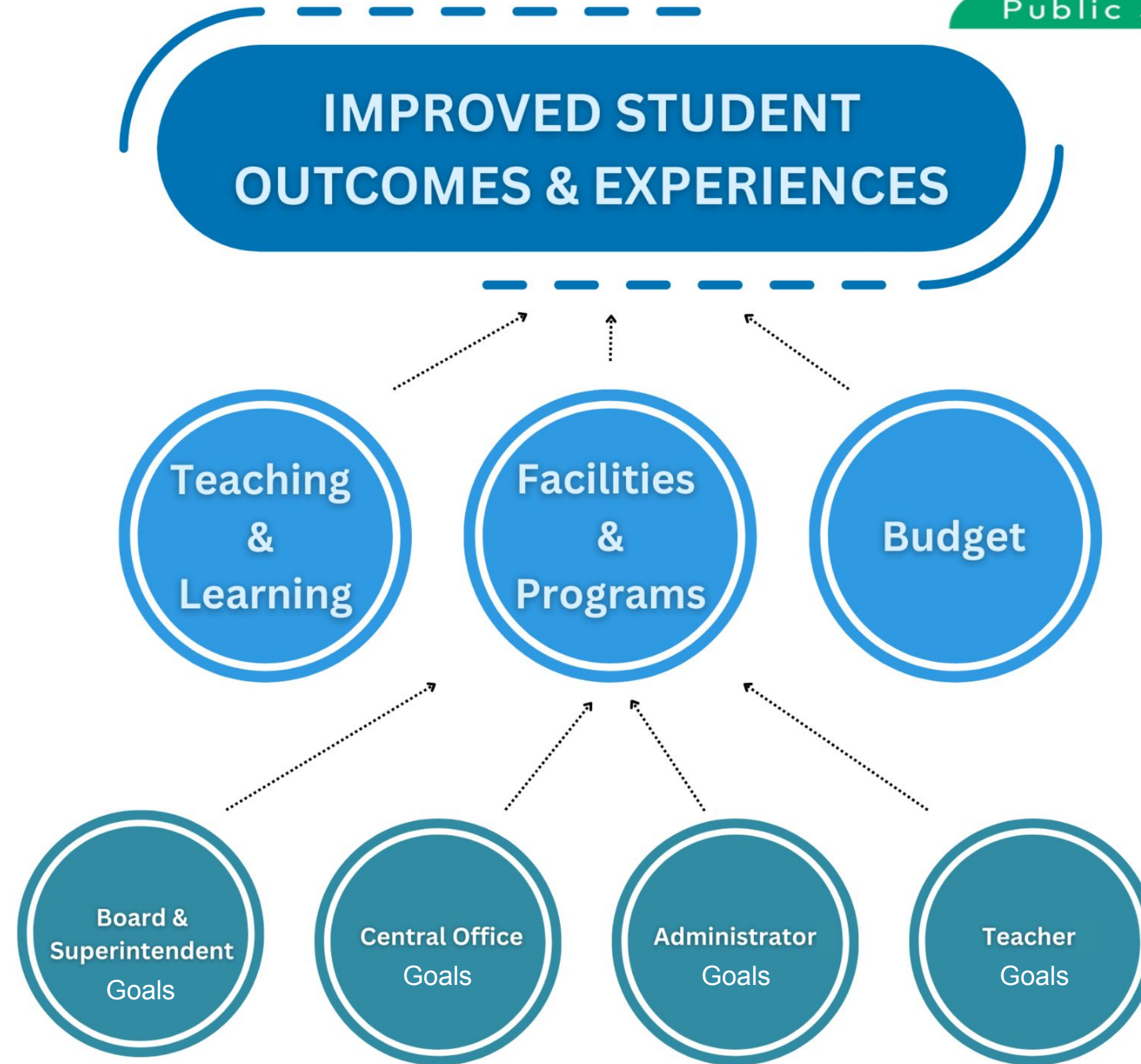
The Strategic Plan In-Action



Building this plan is an important milestone, but it is only the beginning of Southington's improvement journey. A strategic plan is not an end in itself — it is a **living tool** designed to drive honest stocktaking, spark intentional and strategic action, and build coherence across classrooms, schools, and departments.

When used well, the plan creates sustainable structures and routines for gathering evidence, reflecting on progress, and learning together. It provides a shared framework that helps leaders and educators adjust course in real time, respond to emerging needs, and stay focused on the goals that matter most. This discipline of **plan** → **act** → **learn** → **adjust** turns the plan from a static document into an engine for continuous improvement and lasting change.

Recurring Improvement Routines	Time
Superintendent works with Board of Education to identify annual goals aligned with the strategic plan.	Fall Annually
Central Office and building administrators identify annual goals aligned to the superintendent goals and strategic plan.	Fall Annually
Teachers identify annual goals aligned with the strategic plan and school-level priorities.	Fall Annually
Superintendent will present mid-year update report to the Board of Education and Southington community.	Winter Annually
Superintendent will present end-of-year report to the Board of Education and Southington community.	Spring/Summer Annually



Southington Strategic Plan Steering Committee

Thank you to the the strategic planning steering committee, who gave willingly of their time, energy, and inspiration to create a plan that puts students first and that represents the needs and aspirations of the community.

Megan Albanese

Katie Guerrette

Alicia Naleway

Amy Aresco

Brian Jardine

Frank Pepe

Rich Aroian

Marilyn Kahl

Kristen Ritchie

Joy Battista

Seth Korn

Rebecca Savelkoul

Elke Blanchard

Elyse Krantz

Adrienne Schuessler

Gary Dwyer

Stephanie Lawlor

Deborah Stevens

Sara Ebagh

Steve Madancy

Sue Vitcavage

Michael Gagnon

Carlane Mattson-Riston

Amy Zappone





SOUTHINGTON

Public Schools

District Data Presentation *School Year 2024-2025*

Presented By:
The Office of Curriculum & Instruction

October, 2025



State & District Performance Indicators

- Connecticut's Next Generation Accountability System is a broad set of 12 indicators that demonstrate how well a school/district prepares its students for success in college, career, and life.
- The system provides a holistic, multifactor perspective of district and school performance and incorporates student growth over time.
- Today we will examine achievement and growth in English Language Arts, Math and Science.

Smarter Balanced English Language Arts Achievement Overview 24-25

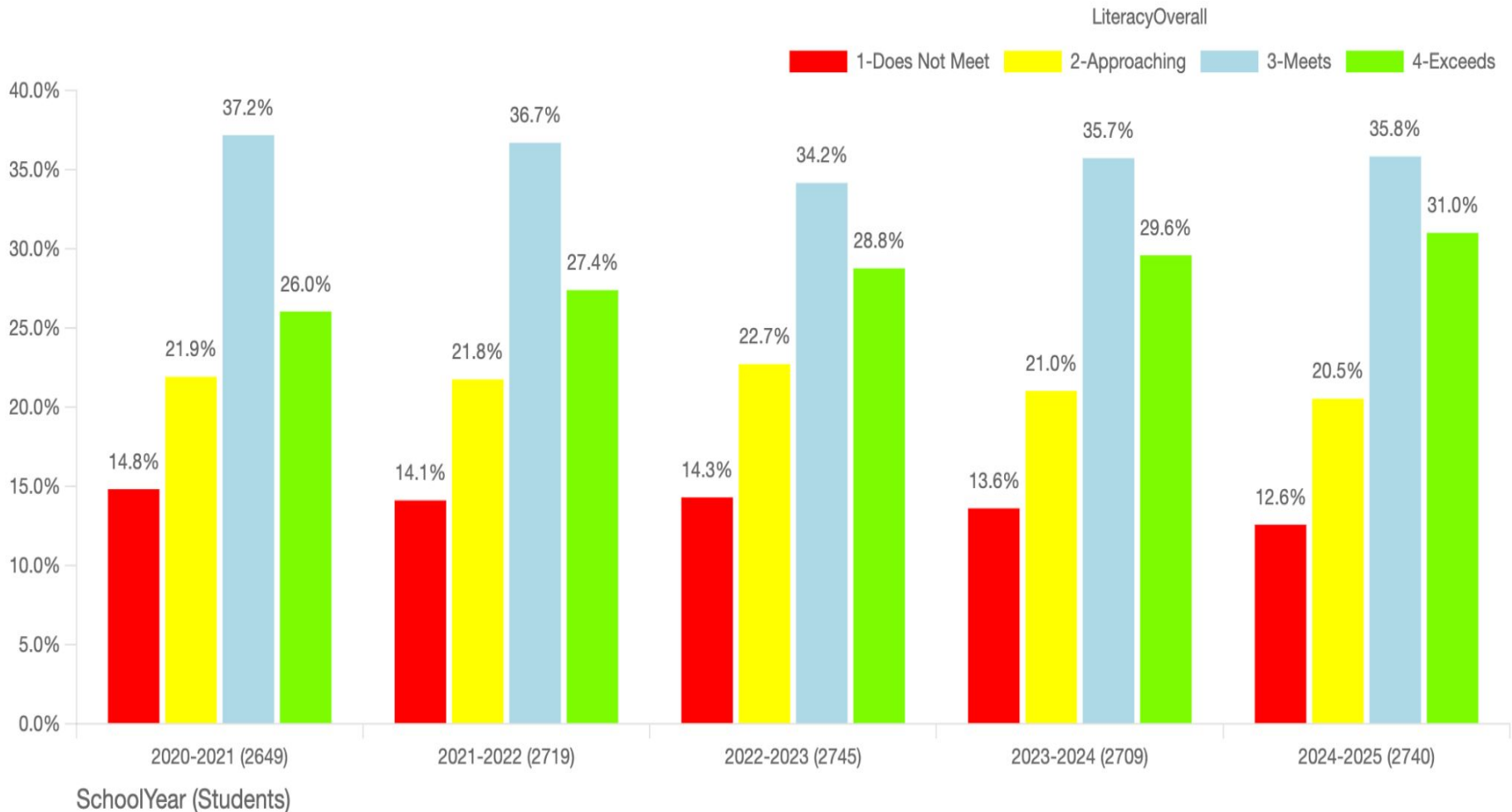
	District Average	State Average
% Level 3 or 4	66.9%	50%



Grade	3	4	5	6	7	8
Percent Level 3 or 4	64%	69%	63%	73%	69%	63%

Smarter Balanced English Language Arts Academic Achievement by Level

SBA ELA Score Distribution: LiteracyOverall



Smarter Balanced English Language Arts Academic Achievement by Level

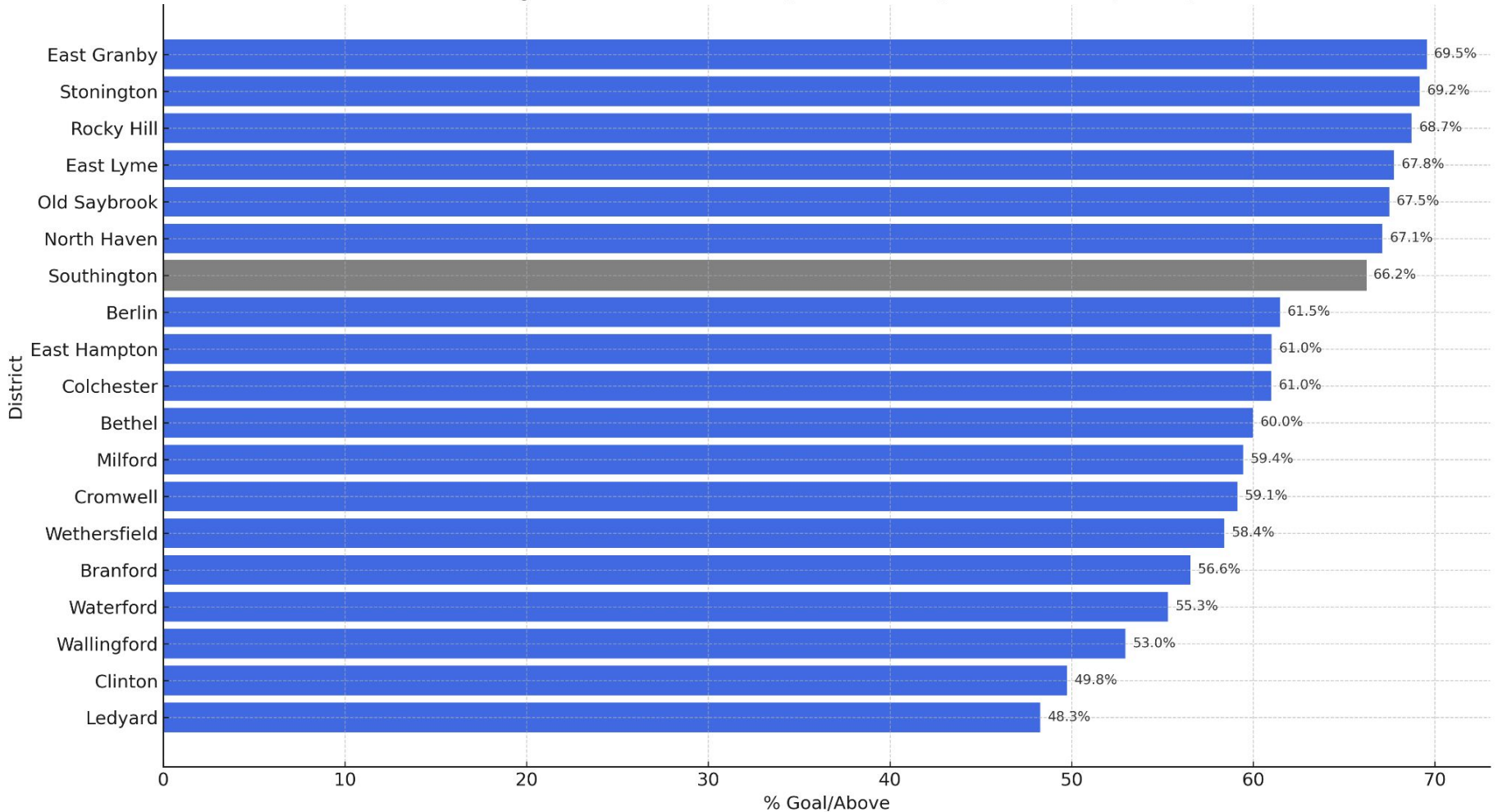
Percents of Students Meeting Level 3 or 4

	18-19	21-22	22-23	23-24	24-25
All Students	68.1	64.1	62.8	64.9	66.9%
Non-High Needs	78.9	75.2	73.6	78.7	80%
High Needs	45.5	39.9	41.7	40.3	44.7%

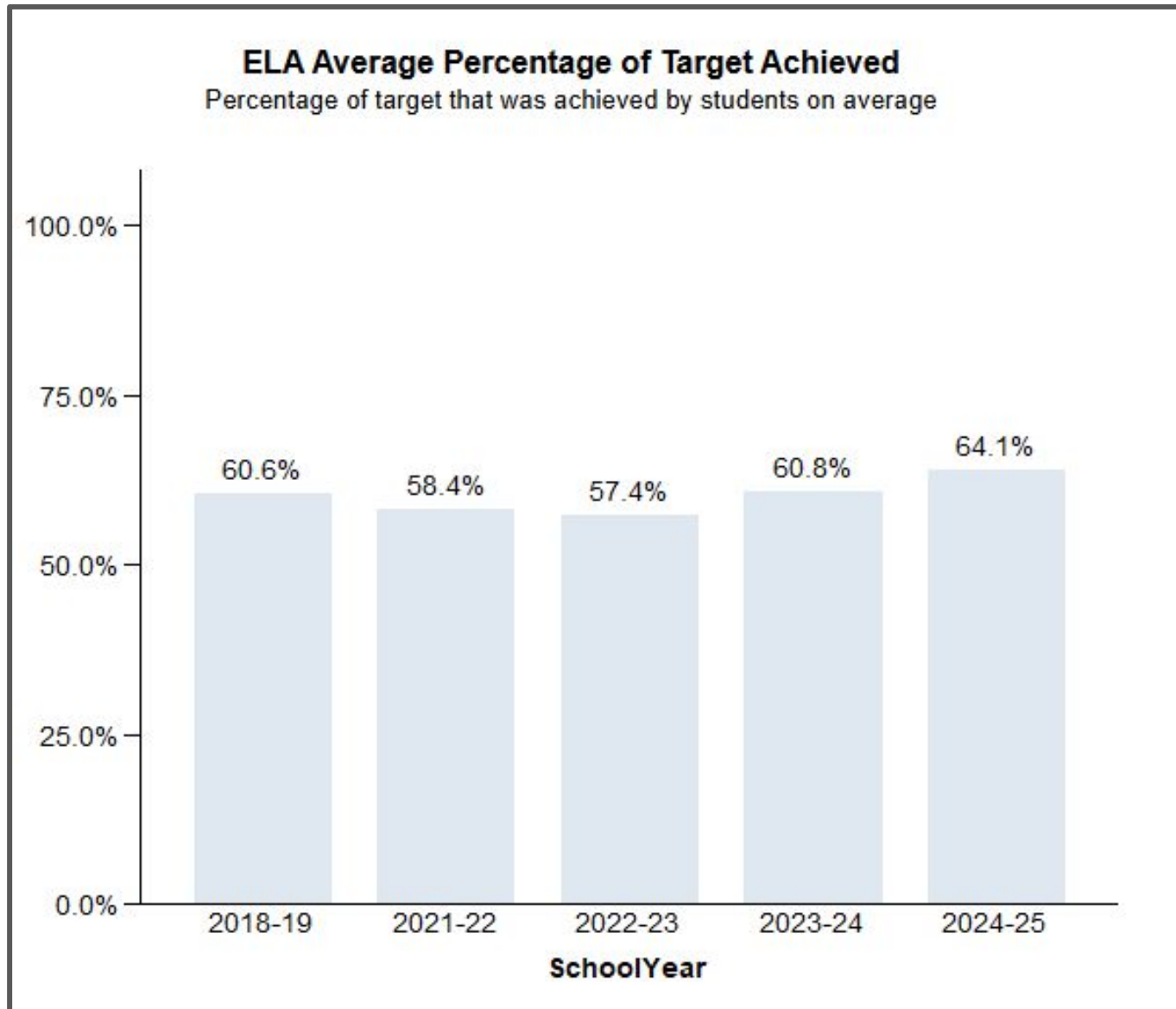
SBA ELA (% Goal/Above)

Achievement Comparisons for DRG D

Average 2025 SBA ELA Scores (% Goal/Above) — Grades 3-8 (DRG D)



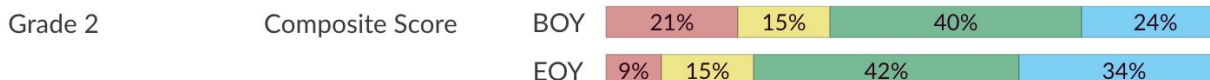
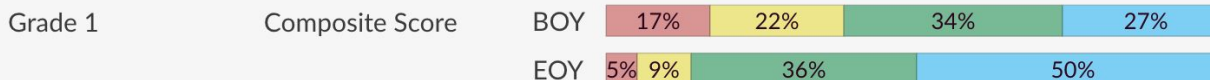
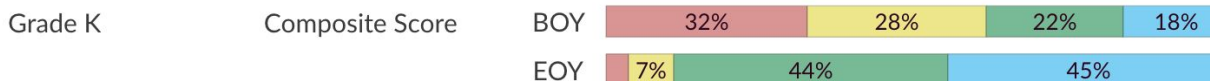
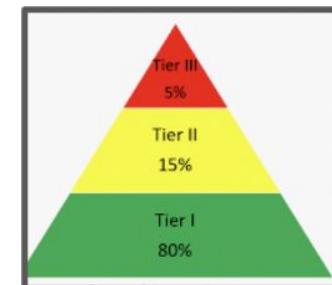
Smarter Balanced English Language Arts Academic Growth



Grades K -2 Reading Data 2024-2025 Dibels mClass



	Fall 2024	Spring 2025
Kindergarten	40%	89%
Grade 1	61%	86%
Grade 2	64%	76%



Smarter Balanced Mathematics Achievement Overview 24-25

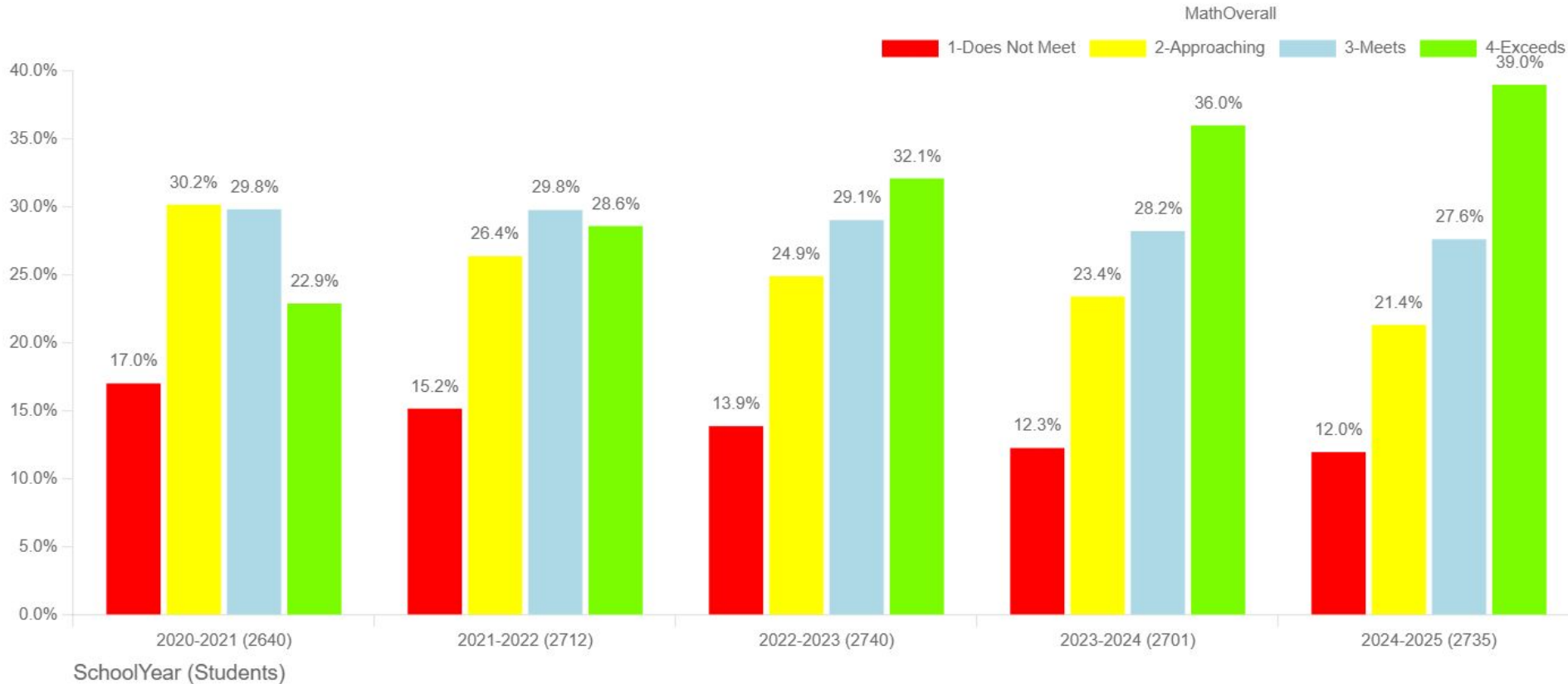
	District Average	State Average
% Level 3 or 4	66.7%	46%



Grade	3	4	5	6	7	8
Percent Level 3 or 4	76%	75%	61%	64%	65%	59%

Smarter Balanced Mathematics Academic Achievement by Level

SBA Math Score Distribution: MathOverall



Smarter Balanced Mathematics Academic Achievement by Level

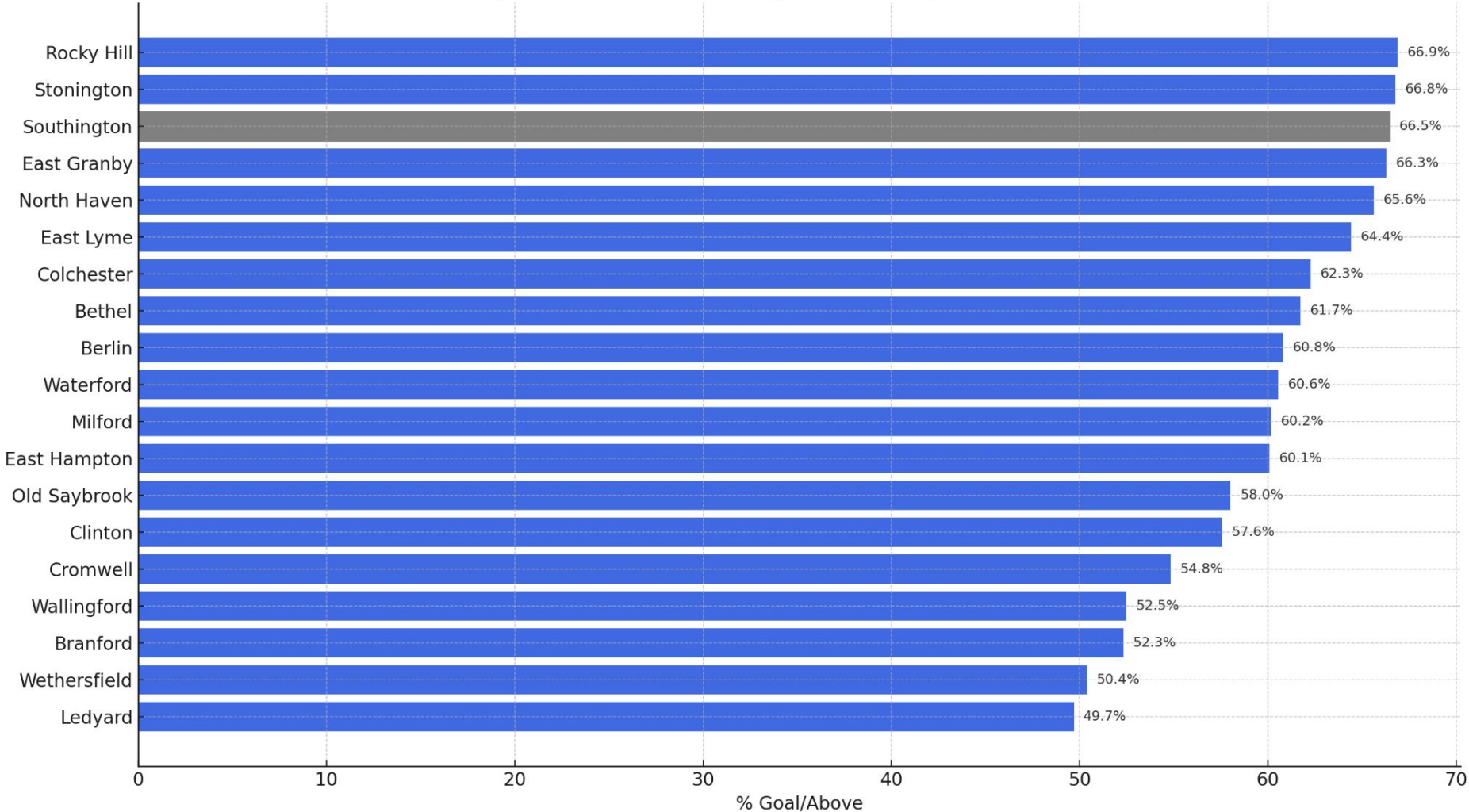
Percents of Students Level 3 or 4

	18-19	21-22	22-23	23-24	24-25
All Students	62.5	58.4	61.2	63.7%	66.7%
Non-High Needs	73.9	70.1	73.4	78.5%	80.6%
High Needs	38.5	32.9	37.1	37.2%	42.6%

SBA Math (% Goal/Above)

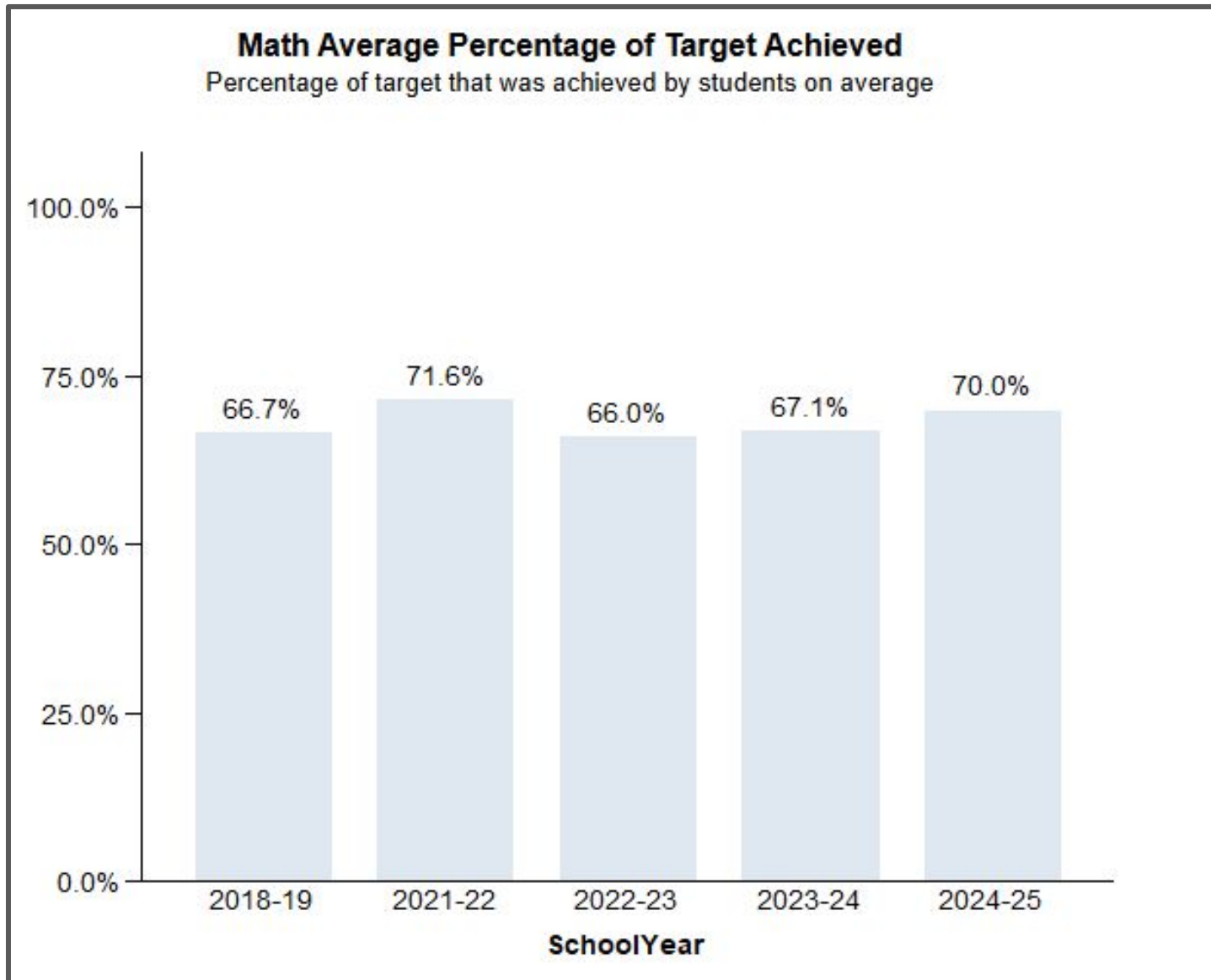
Achievement Comparisons for DRG D

Average 2025 SBA Math Scores (% Goal/Above) — Across Grades 3-8



Smarter Balanced Mathematics

Academic Growth



Next Generation Science Standards Assessment *Achievement Overview 24-25*



	District Average	State Average
% Level 3 or 4	69.4%	50%

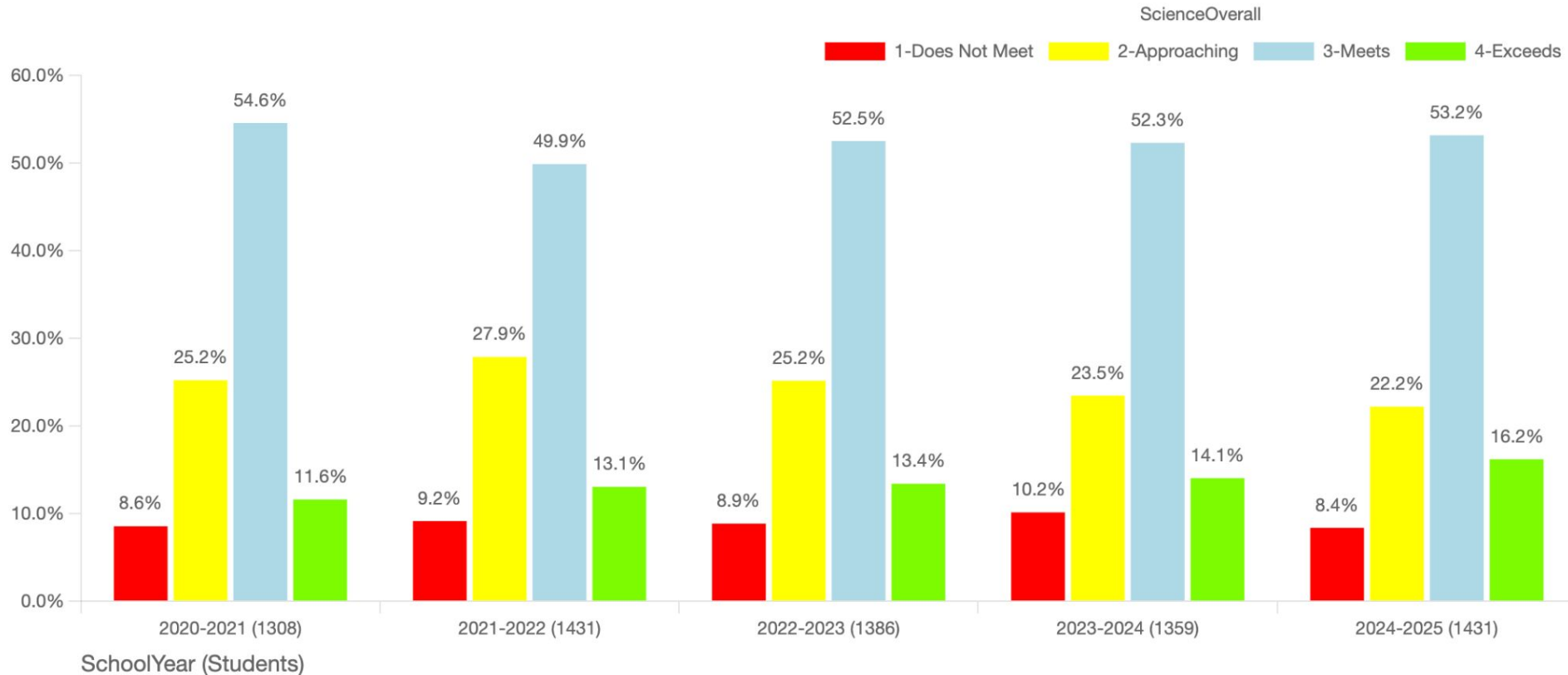
Grade	5	8	11
% Level 3 or 4	66.4%	75.0%	67.2%

NGSS Assessment

Academic Achievement by Level

(Grades 5, 8, 11)

NGSS Science Score Distribution: Science Overall



NGSS Assessment

Academic Achievement by Level

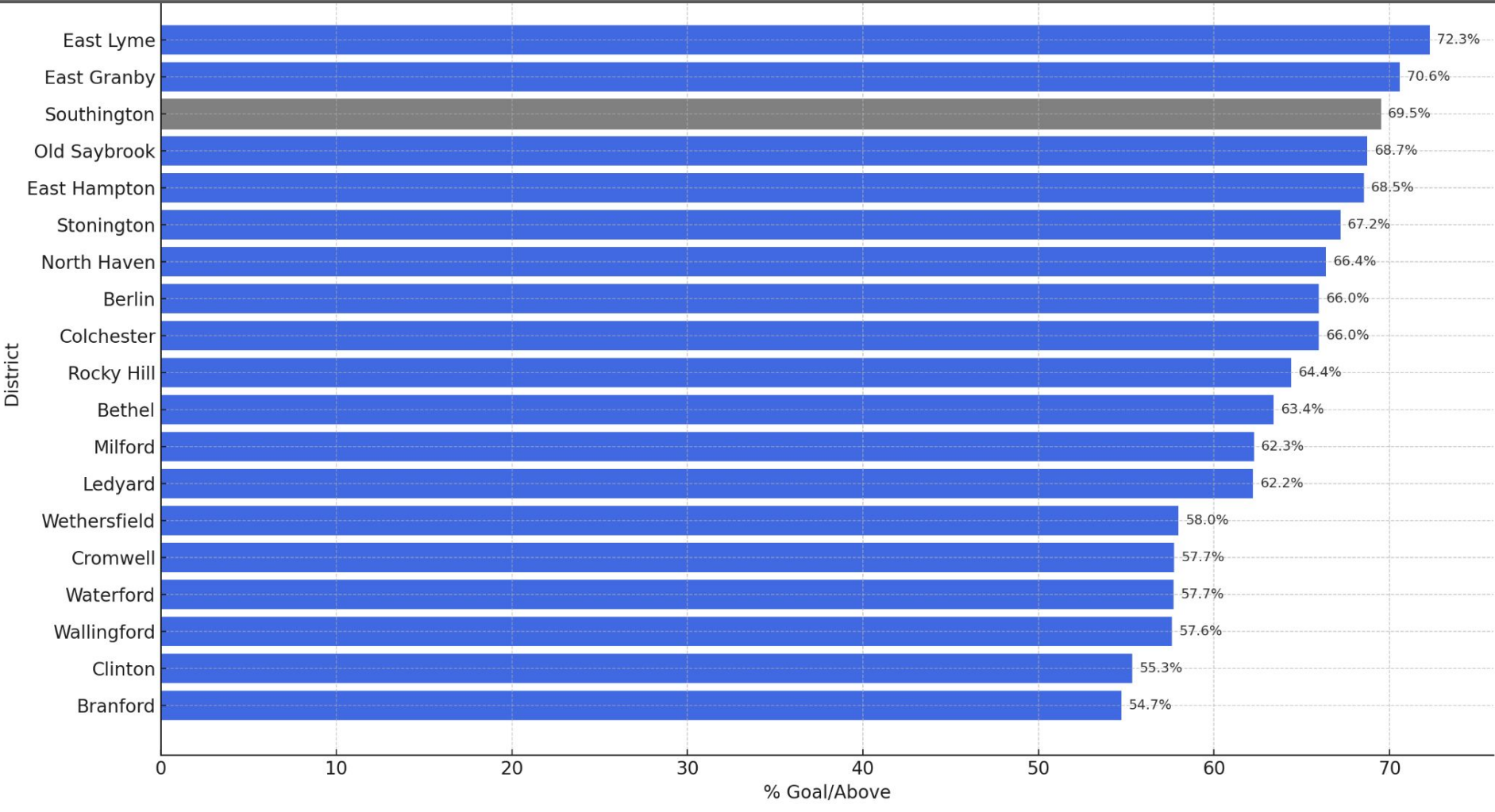
Percents of Students Level 3 or 4

	18-19	21-22	22-23	23-24	24-25
Non-High Needs	73%	74%	77.5%	77%	80.8
High Needs	45%	38%	42.6%	43.1%	48.9%
All Students	65%	63%	65.9%	65.8%	69.4

NGSS (% Goal/Above)

Achievement Comparisons for DRG D

Average 2025 NGSS Scores (% Goal/Above)-Grade 5, 8 and 11 (DRG D)



Continuous Improvement



- ❖ Ensure all students have access to high-quality, grade-level curriculum in all content areas.
 - Maximize instructional minutes.
 - **Monitor and support curriculum implementation.**

- ❖ Provide ongoing and embedded professional learning to support curriculum, instruction and assessment.
 - **Ensure high yield instructional practices are benign utilized across all classrooms.**

- ❖ Implement data driven decision making
 - **Systematic use of interim and district assessments to monitor progress and inform curriculum and instruction.**