

Board of Education Regular Meeting

Thursday, May 7, 2026 7:00 PM

New Fairfield Community Room, 33 Route 37, New Fairfield, CT. In the event of inclement weather, this meeting will change to remote and a virtual link will be provided on our website and distributed. , 3 Brush Hill Road, New Fairfield, CT 06812

I. CALL TO ORDER

II. PLEDGE OF ALLEGIANCE

III. APPROVAL OF THE MINUTES

III.A. April 6, 2026 - Regular

III.B. April 23, 2026 - Special

IV. APPROVAL OF THE AGENDA

V. RECOGNITION ~ CABE STUDENT LEADERSHIP AWARDS

VI. PUBLIC PARTICIPATION - *The Board welcomes public participation. Pursuant to our Board Policy, public participation is limited to no more than three (3) minutes per speaker and a total of no more than thirty (30) minutes total for the entire meeting. Individuals who wish to speak longer are encouraged to attend any and all related subcommittee meetings where most of the board's groundwork is done. We value your input, but due to these time limitations, we ask you to be concise and to observe the rules of common courtesy. [9320(a) of Board Bylaws]*

VII. BOARD AND ADMINISTRATIVE COMMUNICATIONS

VII.A. Chairman's Report

VII.B. Superintendent's Report

VII.C. Student Representatives' Report

VII.D. Committee Reports

VII.D.1. Business Operations/Resource Management (*Greg Flanagan*)

VII.D.2. Curriculum (*Amy Johnson*)

VII.E. Liaison Reports

VII.E.1. Board of Finance (*Ed Sbordone*)

VIII. INFORMATION ITEMS

VIII.A. New Fairfield High School/Consolidated School Building Project Update

VIII.B. New Fairfield Middle School Facilities Survey of
Conditions

VIII.C. FY27 Budget Update

IX. ACTION ITEMS

IX.A. Personnel Report

IX.B. Board of Education Policy

IX.B.1. Policy 5141.21 Administering Medication

IX.C. Global Leadership Summit Student International
Trip Proposal

X. PUBLIC PARTICIPATION - *The Board welcomes public participation. Pursuant to our Board Policy, public participation is limited to no more than three (3) minutes per speaker and a total of no more than thirty (30) minutes total for the entire meeting. Individuals who wish to speak longer are encouraged to attend any and all related subcommittee meetings where most of the board's groundwork is done. We value your input, but due to these time limitations, we ask you to be concise and to observe the rules of common courtesy. [9320(a) of Board Bylaws]*

XI. FUTURE AGENDA ITEMS

XII. BOARD MEMBER COMMENTS

XIII. ADJOURNMENT

NEW FAIRFIELD BOARD OF EDUCATION NEW FAIRFIELD, CT

The New Fairfield Board of Education held a regular meeting on Monday, April 6, 2026, at 7:00 p.m. in the New Fairfield Community Room, 33 Route 37, New Fairfield, CT.

MINUTES – April 6, 2026

PRESENT: Dominic Cipollone (Chairman), Kathy Baker, Greg Flanagan, Sue Huwer, Peggy Katkocin, Kimberly LaTourette, Samantha Mannion, and Ed Sbordone

ABSENT: Amy Johnson

ALSO PRESENT: Superintendent of Schools Dr. Kenneth Craw, Assistant Superintendent of Curriculum and Instruction Dr. Kristine Woleck, High School Principal James D’Amico, Middle School Principal Karen Gruetzner, Elementary School Principal Allyson Story, Elementary School Assistant Principal Jennifer Hilderbrand, Elementary School Assistant Principal Alyce Misuraca, Elementary School Assistant Principal Rob Spino, Director of Business and Operations Carrie DePuy, and BOF member Rick Regan

I. CALL TO ORDER: Chairman Dominic Cipollone called the meeting to order at 7:01p.m.

II. PLEDGE OF ALLEGIANCE

III. APPROVAL OF MINUTES

A. March 5, 2026 - Regular meeting - Approved by consensus.

IV. APPROVAL OF AGENDA - Approved by consensus.

V. PUBLIC PARTICIPATION - None

VI. BOARD AND ADMINISTRATIVE COMMUNICATIONS

A. Chairman’s Report - Dominic Cipollone noted that next week is Spring Break. He encouraged both students and staff to finish the year strong.

B. Superintendent’s Report - Dr. Kenneth Craw spoke of the many joyous events held recently in the district including Band Jam, Spring Musical, and Festival of Cultures. He wished everyone a wonderful Spring Break.

C. Student Representative Report

Senior Representative Ella Skogstrom spoke of the following:

- The Spring Musical and the Festival of Cultures were very successful.
- The top decile for Seniors was announced.
- SEE Projects will be in May and June.
- National College Decision Day is May 1st.
- Senior Prom will be held on May 16th.
- Rebels for Community sponsored an assembly today.
- The High School Band will go to Disney World from April 9th to April 13th.
- Spring Break will be held the week of April 13th.
- There is no school on Monday, May 25th for Memorial Day.

Junior Representative Hailey Lafaro spoke of the following:

- Spoke of the Rebels for Community assembly.
- Junior Prom will be held on May 2nd.
- NGSS testing was completed recently.

D. Committee Reports

1. Business Operations/Resource Management - Greg Flanagan noted that this subcommittee met on March 19th and discussed the monthly budgets. There is a deficit in Special Education and a freeze on Business Machines expenses. The first portion of the Excess Cost Grant was received. The next subcommittee meeting will be held on April 22nd at 6 p.m.

2. Curriculum - Kathy Baker noted that his subcommittee met on March 23rd and spoke of the waiver for Kindergarten for students that don't meet the age requirement. This will no longer be an option for children entering Kindergarten in the 2027-2028 school year. The subcommittee also discussed the Math curriculum.

3. Policy - Samantha Mannion noted that this subcommittee met on March 25th. They discussed the Kindergarten age waiver and Policy 5141.21.

4. Special Education - Kimberly LaTourette noted that this subcommittee met on April 6th and received an update on the Bridge Program and the STRIDES Program.

E. Liaison Reports

1. Board of Finance - Ed Sbordone noted that the BOF met four times since the last BOE meeting: March 7th - BOE/BOS Public Hearing - Chairman Dominic Cipollone and Superintendent of Schools Dr. Ken Crow presented the BOE budget to the BOF. Carrie DePuy spoke of needed capital projects especially at the Middle School. The BOS also presented their budget to the BOF.

March 11th

- The BOF voted to recommend to a Town Meeting the transfer of \$205,700 from the fiscal year 2024-2025 Unassigned General Fund Balance to the Medical Fund.
- The BOF discussed the cost of software and technology.
- The BOF discussed transportation.
- Discussed the enrollment and staffing and how it affects the budget.
- Capital projects, especially at the Middle School.

March 18th

- The BOF focused mostly on the BOS budget at this meeting.
- Discussed interest revenue and investments.
- Discussed salaries for Elected Officials.

March 25th

- Spoke of revenue for Sherman tuition.
- Approved an invoice for additional work from the auditors.
- Discussed medical claims and the amount to budget for next year's budget.
- Discussed the taxable Grand List and non-tax revenue.
- Vote on salaries for Elected Officials
- The BOF asked the BOE to cut \$150,000 from their budget and the BOS to cut \$80,000 from their budget.

The final mark up for the budget will be held on Wednesday, April 8th at the Community Room. BOE members were encouraged to attend.

2. Parks and Recreation - Greg Flanagan noted that the Parks and Rec Commission met on March 9th. The following events are planned:

- May 16th - Sip and Stroll
- Summer Concert Series: (Two will be held at the Gazebo and two at the Town Beach)
 - June 18th (rain date June 25th) - On the Road Again - Gazebo
 - July 10th (rain date July 11th) - Boat Parade at the Beach

- July 23rd (rain date July 30th) – Gazebo
- August 6th (rain date Aug 13th) - Beach
- New Fairfield Day - September 26th (rain date September 27th)
- Tricks and Treats Fest (date in October to be determined)
- Run for the Turkeys 5K - November 22nd
- Santa’s Workshop, Holiday Parade, and Tree Lighting - November 28th (rain date November 29th)

VII. INFORMATION ITEMS

A. New Fairfield High School/Consolidated School Building Project Update

Carrie DePuy noted that the Bus Lot location was approved by the Zoning Commission. There is no update on the propane issue at the High School.

B. New Fairfield Elementary School Leadership Structure and Support

Dr. Craw spoke of a change in structure and support for the Elementary School. He noted that New Fairfield Elementary School is one of the largest elementary schools in the state. He spoke of the current leadership structure of one principal and three assistant principals and spoke of advantages of changing the structure to having one lower house principal (PreK-2) and one upper house principal (3-5) with each having an assistant principal. He spoke of the future of the Elementary School and how this structure will affect development and learning. Beginning July 1, 2026, Allyson Story will be the Lower House Principal with Rob Spino as Assistant Principal and Jennifer Hilderbrand will be Upper House Principal with Alyce Misuraca as Assistant Principal. There was a brief discussion of this change by members of the BOE.

C. Fiscal Year 2026-2027 Budget

Dr. Craw spoke of a recommendation from the BOF to cut \$150,000 from the fiscal year 2026-2027 budget. He spoke of the guiding principles for cutting the budget. Suggested cuts would be \$80,000 from the Operating budget and \$70,000 from the Capital budget. There was a discussion of the risk of cutting the budget, especially the Special Education contingency. It was noted that the majority of the BOE members were against the \$150,000 worth of cuts.

D. Board of Education Policy (First Reading)

1. Policy 5141.21- Administering Medication

VIII. ACTION ITEMS

A. Personnel Report

MOTION: Kathy Baker made a motion to recommend to the full Board the approval of the Personnel Report for March 30, 2026, as recommended by the administration. Greg Flanagan seconded the motion.
IN FAVOR: Kathy Baker, Dominic Cipollone, Greg Flanagan, Sue Huwer, Peggy Katkocin, Kimberly LaTourette, Samantha Mannion, and Ed Sbordone

B. Non-Renewal of Long-Term Certified Substitute Educators

MOTION: Ed Sbordone made a motion to recommend to the full Board approval of the non-renewal of long-term certified substitute educators as presented. Kimberly LaTourette seconded the motion.
IN FAVOR: Kathy Baker, Dominic Cipollone, Greg Flanagan, Sue Huwer, Peggy Katkocin, Kimberly LaTourette, Samantha Mannion, and Ed Sbordone

C. Healthy Food Certification

MOTION: Kathy Baker made a motion that Pursuant to C.G.S. Section 10-215f, the New Fairfield Board of Education certifies that all food items offered for sale to students in the schools under its jurisdiction, and not exempted from the Connecticut Nutrition Standards published by the Connecticut State Department of Education, will comply with the Connecticut Nutrition Standards during the period of July 1, 2026, through

June 30, 2027. This certification shall include all food offered for sale to students separately from reimbursable meals at all times and from all sources, including but not limited to school stores, vending machines, school cafeterias, culinary programs, and any fundraising activities on school premises sponsored by the school or non-school organizations and groups. Kimberly LaTourette seconded the motion. **IN FAVOR:** Kathy Baker, Dominic Cipollone, Greg Flanagan, Sue Huwer, Peggy Katkocin, Kimberly LaTourette, Samantha Mannion, and Ed Sbordone

MOTION: Kathy Baker made a motion that the New Fairfield Board of Education will allow the sale to students of food items that do not meet the Connecticut Nutrition Standards and beverages not listed in Section 10-221q of the Connecticut General Statutes provided that the following conditions are met: 1) the sale is in connection with an event occurring after the end of the regular school day or on the weekend; 2) the sale is at the location of the event; and 3) the food and beverage items are not sold from a vending machine or school store. An "event" is an occurrence that involves more than just a regularly scheduled practice, meeting, or extracurricular activity. For example, soccer games, school plays, and interscholastic debates are events but soccer practices, play rehearsals, and debate team meetings are not. The "regular school day" is the period from midnight before to 30 minutes after the end of the official school day. "Location" means where the event is being held and must be the same place as the food and beverage sales. Samantha Mannion seconded the motion. **IN FAVOR:** Kathy Baker, Dominic Cipollone, Greg Flanagan, Sue Huwer, Peggy Katkocin, Kimberly LaTourette, Samantha Mannion, and Ed Sbordone

D. Acceptance of Donation

1. Nicole Vengalli Foundation c/o New Fairfield High School PTO

MOTION: Kimberly LaTourette made a motion to recommend to the full Board to accept with gratitude the Nicole Vengalli Foundation c/o New Fairfield High School PTO donation of \$1,500 to be put towards the purchase of patio furniture. Kathy Baker seconded the motion. **IN FAVOR:** Kathy Baker, Dominic Cipollone, Greg Flanagan, Sue Huwer, Peggy Katkocin, Kimberly LaTourette, Samantha Mannion, and Ed Sbordone

IX. PUBLIC PARTICIPATION

New Fairfield Elementary School Teacher Michelle Brown spoke in favor of the budget and noted that the teachers will come out and support the budget for the final markup.

X. FUTURE AGENDA ITEMS - None

XI. BOARD MEMBER COMMENTS

Greg Flanagan spoke of the great Spring Musical "The Addams Family".
Dominic Cipollone thanked everyone for a great discussion regarding the budget.

XII. ADJOURNMENT

MOTION: Dominic Cipollone made a motion to adjourn the meeting at 7:58 p.m. Greg Flanagan seconded the motion. **IN FAVOR:** Kathy Baker, Dominic Cipollone, Greg Flanagan, Sue Huwer, Peggy Katkocin, Kimberly LaTourette, Samantha Mannion, and Ed Sbordone

Respectfully submitted,
Suzanne Kloos

**NEW FAIRFIELD BOARD OF EDUCATION
NEW FAIRFIELD, CT**

The New Fairfield Board of Education held a special meeting on Thursday, April 23, 2026, at 7:00 pm via zoom.

MINUTES – April 23, 2026

PRESENT: Dominic Cipollone (Chairman), Kathy Baker, Greg Flanagan, Sue Huwer, Amy Johnson, Peggy Katkocin, Kimberly LaTourette, and Ed Sbordone

ABSENT: Samantha Mannion

ALSO PRESENT: Superintendent of Schools Dr. Kenneth Craw, Assistant Superintendent of Curriculum and Instruction Kristine Woleck, Director of Pupil Personnel Services Monika Krepsztul, Director of Business and Operations Carrie DePuy, and BOF member Rick Regan

I. CALL TO ORDER: Chairman Dominic Cipollone called the meeting to order at 7:00 p.m.

II. PLEDGE OF ALLEGIANCE

III. ACTION ITEM

A. Request for Supplemental Appropriation for Special Education Expenditures Necessary to Balance the Budget of the New Fairfield Board of Education for Fiscal Year 2026

Superintendent of Schools Dr. Kenneth Craw spoke of a shortfall of \$455,678 for Special Education tuition and transportation for this fiscal year and the need to submit a supplemental appropriation. He noted that these costs are driven by unanticipated special education costs which were unforeseen during the budget process. It was noted that there has been a 50% increase of students requiring outplacement. These costs are legally mandated.

Dr. Craw spoke of the strategies that the district used to address the shortfall and the process for the supplemental appropriation. There was a discussion among the members of the Board of Education regarding the process and the multiple reasons for outplacement of students.

MOTION: Ed Sbordone made a motion that in accordance with Section 10-222 of the Connecticut General Statutes, the New Fairfield Board of Education requests a supplemental appropriation from the appropriating authority for the Town of New Fairfield in an amount not to exceed \$455,678.00 for fiscal year 2026; and FURTHER MOVE, that the Board Chairperson be authorized to submit such request to the Board of Selectmen and the Board of Finance on behalf of the Board. Kim LaTourette seconded the motion. **IN FAVOR:** Dominic Cipollone, Kathy Baker, Greg Flanagan, Sue Huwer, Amy Johnson, Peggy Katkocin, Kimberly LaTourette, and Ed Sbordone

VI. ADJOURNMENT

MOTION: Dominic Cipollone made a motion to adjourn the meeting at 7:28 p.m. Greg Flanagan seconded the motion. **IN FAVOR:** Dominic Cipollone, Kathy Baker, Greg Flanagan, Sue Huwer, Amy Johnson, Peggy Katkocin, Kimberly LaTourette, and Ed Sbordone

Respectfully submitted,
Suzanne Kloos

**Request For Qualifications From An Architectural Firm
(Preferred Full Service) To Prepare A Survey Of The New
Fairfield Middle School Building Conditions**

**RE: NEW FAIRFIELD PUBLIC SCHOOLS REQUEST FOR
QUALIFICATIONS FROM AN ARCHITECTURAL FIRM (PREFERRED FULL
SERVICE) ARCHITECTURAL FIRM TO PREPARE A SURVEY OF THE NEW
FAIRFIELD MIDDLE SCHOOL BUILDING CONDITIONS.**

The New Fairfield Public Schools invites your firm to submit qualifications for services to complete a survey of the New Fairfield Middle School located at 56 Gillotti Road, New Fairfield, CT 06812.

Attached is a Request for Qualification (R.F.Q.), which contains the project information, anticipated scope of work, services required and an outline for submitting qualifications.

Interested firms must submit one (1) original and *ten (10)* copies of their qualifications, in a sealed envelope marked “Qualifications for Architectural Firm (Preferred Full Service) to Survey the New Fairfield Middle School Building Conditions,” no later than **May XX, 2026** at 1:00 p.m.

Qualifications should be sent to:

**Patty Mota
Purchasing Agent/ Contracts Administrator
3 Brush Hill Rd.
New Fairfield, CT 06812**

The selection process will include a qualification evaluation based upon the criteria outlined in the attached R.F.Q.

We look forward to receiving a qualification from your firm and should you have further questions, I can be contacted at (203) 312-5653.

Sincerely,

Patty Mota
Purchasing Agent/Contract Administrator

Request For Qualifications From An Architectural Firm (Preferred Full Service) To Prepare A Survey Of The New Fairfield Middle School Building Conditions

INTRODUCTION

The New Fairfield Public School District invites qualified firms to submit responses for professional services related to preparing a complete survey of conditions of the New Fairfield Public Schools Middle School building.

The minimum qualifications required to perform this assignment are as follows:

1. Responding firms must have a minimum of five years of experience providing complete building survey services, as described in this RFQ, for facilities such as the New Fairfield Middle School building.
2. Firm's prior experience as a Full Service (Preferred) Architect for school districts must include references from a minimum of five school districts where surveys of all the district's buildings were surveyed. Surveys have been completed for school districts similar in size and configuration to that of New Fairfield Public School District.
3. The district is anticipating working with a single firm to provide all services listed in the Scope of Services Section below. Therefore, preference will be given to firms that can provide all services required with in-house staff.
4. Selected firm must be able to provide all work products/deliverables, at the conclusion of this study, including all updated computerized building plans, in electronic format for the district's use and public presentation.
5. Responding firms must be able to demonstrate their ability by producing sample documents from completed projects of this nature.

ANTICIPATED SCOPE OF SERVICES

A. Facilities Evaluations

An analysis of the facility will be required in order to evaluate its current physical condition. Attached to this RFQ is information pertaining to square footage of the existing building, site acreage, age and enrollment. The following tasks shall be performed under the Facilities Evaluation:

1. Meet with the Director of Building & Grounds. Compile information received pertaining to issues relating to the preservation of the facility.

**Request For Qualifications From An Architectural Firm
(Preferred Full Service) To Prepare A Survey Of The New
Fairfield Middle School Building Conditions**

2. Evaluate the existing construction, structural and mechanical/electrical systems with an analysis of such problems that might exist in the buildings that will require long or short-term attention.
3. Evaluate all major building systems and rate them based on overall integrity, probable useful life and need of replacement. Recommend appropriate repair/remodeling/replacement required.
4. Develop capital budgets for each recommendation. Prepare budgets in reports in a manner showing priorities and potential phasing.
5. Provide draft reports for review by administration. Provide a final Five-Year Capital Plan report and Building System Rating Report. The format for the Five-Year Capital Plan must include the following: areas of work, project description, resources to accomplish work, schedule for project and cost of project.

5A. Renovate as new?? Leads to ed specs

6. Building survey to be provided in both printed and electronic format that is user friendly for ease of use by the district. (Examples of reports and type of software that the firm has used should be included in qualification responses). System categories to be analyzed are as follows:

Electrical

Power Capacity	Lighting Levels
Panels and Switchgear (conditions)	Fire Alarm
Emergency Lights and Exit Signs	Exterior Lighting
Interim, PA, Clock System	

HVAC

Boilers/Furnaces	Rooftop HVAC Units
Air Handling Units	Exhaust Fans
Unit Ventilators	Pumps
Generator	Tanks
Piping	Controls

Plumbing

Piping	Hot Water Heaters
Toilet Room Fixtures	Circulating Pumps

Architectural Scope

Roofing and Flashing*
Masonry Mortar and Sealant

**Request For Qualifications From An Architectural Firm
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Fairfield Middle School Building Conditions**

The following material is requested to be received by **May XX, 2026** at 1:00 p.m. for the proposing firm to be considered:

RFQ Format

The following RFQ format is requested:

Technical Qualifications-

Section I: Company Profile

1. Provide your proposed methodology for this project.
2. Describe in detail your management plan by explaining how your firm is structured for design, production and construction support services.
3. Provide a project organization chart.
4. Describe the services, which your firm typically provides in projects of this nature and scope.
5. List the personnel who will be assigned to this project, their resumes and related similar types of project experience.
6. Provide the names and resumes of any proposed consultants and their related experience.
7. Describe any litigation that your firm has been involved in with school building projects during the past five years, including any currently pending actions.

Section II: Experience

The RFQ should include details of experience with Facility analysis for schools as detailed earlier in this RFQ.

1. Describe five to ten projects carried out by your firm, which are directly relevant to the School District's proposed capital project. Projects must include programs that required a hybrid of new construction and renovations. Include the following information:
 - a. Project name and location.
 - b. Type of project, address and telephone number of a contact person.
 - c. Original cost of each project and final construction cost.
 - d. Original project scheduled and final completion date.
1. Describe your experience with State Department of Education, Plan Review Unit.

**Request For Qualifications From An Architectural Firm
(Preferred Full Service) To Prepare A Survey Of The New
Fairfield Middle School Building Conditions**

2. Describe your computer capabilities.
3. Describe your documentation normally provided.
4. Describe your current workload and availability to meet the district's timetable.

The RFQ should include details of experience with Facility analysis for schools as detailed earlier in this RFQ.

Section III: References

Provide a list of a minimum of 5 references that may be contacted should be included. This list should include past and present clients for whom the Firm has provided a Survey of all school buildings in their district as outlined in experience above.

Section IV: Specific Approach and Sample reports

Please provide details regarding your approach to completing a Facility Survey. Include sample reports of Building System Rating Reports, Computer Aided Facility Management System. Indicate the software that you intend to use. Include a management plan with qualifications of the staff you propose for this project along with resumes of the essential personnel who would be assigned to this project.

Provide hourly rates for each level of personnel within your firm as a basis for costing additional services, which may be required. Include mark-ups, if any, for those personnel.

Provide accuracy rates related to enrollments and demographic information in other towns the same size of New Fairfield.

Section V: Other Information

Include in this section any additional information you wish to provide to the district, relevant to your qualifications.

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Section VI: Insurance

Include an Insurance Certificate in this section to verify that your firm will be able to provide the following limits of liability for insurance during the project:

- A. Worker's Compensation (Statutory Limits)
 - 1. State: CT
 - 2. Applicable Federal Requirements
 - 3. Employer's Liability: \$100,000

- B. Comprehensive General Liability: (including Premises-Operation, Contractor's Protection, Products and Completed Operations, Broad Form Property Damage):
 - 1. Bodily Injury:
 - \$1,000,000 Each Occurrence
 - \$2,000,000 Annual Aggregate, Products and Completed Operations

 - 2. Property Damage:
 - \$1,000,000 Each Occurrence
 - \$2,000,000 Annual Aggregate

 - 3. Personal Injury:
 - \$1,000,000 Each Occurrence
 - \$2,000,000 Aggregate

- C. Comprehensive Automobile Liability:
 - 1. Bodily Injury:
 - \$1,000,000 Each Occurrence

 - 2. Property Damage:
 - \$1,000,000 Each Occurrence

- C. Umbrella Policy with limit of liability of \$5,000,000 as a minimum.

- D. E & O insurance with limits of \$2,000,000 per claim/3,000,000 aggregate

**Request For Qualifications From An Architectural Firm
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The firm elected shall provide the School District with certificates of insurance verifying the existence of the above reference policies and limits. Said certificate shall specifically state that the School District, its officers, employees and assigns shall be named as additional insured parties, except Errors and Omissions policy.

TERMS AND CONDITIONS

1. The District is not liable for costs incurred in the preparation of response to this RFQ.
2. The New Fairfield Public School District reserves the right to reject any and all responses to this RFQ and to waive any informality in the submittals.
3. The successful Firm shall not discriminate against any individual in accordance with applicable federal, state or local laws.

SUBMISSION OF QUESTIONS:

Questions relating to this request for RFQ must be submitted in writing to the following address:

New Fairfield Board of Education
Patty Mota
Purchasing Agent/ Contracts Administrator
3 Brush Hill Rd.
New Fairfield, CT 06812

**Request For Qualifications From An Architectural Firm
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Fairfield Middle School Building Conditions**

Attachments:

School to be analyzed, including square footage of existing buildings, acreage and age:

Facility	Location	Construction	Square Footage	Acreage	Construction Date	Enrollment (Projected)
Middle School	56 Gillotti Road	Concrete	94,000	76.70	1994	744
Remaining portion of High School	56 Gillotti Road	Concrete	25,000		1972	

**Request For Qualifications From An Architectural Firm
(Preferred Full Service) To Prepare A Survey Of The New
Fairfield Middle School Building Conditions**

EVALUATION OF QUALIFICATIONS

The Board of Education will evaluate the responses based upon the information supplied. Criteria for evaluations will include:

Previous experience of firm and consultants with similar projects. Particular attention will be paid to previous work involving educational facilities, awards or commendations, cost effective performance, and demonstrated ability.

1. Level of client satisfaction determined from supplied references.
2. Experience and qualifications of the professional staff expected to be assigned to this project.
3. Capability of the firm and consultants to progress and complete the work, taking into consideration size of work force, current workload, in-house staff capabilities, CAD capability and the like.
4. Proposed methodology and demonstrated understanding of the project requirements and Board of Education needs, including the need for a team effort with the administration, the Board of Education and other construction professionals.

From the qualifications received, the Board of Education will select a short list. The short list of firms will be requested to provide an interview with the Board of Education and/or Town personnel. Each consultant used by the firm is to have representation at the interviews.

The undersigned acknowledges that there will be no cost to the School District pertaining to the submission of this Qualification and the School District has the right to reject any and all qualifications which, in its opinion, will not promote the best interests of the school district. (The best interest of the School District will thereby be promoted.)

Name of Firm

Name of Firm's Representative

Students

Administering Medication

The purpose of this policy is for the Board of Education (Board) to determine who shall administer medications in a school and the circumstances under which self-administration of medication by students shall be permitted.

The Board of Education allows students to self-administer medication and school personnel to administer medication to students in accordance with the established procedures, and applicable state regulations, sections [10-212a-1](#) through [10-212a-10](#) inclusive. In order to provide immunity afforded to school personnel who administer medication, the Board of Education, with the advice and approval of the School Medical Advisor and the school nurse supervisor, shall review and/or revise this policy and regulation biennially concerning the administration of medications to District students by a nurse, or in the absence of a nurse, by qualified personnel for schools. The District's School Medical Advisor (or other qualified physician) shall approve this policy, its regulations and any changes prior to adoption by the Board.

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

Before- and after-school program means any child care program operated and administered by a local or regional Board of Education or municipality exempt from licensure by the Department of Public Health. Such programs shall not include public or private entities licensed by the Department of Public Health or Board of Education enhancement programs and extra-curricular activities.

Board of Education means a local or regional Board of Education, a regional educational service center, a unified school district, the regional vocational-technical school system, an approved private special education facility, the Gilbert School, the Norwich Free Academy, Woodstock Academy or a non-public school whose students receive services pursuant to Section [10-217a](#) of the Connecticut General Statutes.

Carrier means any school district, educational institution, or person, firm or corporation under contract to such district or institution engaged in the business of transporting students. (C.G.S. [14-212 \(2\)](#)).

Students

Administering Medication

Definitions (continued)

~~**Cartridge injector** means an automatic pre-filled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reaction.~~

Controlled drugs means those drugs as defined in Connecticut General Statutes Section [21a-240](#).

Cumulative health record means the cumulative health record of a student mandated by Connecticut General Statutes Section [10-206](#).

Director means the person responsible for the operation and administration of any school readiness program or before- and after-school program.

Epinephrine means an automatic pre-filled cartridge injector or similar automatic injectable equipment, a nasal spray, or any other medical equipment approved by the United States Food and Drug Administration that is used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

Equipment used to administer glucagon means an injector or injectable equipment nasal spray, or other medical equipment approved by the United States Food and Drug Administration that is used to deliver glucagon in an appropriate dose for emergency first aid response to diabetes.

Error means:

- (1) the failure to do any of the following as ordered:
 - (a) administer a medication to a student;
 - (b) administer medication within one hour of 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; and/or
 - (f) administer the medication according to generally accepted standards of practice;or
- (2) the administration of medication to a student which is not ordered by an authorized prescriber, or which is not authorized in writing by the parent or guardian of such student.

Co-curricular activities means activities sponsored by local or regional Boards of Education that occur outside of the school day, are not part of the educational program, and do not meet the definition of before- and after-school programs and school readiness programs.

Students

Administering Medication

Definitions (continued)

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 which 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.

Medication means any medicinal preparation including over-the-counter, prescription and controlled drugs, as defined in Connecticut General Statutes Section [21a-240](#). This definition includes Aspirin, Ibuprofen or Aspirin substitutes containing Acetaminophen.

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 written direction by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the Brand 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. A 30-day grace period may be granted at the school nurse's discretion.

Nurse means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut in accordance with Chapter 378 of the Connecticut General Statutes.

Occupational therapist means an occupational therapist employed full time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376 of the Connecticut General Statutes.

Students

Administering Medication

Definitions (continued)

Paraprofessional means a health care aide or assistant or an instructional aide or assistant employed by the local or regional Board of Education who meets the requirements of such 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 local or regional Board of Education 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 Chapters 370 and 371 of the Connecticut General Statutes, or licensed to practice medicine in another state.

Principal means the administrator in the school.

Qualified personnel for schools means (a) a full-time employee who meets the local or regional Board of Education requirements as a principal, teacher, occupational therapist or physical therapist and has been trained in the administration of medication in accordance with Section [10-212a-3](#) of the State regulations; (b) a coach and licensed athletic trainer who has been trained in the administration of medication pursuant to Section [10-212a-8](#) of the State regulations; or (c) a paraprofessional who has been trained in the administration of medication pursuant to Section [10-212a-9](#) of the State regulations. For school readiness programs and before- and after-school programs, Directors or Director's designee, lead teachers and school administrators who have been trained in the administration of medication may administer medications pursuant to Section [10-212a-10](#) of the State regulations.

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 Connecticut General Statutes Section [10-212](#).

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

School bus driver means any person who holds a commercial driver's license with a public passenger endorsement to operate a school bus pursuant to subsection (a) of C.G.S. [14-44](#).

Students

Administering Medication

Definitions (continued)

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 Department of Public Health 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 a Board of Education who has met the minimum standards as established by that 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.

General Policies on Administration of Medication

A child with diabetes may test his/her own blood glucose level per the written order of a physician stating the need and the capacity of such child to conduct self-testing, along with written authorization of the parent/guardian. Such self-testing shall be pursuant to guidelines promulgated by the Commissioner of Education. The time or place where a student with diabetes may test his/her blood-glucose level on school grounds shall not be restricted provided the student has written parental/guardian permission and a written order from a physician licensed in Connecticut.

The school nurse or school principal shall select a qualified school employee to, under certain conditions, **administer glucagon injection** to a student with diabetes who may require prompt treatment to protect him/her from serious harm or death. The nurse or principal must have the written authority from the student's parent/guardian and a written order from the student's Connecticut-licensed physician. The authorization shall be limited to situations when the school nurse is absent or unavailable. No qualified school employee shall administer this medication unless he/she has annually completed any training required by the school nurse and school medical advisor in the administration of medication with ~~injectable~~ equipment used to administer glucagon. The school nurse and school medical advisor must attest that the qualified school employee has completed such training and the qualified school employee voluntarily agrees to serve as a qualified school employee. The ~~injections~~ **glucagon is** to be given through ~~an injector or injectable~~ equipment used to deliver an appropriate dose of glucagon as emergency first aid response to diabetes.

A child diagnosed with asthma or an allergic condition, pursuant to State Board of Education regulations, may possess, self-administer or possess and self-administer medicine administered through the use of an asthmatic inhaler or ~~an EpiPen or similar device~~ **epinephrine** in the school at all times or while receiving school transportation services if he/she is under the care of a physician, physician assistant, or advanced practice registered nurse (APRN) and such

Students

Administering Medication

General Policies on Administration of Medication (continued)

Administration of Medication by Paraprofessionals

practitioner certifies in writing to the Board of Education that the child needs to keep an asthmatic inhaler or ~~Epipen~~ epinephrine at all times to ensure prompt treatment of the child's asthma or allergic condition and protect the child against serious harm or death. A written authorization of the parent/guardian is also required.

A school nurse may administer medication to any student pursuant to the written order of an authorized prescriber (physician, dentist, optometrist, an advanced practice registered nurse, or a physician assistant and for interscholastic and intramural athletic events only, a podiatrist) and the written authorization of a parent or guardian of such child or eligible student and the written permission of the parent/guardian for the exchange of information between the prescriber and the school nurse necessary to ensure the safe administration of such medication.

In the absence of a school nurse, any other nurse licensed pursuant to the provisions of Chapter 378, including a nurse employed by, or providing services under the direction of the Board of Education at a school-based clinic, only qualified personnel for schools who have been properly trained may administer medications to students as delegated by the school nurse upon approval of the School Medical Advisor and the school nurse may administer medication to any student in the school following the successful completion of specific training in administration of medication and satisfactory completion of the required criminal history check.

Medications with a ~~cartridge injector~~ epinephrine may be administered by qualified personnel for schools only to a student presenting with an allergic condition which may require prompt treatment to protect the student against serious harm or death. Qualified personnel for schools, as defined, may administer oral, topical, intranasal, inhalant or cartridge injector medication in the absence of a licensed nurse. Investigational drugs or research or study medications may not be administered by qualified personnel for schools.

Coaches and licensed athletic trainers during intramural and interscholastic events may administer medications pursuant to Section [10-212a-9](#) of the Regulations of Connecticut State Agencies and as described in this policy and in the administrative regulations to this policy.

In compliance with all applicable state statutes and regulations, parents/guardians may administer medications to their own children on school grounds.

Administration of Medication by Paraprofessionals

A specific paraprofessional, through a plan approved by a school nurse supervisor and School Medical Advisor, may administer medications including ~~medications administered with a cartridge injector~~ epinephrine, to a specific student with a medically diagnosed allergic condition that may require prompt treatment in order to protect the student against serious harm or death pursuant to Section [10-212a-9](#) of the Regulations of Connecticut State Agencies and as described in the administrative regulations. The approved plan also requires the written authorization of

Students

Administering Medication

Administration of Medication by Paraprofessionals

the student's parent/guardian and pursuant to the written order from the student's authorized prescriber licensed to prescribe medication.

Administration of Medications in School Readiness Programs and Before- and After-School Programs

Directors, or their designees, who may include 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, in school readiness programs and before- and after-school programs that are child care programs. Such programs must either be District-administered or administered by a municipality exempt from licensure by the Department of Public Health and are located in a District public school. Medicine may be administered pursuant to the Regulations of Connecticut State Agencies, Section [10-212a-10](#), to children enrolled in these programs.

Administration of medications shall be provided only when it is medically necessary for program participants to access the program and maintain their health status while attending the program. A child attending any before- or after-school program, defined as any child care program operated and administered by the Board in any building or on the grounds of any district school, upon the request and with the written authorization of the child's parent/guardian and pursuant to the written order from the student's authorized prescriber, will be supervised by the District staff member (Director or designee, lead teacher, school administrator) trained to administer medication including ~~a cartridge injector~~ epinephrine. Such administration shall be to a particular student medically diagnosed with an allergy that may require prompt treatment to avoid serious harm or death.

Investigational drugs or research or study medications may not be administered by Directors or their designees, lead teachers or school administrators.

Properly trained Directors, Directors' designees, lead teachers or school administrators may administer medications to students as delegated by the school nurse or other registered nurse. They may administer oral, topical, intranasal, or inhalant medications. No medication shall be administered without the written order of an authorized prescriber and the written approval of the parent/guardian.

The selected staff member shall be trained in the use of ~~a cartridge injector~~ epinephrine by either a licensed physician, physician's assistant, advanced practice registered nurse or registered nurse.

The administration shall determine, in cooperation with the School Medical Advisor and school nurse supervisor whether additional school nursing services/nurses are required based on the needs of the program and the participants in the program. This determination shall include whether a licensed nurse is required on site. The recommendation shall be subject to Board approval.

Students

Administering Medication

Administration of Medications in School Readiness Programs and Before- and After-School Programs (continued)

The Board will allow students in the school readiness and before- and after-school programs to self-administer medication according to the student's individual health plan and only with the written order of an authorized prescriber, written authorization of the child's parent or guardian, written approval of the school nurse (The nurse has evaluated the situation and deemed it appropriate and safe and has developed a plan for general supervision of such self-medication.), and with the written permission of the parent or guardian for the exchange of information between the prescriber and the school nurse necessary to ensure the safe administration of such medication.

An error in the administration of medication shall be reported immediately to the school nurse, the parents/guardians and the prescribing physician. In case of an anaphylactic reaction or the risk of such reaction a school nurse may administer emergency oral, nasal, and/or injectable medication to any child in need thereof on school grounds, or in the school building, according to the standing order of the School Medical Advisor or the child's private physician. However, in an emergency any other person trained in CPR and First Aid may administer emergency oral, nasal, and/or injectable medication to any child in need on school grounds, or in the school building. In addition, local poison control center information shall be readily available at the sites of these programs. The Program Director or his/her designee shall be responsible for decision making in the absence of the nurse.

In the event of a medical emergency, the following will be readily available: (1) local poison information center contact information; (2) the physician, clinic or emergency room to be contacted in such an emergency; and (3) the name of the person responsible for the decision making in the absence of a school nurse.

All medications shall be handled and stored in accordance with the provisions of subsection (a) to (k) inclusive of the Regulations of Connecticut State Agencies, as outlined in the accompanying administrative regulation to this policy.

Where possible, a separate supply of the child's medication shall be stored at the site of the before- or after-school program or school readiness program. If this is not possible, a plan should be in place to ensure the timely transfer of the medication from the school to the program and back on a daily basis.

Documentation and record keeping shall be done in compliance with the stipulations outlined in the administrative regulation accompanying this policy.

THE PORTION OF THIS POLICY PERTAINING TO THE ADMINISTRATION OF MEDICATION IN SCHOOL READINESS PROGRAMS AND BEFORE- AND AFTER-SCHOOL PROGRAMS SHALL BE REVIEWED BY THE BOARD ON AN ANNUAL BASIS WITH INPUT FROM THE SCHOOL MEDICAL ADVISOR OR A LICENSED PHYSICIAN AND THE SCHOOL NURSE SUPERVISOR.

Students

Administering Medication

Administration of Medication by Coaches and Licensed Athletic Trainers During Intramural and Interscholastic Events

During intramural and interscholastic athletic events, a coach or licensed athletic trainer who has been trained in the general principles of medication administration applicable to receiving, storing, and assisting with inhalant medications or cartridge injector medications and documentation, may administer medication for select students for whom self-administration plans are not viable options as determined by the school nurse. The medication which may be administered is limited to: (1) inhalant medications prescribed to treat respiratory conditions and (2) ~~medication administered with a cartridge injector~~ epinephrine for students with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.

The school nurse is responsible for the student's individualized medication plan and shall provide the coach with a copy of the authorized prescriber's order and the parental/guardian permission form. Parents are responsible for providing the medication, such as the inhaler or ~~cartridge injector~~ epinephrine, to the coach or licensed athletic trainer, which shall be kept separate from the medication stored in the school health office during the school day.

Medications to be used in athletic events shall be stored in containers for the exclusive use of holding medications; in locations that preserve the integrity of the medication; under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and in a locked secure cabinet when not in use at athletic events.

The agreement of the coach or licensed athletic trainer is necessary for the administration of emergency medication and the implementation of the emergency care plan.

Coaches and athletic trainers are required to fulfill the documentation requirements as outlined in the administrative regulations accompanying this policy. Errors in the administration of medication shall be addressed as specified in Section [10-212a-6](#) of the Regulations of Connecticut State Agencies, and detailed in the administrative regulation pertaining to this policy. If the school nurse is not available, a report may be submitted by the coach or licensed athletic trainer to the school nurse on the next school day.

Storage and Administration of Epinephrine

Definitions (For purposes of this subsection of this policy)

- ~~Cartridge injector~~ 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.

Students

Administering Medication

Storage and Administration of Epinephrine (continued)

- **Epinephrine** means an automatic pre-filled cartridge injector or similar automatic injectable equipment, a nasal spray, or any other medical equipment approved by the United States Food and Drug Administration that is used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

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

Qualified medical professional means a licensed physician, optometrist, advanced practice registered nurse, or a physician assistant.

Storage and Use of **Epinephrine Cartridge Injectors**

A school nurse or, in the absence of a school nurse, a “qualified school employee” shall maintain epinephrine ~~in cartridge injectors~~ for the purpose of emergency first aid to students who experience allergic reactions, who were not previously known to have serious allergies and therefore do not have a prior written authorization of a parent/guardian or a prior written order of a qualified medical professional for the administration of epinephrine.

Note: ~~Epipens expire yearly. Therefore, schools are responsible for refilling their prescriptions annually. It is estimated that each school would require two to three two-pack epipens.~~ School nurses are responsible for monitoring epinephrine expiration dates and refilling prescriptions in a timely manner to ensure supply is available in the school.

The school nurse or school principal shall select qualified school employees to be trained to administer such epinephrine. There shall be at least one such qualified school employee on the grounds of each District school during regular school hours in the absence of the school nurse. Each school must maintain a store of epipens for such emergency use.

Note: This requirement pertains only during regular school hours and does not include after-school activities.

The school shall fulfill all conditions and procedures promulgated in the regulations established by the State Board of Education for the storage and administration of epinephrine by school personnel to students for the purpose of emergency first aid to students who experience allergic reaction and do not have prior written authorization for epinephrine administration.

The school nurse or, in the absence or unavailability of such school nurse, such qualified school employee may administer epinephrine. A qualified school employee must annually complete the required training program in order to be permitted to administer epinephrine ~~utilizing an epipen.~~

Students

Administering Medication

Storage and Administration of Epinephrine (continued)

Administration of Anti-Epileptic Medications to Students

School Bus Driver Training

The parent/guardian of a student may submit, in writing, to the school nurse and school medical advisor, if any, that epinephrine shall not be administered to his/her child permitted by statute.

The District's School Medical Advisor shall sign off, via his/her standing orders, on this procedure regarding the ~~use of epipens~~ administration of epinephrine by trained qualified school personnel.

Administration of Anti-Epileptic Medications to Students

With the written authorization of a student's parent/guardian, and pursuant to the written order of a physician, a school nurse (and a school medical advisor, if any), shall select and provide general supervision to a qualified school employee, who voluntarily agrees to serve as a qualified school employee, to administer anti-epileptic medication, including by rectal syringe, to a specific student with a medically diagnosed epileptic condition that requires prompt treatment in accordance with the student's individual seizure action plan. Such authorization is limited to situations when the school nurse is absent or unavailable. No qualified school employee shall administer such medication unless he/she annually completes the training program developed by the State Department of Education, in consultation with the School Nurse Advisory Council.

In addition, the school nurse (and school medical advisor, if any), shall attest, in writing, that such qualified school employee has completed the required training. The qualified school employee shall also receive monthly reviews by the school nurse to confirm his/her competency to administer anti-epileptic medication. For purposes of the administration of anti-epileptic medication, a "qualified school employee" means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the District, coach or school paraprofessional.

School Bus Drivers Training

By June 30, 2019, school transportation carriers must provide training to all school bus drivers, including instruction on (1) identifying the signs and symptoms of anaphylaxis, (2) administering epinephrine by a cartridge injector ("EpiPen"), (3) notifying emergency personnel, and (4) reporting an incident involving a student's life-threatening allergic reaction. Such training can be completed online, provided the online module fulfills legislative requirements.

Beginning July 1, 2019, each carrier must provide the training to school bus drivers (1) following the issuance or renewal of a public passenger endorsement to operate a school bus for carrier employees, and (2) upon the hiring of a school bus driver who is not employed by such carrier (e.g., subcontractor), except a driver who received the training after the most recent issuance or renewal of his or her endorsement is not required to repeat it.

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Administering Medication

Opioid Antagonists for Purposes of Emergency First Aid Without Prior Authorization

For purposes of this section, “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.

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.

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.

Administration of Opioid Antagonists

A school nurse shall be approved to administer opioid antagonists for the purpose of emergency first aid, as described 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 developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health.

Students

Administering Medication

Opioid Antagonists for Purposes of Emergency First Aid Without Prior Authorization

Administration of Opioid Antagonists (continued)

The school nurse or school principal shall select principal(s), teacher(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 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 developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health.
- (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.

Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described 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 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/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.

Students

Administering Medication

Administration of Opioid Antagonists (continued)

Following the emergency administration of an opioid antagonist by a school nurse or selected and trained personnel as identified in this policy:

- (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.

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.

In the event that any provisions of this Section conflict with regulations adopted by the Connecticut State Department of Education concerning the use, storage and administration of opioid antagonists in schools, the Department's regulations shall control.

Secure Box Storage of Opioid Antagonists

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,

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Administering Medication

Secure Box Storage of Opioid Antagonists (continued)

(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.

The administration and storage of opioid antagonists pursuant to this policy must be effected in accordance with this policy and procedures regarding the acquisition, maintenance, and administration established by the Superintendent in consultation with the Board's medical advisor.

(cf. 4112.5/[4212.5](#) – Security Check/Fingerprinting)
 (cf. [5141](#) – Student Health Services)
 (cf. 5141.23 – Students with Special Health Care Needs)

Legal Reference: Connecticut General Statutes

[10-206](#) Health Assessment

[10-212](#) School nurses and nurse practitioners. Administration of medications by parents or guardians on school grounds. Criminal history; records check.

[10-212a](#) Administration of medications in schools. (as amended by PA 99-2, and June Special Session and PA 03-211, PA 04-181, PA 07-241, PA 07-252, PA 09-155, PA 12-198, PA 14-176, PA 15-215 and PA 18-185)

[10-212c](#) Life-threatening food allergies and glycogen storage disease: Guidelines; district plans. (as amended by PA 18-185)

[10-220j](#) Blood glucose self-testing by children. Guidelines. (as amended by PA 12-198)

[19a-900](#) Use of cartridge injector by staff member of before- or after-school program, day camp or day care facility.

Students

Administering Medication

Legal Reference (continued)

[21a-240](#) Definitions.

[29-17a](#) Criminal history checks. Procedure. Fees.

[52-557b](#) Immunity from liability for emergency medical assistance first aid or medication by injection. School personnel not required to administer or render. (as amended by PA 05-144, An Act Concerning the Emergency Use of Cartridge Injectors and PA 18-185)

Connecticut Regulations of State Agencies [10-212a-1](#) through [10-212a-10](#), inclusive.

Code of Federal Regulations: Title 21 Part 1307.2.

[20-12d](#) Medical functions performed by physician assistants. Prescription authority.

[20-94a](#) Licensure as advanced practice registered nurse.

[29-17a](#) Criminal history checks. Procedure. Fees.

PA 18-185 An Act Concerning the Recommendations of the Task Force on Life-Threatening Food Allergies in Schools

Policy adopted: November 17, 2011
Policy revised: December 6, 2012
Policy revised: December 17, 2015
Policy revised: March 7, 2019
Policy revised:

NEW FAIRFIELD PUBLIC SCHOOLS
New Fairfield, Connecticut

Students

Administering Medication to Students

Regular School Day

The Board of Education (Board) allows students to self-administer medication and qualified personnel for schools to administer medication to students in accordance with the following established procedures. These procedures shall be reviewed and/or revised and approved by the School Medical Advisor, the school nurse and the Board of Education. The District's School Medical Advisor (or other qualified physician) will approve this policy, its regulations and any changes prior to submission to the Board of Education for its approval.

The administration of medication includes the activities of 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.

A student who is required to receive medication or wants to take aspirin, ibuprofen, or an aspirin substitute containing acetaminophen during school hours must provide:

1. The authorized prescriber's (physician, dentist, optometrist, advanced practice registered nurse, or physician assistant; and a podiatrist in the case of interscholastic or intramural athletic events) orders for medication or aspirin, ibuprofen, or an aspirin substitute containing acetaminophen on a school district form which specifies the student's name, condition for which the drug is being administered, name of drug and method of administration and dosage of drug. For students receiving medicine the time of administration and duration of the order, side effects to be observed (if any) and management of such effects, and student allergies to food and/or medicine is also required on the form. This medical order must be renewed yearly if a student is to be administered medication by school personnel.
2. Written authorization from his or her parent or guardian allowing school personnel to administer said medication. This authorization shall be renewed yearly and shall include parental consent for school personnel to destroy said medication if not repossessed by the parent or guardian within a seven (7) day period of notification by school authorities.
3. The medication must have its original correct label from the pharmacy or manufacturer.

Students who are able to self-administer medication may do so provided:

1. An authorized prescriber provides a written order for self-administration of said medication.
2. There is written authorization for self-administration of medication from the student's parent or guardian.
3. The school nurse has evaluated the situation and deemed it to be safe and appropriate; has documented this on the student's cumulative health record, and has developed a plan for general supervision.

Students

Administering Medication to Students

Regular School Day (continued)

4. The student and school nurse have developed a plan for reporting and supervision of self-administration and notification of teachers.
5. The principal and appropriate teachers are informed that the student is self-administering prescribed medication.
6. Such medication is transported to the school and maintained under the student's control within these guidelines.

In addition, the Board permits those students who have a verified chronic medical condition and are deemed capable to self-administer prescribed emergency medication, including rescue asthma inhalers and ~~cartridge injectors~~ epinephrine for medically-diagnosed allergies, to self-administer such medications and may permit such students to self-administer other medications, excluding controlled drugs, as defined in Connecticut General Statute [21a-240](#). Such students must provide:

1. An authorized prescriber's written medication order including the recommendation for self-administration; and
2. A written authorization for self-administration of medication from the student's parent or guardian.

Further, the school nurse shall assess the student's competency for self-administration in the school setting and deem it to be safe and appropriate, including that a student:

1. is capable of identifying and selecting the appropriate medication by size, color, amount, or other label identification;
2. knows the frequency and time of day for which the medication is ordered;
3. can identify the presenting symptoms that require medication;
4. administers the medication properly;
5. maintains safe control of the medication at all times;
6. seeks adult supervision whenever warranted; and
7. cooperates with the established medication plan.

In the case of inhalers for asthma and ~~cartridge injectors~~ epinephrine for medically-diagnosed allergies, the school nurse's review of a student's competency to self-administer inhalers for asthma and ~~cartridge injectors~~ epinephrine for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-administering inhalers for asthma and cartridge injectors for medically-diagnosed allergies. Students may self-administer such medications only with the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student.

Students

Administering Medication to Students

Regular School Day (continued)

The school nurse is responsible for:

1. Reviewing the medication order and parental authorizations;
2. Developing an appropriate plan for self-administration;
3. Documenting the medication plan in the student's or participant's health record; and
4. Informing qualified personnel for schools and other staff regarding the student's self-administration of prescribed medication.

The medication shall be transported to school by the student and maintained under the student's control in accordance with the District's policy on self-medication by students and the individual student plan.

Self-administration of controlled medication may be considered for extraordinary situations such as international field trips. Such self-administration must be approved by the school nurse supervisor and the School Medical Advisor in advance and an appropriate plan shall be developed.

Medication may be administered by a licensed nurse, or in absence of such licensed personnel, any other nurse licensed pursuant to the provisions of Chapter 378, including a nurse employed by, or providing services under the direction of the Board of Education at a school-based clinic, qualified personnel for schools (principals, teachers, licensed physical or occupational therapists and coaches and licensed athletic trainers during intramural and/or interscholastic athletics) trained in the administration of medication. They shall not be held liable for any personal injuries which may result from acts or omissions constituting ordinary negligence.

A licensed practical nurse may administer medications to students if he/she can demonstrate evidence of one of the following:

1. Training in administration of medications as part of their basic nursing program;
2. Successful completion of a pharmacology course and subsequent supervised experience;
3. Supervised experience in medication administration while employed in a health care facility.

Licensed practical nurses shall **not** train or delegate the administration of medication to another individual. Such nurses shall only administer medications after the medication plan has been established by the school nurse or registered nurse.

Medication will be administered according to the following procedures:

1. The school nurse will develop a medication administration plan for each student before medication may be administered by any staff member. The school nurse will also review regularly all documentation pertaining to the administration of medication for students.

Students

Administering Medication to Students

Regular School Day (continued)

2. The qualified personnel for schools approved by the School Medical Advisor and school nurse will be formally trained by the school nurse or School Medical Advisor prior to administering medication. The school nurse, acting as designee and under the direction of the School Medical Advisor, will annually instruct such staff members in the administration of medication. The training shall include, but not be limited to:
 - A. The generic principles of safe administration of medications.
 - B. Review of state statute and school regulations regarding administration of medication by school personnel.
 - C. Procedural aspects of the administration of medication, including the safe handling and storage of medication, and documentation.
 - D. Specific information related to each student's medication and each student's medication plan including the Brand 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 dose of the medication, and when to implement emergency interventions.

3. A list of qualified personnel successfully trained and approved to administer medication along with documentation of the annual update of trainees shall be submitted to the Superintendent by the nursing supervisor on October 31 of each year. All such individuals including school nurses and nurse practitioners must have also satisfactorily passed the criminal background check. The documentation shall include the dates of general and student-specific training, the content of the training, individuals who have successfully completed general and student-specific administration of medication training for the current school year, and names and credentials of the nurse or School Medical Advisor trainer or trainers.

4. A current list of those authorized to give medication shall be maintained in the school.

A child with diabetes may test his/her own blood glucose level per the written order of a physician or advanced practice nurse stating the need and the capacity of such child to conduct self-testing, along with the written authorization of the parent/guardian. Such self-testing shall be pursuant to guidelines promulgated by the Commissioner of Education.

The school nurse or school principal shall select a qualified school employee to, under certain conditions, ~~give a glucagon injection~~ **utilize equipment to administer glucagon** to a student with diabetes who may require prompt treatment to protect him/her from serious harm or death. The nurse or principal must have the written authority from the student's parent/guardian and a written order from the student's Connecticut-licensed physician. The authorization shall be limited to situations when the school nurse is absent or unavailable. No qualified school employee shall administer this medication unless he/she has annually completed any training required by the school nurse and school medical advisor in the administration of medication with ~~injectable~~ equipment used to administer glucagon, the school nurse and school medical advisor must attest that the qualified school employee has completed such training and the qualified school employee voluntarily agrees to serve as a qualified school employee. The ~~injections~~

Students

Administering Medication to Students

Regular School Day (continued)

medications are to be given through an injector or ~~injectable~~ other equipment used to deliver an appropriate dose of glucagon as emergency first aid response to diabetes.

A specific paraprofessional, in the absence of a school nurse, may only administer medications to a specific student in order to protect that student from harm or death due to a medically diagnosed allergic condition according to the following:

- A. only with the approval of the School Medical Advisor and school nurse, in conjunction with the school nurse supervisor, and under the supervision of the school nurse;
- B. with a proper medication authorization from the authorized prescriber in conformity with Connecticut General Statute [10-212a](#);
- C. with parental/guardian permission to administer the medication at school;
- D. only medication necessary for prompt treatment of an allergic reaction, including, but not limited to, ~~a cartridge injector~~ **epinephrine**, and
- E. the paraprofessional shall have received proper training and supervision from the school nurse as detailed in Section [10-212a-3](#) and Section [10-212a-7](#) of the Regulations of Connecticut State Agencies.

Note: The use of a paraprofessional to administer medications, as described above, is not mandated by law or regulation. Such use is subject to Board of Education approval.

Storage and Administration of Epinephrine

Definitions (For purposes of this subsection of this policy)

Carrier means any school district, educational institution, or person, firm or corporation under contract to the district engaged in the business of transporting students (CGS [14-212\(2\)](#))

~~**Cartridge injector** means an automatic pre-filled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.~~

Epinephrine means an automatic pre-filled cartridge injector or similar automatic injectable equipment, a nasal spray, or any other medical equipment approved by the United States Food and Drug Administration that is used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

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

Qualified medical professional means a licensed physician, optometrist, advanced practice registered nurse, or a physician assistant.

Students

Administering Medication to Students (continued)

Storage and Use of Epinephrine

Definitions (For purposes of this subsection of this policy)

School bus driver means any person holding a commercial driver's license with a public passenger endorsement to operate a school bus pursuant to subsection (a) of CGS [14-44](#))

Storage and Use of Epinephrine ~~Cartridge Injectors~~

A school nurse or, in the absence of a school nurse, a "qualified school employee" shall maintain epinephrine ~~in cartridge injectors~~ for the purpose of emergency first aid to students who experience allergic reactions, who were not previously known to have serious allergies and therefore do not have a prior written authorization of a parent/guardian or a prior written order of a qualified medical professional for the administration of epinephrine.

Note: ~~Epipens expire yearly. Therefore, schools are responsible for refilling their prescriptions annually. It is estimated that each school would require two to three two-pack epipens.~~ School nurses are responsible for monitoring epinephrine expiration dates and refilling prescriptions in a timely manner to ensure supply is available in the school.

The school nurse or school principal shall select qualified school employees to be trained to administer such epinephrine. There shall be at least one such qualified school employee on the grounds of each District school during regular school hours in the absence of the school nurse. Each school must maintain a store of ~~epipens~~ epinephrine for such emergency use.

Note: This requirement pertains only during regular school hours and does not include after-school activities.

The school shall fulfill all conditions and procedures promulgated in the regulations established by the State Board of Education for the storage and administration of epinephrine by school personnel to students for the purpose of emergency first aid to students who experience allergic reaction and do not have prior written authorization for epinephrine administration.

The school nurse or, in the absence or unavailability of such school nurse, such qualified school employee may administer epinephrine. A qualified school employee must annually complete the required training program in order to be permitted to administer epinephrine ~~utilizing an epipen.~~

The parent/guardian of a student may submit, in writing, to the school nurse and school medical advisor, if any, that epinephrine shall not be administered to his/her child permitted by statute.

- (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.

The District's School Medical Advisor shall sign off, via his/her standing orders, on this procedure regarding the use of epipens by trained qualified school personnel.

Students

Administering Medication to Students

Handling and Storage of Medications

All medication, except those approved for keeping by students for self-medication, must be delivered by the parent or other responsible adult and shall be received by the nurse assigned to the school or, in the absence of such nurse, by other qualified personnel for schools trained in the administration of medication and assigned to the school. The school nurse must:

- A. Examine on site any new medication, medication order and parent/guardian authorization to insure that it shall be properly labeled with dates, name of student, medication name, dosage and physician's name, and that the medication order and permission form are complete and appropriate.
- B. Develop an administration of medication plan for the student before any medication is given by qualified personnel for schools.
- C. Review all medication refills with the medication order and parent/guardian written authorization prior to the administration of medication.
- D. Except as indicated by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container during school hours under the supervision of the nurse or the principal or principal's designee trained in the administration of medication.
- E. Emergency medications shall be locked beyond the regular school day or program hours except as otherwise determined by a student emergency care plan.
- F. Record on the Student's Individual Medication Record the date the medication is delivered and the amount of medication received.
- G. Store medication requiring refrigeration in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator shall be located in a health office maintained for health service purposes with limited access. Non-controlled medications may be stored directly on the shelf of the refrigerator with no further protection needed. Controlled medications shall be stored in a locked box affixed to the refrigerator shelf.
- H. Store prescribed medicinal preparations in securely locked storage compartment. Controlled substances shall be contained in separate compartments, secured and locked at all times. At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before- and after-school programs and school readiness programs. The school nurse shall maintain one set of keys. The additional set shall be under the direct control of the Principal and, if necessary, the Program Director or lead teacher trained in the administration of medication shall also have a set of keys.

All medication, except those approved for keeping by students for self-medication, shall be kept in a designated locked container, cabinet or closet used exclusively for the storage of medication.

Students

Administering Medication to Students

Handling and Storage of Medications (continued)

In the case of controlled substances, they shall be stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet.

No more than a three-month supply of a medication for a student shall be stored at the school. All medications, prescriptions and non-prescription, shall be delivered and stored in their original containers and in such a manner as to render them safe and effective. No medication for a student shall be stored at a school without a current written order from an authorized prescriber.

Access to all stored medications shall be limited to persons authorized to administer medications. Each school or before- and after-school program and school readiness program shall maintain a current list of those persons authorized to administer medications.

Destruction/Disposal of Medication

At the end of the school year or whenever a student's medication is discontinued by the authorized prescriber, the parent or guardian is to be contacted and requested to repossess the unused medication within a seven (7) school day period. If the parent/guardian does not comply with this request, all medication (non-controlled drugs) is to be destroyed by the school nurse in the presence of at least one witness (school physician, principal, teacher) according to the following procedures:

1. Medication will be destroyed in a non-recoverable fashion. (*Procedure below recommended by Connecticut Department of Environmental Protection, Office of Pollution Prevention.*)

A. Keep the medication in its original container.

- To protect privacy and discourage misuse of the prescription, cross out the patient's name with a permanent marker or duct tape or remove the label. (Chemotherapy drugs may require special handling. Work with your healthcare provider on proper disposal options for this type of medication.)

B. Modify the medications to discourage consumption.

- For solid medications: such as pills or capsules: add a small amount of water to at least partially dissolve them.
- For liquid medications: add enough table salt, flour, charcoal, or nontoxic powdered spice, such as turmeric or mustard to make a pungent, unsightly mixture that discourages anyone from eating it.
- For blister packs: wrap the blister packages containing pills in multiple layers of duct or other opaque tape.

Students

Administering Medication to Students

Destruction/Disposal of Medication (continued)

C. Seal and conceal.

- Tape the medication container lid shut with packing or duct tape.
- Place it inside a non-transparent bag or container such as an empty yogurt or margarine tub to ensure that the contents cannot be seen.
- **Do not** conceal medicines in food products because animals could inadvertently consume them.

D. Discard the container in your trash can.

E. Schools that want to dispose of controlled substances should call the Drug Control Division of the CT Department of Consumer Protection for assistance at 860-713-6055.

2. The following information is to be charted on the student's health folder and signed by the school nurse and witness:
 - A. Date of destruction.
 - B. Time of destruction.
 - C. Name, strength, form and quantity of medication destroyed.
 - D. Manner of destruction of medication.
3. Controlled substances shall not be destroyed by the school nurse. Controlled substances shall be destroyed pursuant to Section [21a-262-3](#) of the Regulations of the Connecticut State Agencies. In the event that any controlled substance remains unclaimed, the school nurse or Supervisor of Nursing shall contact the Connecticut Commissioner of Consumer Protection to arrange for proper disposition. Destruction may also be conducted by a Connecticut licensed pharmacist in the presence of another pharmacist acting as a witness.
4. Any 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 Connecticut General Statute [10-212a\(b\)](#). If no residue is present notification must be made to the Department of Consumer Protection (DEP) pursuant to Section [21a-262-3](#) of the Regulations of Connecticut State Agencies.
5. The completed medication administration record for non-controlled medications may be destroyed in accordance with Section M8 of the Connecticut Municipality Retention Schedule, provided it is superseded by a summary on the student health record.

Students

Administering Medication to Students

Documentation and Record Keeping

Record keeping of medication administration shall either be in ink and shall not be altered or shall be recorded electronically, in a record that cannot be altered, on the individual student's medication record form which, along with the parental authorization form and the authorized prescriber's order, becomes part of the student's permanent record. Records shall be made available to the Connecticut State Department of Education upon request, for review until destroyed pursuant to C.G.S. [11-8a](#) and C.G.S. [10-212a\(b\)](#) for controlled medications.

Each school readiness or before- and after-school program where medications are administered shall maintain an individual medication administration record for each student who receives medication during regular school or program hours. A medication administration record shall include the:

- A. Name of the student;
- B. Name of medication;
- C. Dosage of medication;
- D. Route of administration;
- E. Frequency of administration;
- F. Name of the authorized prescriber, or in the case of aspirin, ibuprofen, or an aspirin substitute containing acetaminophen being given to a student, the name of the parent or guardian requesting the medication to be given;
- G. Dates for initiating and terminating the administration of the medication, including extended year programs;
- H. Quantity received which shall be verified by the adult delivering the medication;
- I. Student allergies to food and/or medicine;
- J. Date and time of administration or omission including reason for omission;
- K. Dose or amount of drug administered;
- L. Full written or electronic signature of the nurse or qualified personnel for schools administering the medication; and
- M. For controlled medications, a medication count which shall be conducted and documented at least once a week and co-signed by the assigned nurse and a witness.

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 years, pursuant to Connecticut General Statute [10-212a\(b\)](#).

The written order of the authorized prescriber, the written authorization of the parent or guardian to administer the medication and the written parental/guardian permission for the exchange of information by the prescriber and school nurse to ensure the safe administration of such medication shall be filed in the student's cumulative health record or, for before- and after-school programs and school readiness programs, in the child's program record.

Students

Administering Medication to Students

Documentation and Record Keeping (continued)

Record of the medication administered shall be entered in ink on an individual student medication record form and filed in the student's cumulative health folder. If the student is absent, it shall be so recorded. If an error is made in recording, a single line shall be run through the error and initialed.

An authorized prescriber's verbal order, including a telephone order, for a change in any medication may be received only by a school nurse. Such verbal order must be followed by a faxed written order from the prescriber's office phone within three (3) hours.

1. An error in the administration of medication shall be reported to the school nurse who will initiate appropriate action and documentation in a student incident report and on his/her cumulative record.
2. Untoward reactions to medication shall be reported to the school nurse, the parent, and the student's physician.
3. Records of controlled substances shall be entered in the same manner as other medications with the following additions:
 - A. The amount of controlled drug shall be counted and recorded on the individual student medication record form after each dose given.
 - B. A true copy (carbon or NCR) of the forms shall be retained by the school for 3 years and the original filed in the student's permanent health record.
 - C. Loss, theft or destruction of controlled substances shall be immediately, upon discovery, reported to the Supervisor of Nursing Services who will contact the Connecticut Commissioner of Consumer Protection.

In the absence of a licensed nurse, only qualified personnel for schools who have been properly trained may administer medication to students. Qualified personnel for schools may administer oral, topical, intranasal, inhalant or cartridge injector medications. Medications with a ~~cartridge injector~~ epinephrine may be administered by qualified personnel only to a student presenting with an allergic condition which may require prompt treatment to protect the student against serious harm or death.

Investigational drugs may not be administered by qualified personnel for schools.

In the case of the administration of a medication with a ~~cartridge injector~~ epinephrine in an after-school readiness program or child-care program, such administration shall be reported to the school nurse no later than the next school day.

Students

Administering Medication to Students

Medication Errors

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 regulation if necessary, and shall immediately notify the school nurse and the Principal (if the Principal was not the person who made the error);
- B. the school nurse shall immediately notify the authorized prescriber or the School Medical Advisor, and the student's parent or guardian. In a severe emergency, 911 should be called. Contact the Poison Control Center as deemed necessary.
- C. the Principal shall notify the Superintendent or the Superintendent's designee, 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). (An incident report form is to be sent to the Superintendent or his/her designee.)

A report shall be completed using the authorized accident/incident report form.

Any error in the administration of medication shall be documented in the student's cumulative health record.

Administration of Emergency Medication under Connecticut General Statute [10-212a](#)

In the absence of a school nurse, any other nurse licensed pursuant to provisions of Chapter 378 including a nurse providing services at a school-based health clinic, qualified personnel for schools may give emergency medication orally or by injection to students with a medically diagnosed allergic condition which would require such prompt treatment to protect the child from serious harm or death so long as the administrator or teacher has completed training in administration or such medication.

Whenever a student has an untoward 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.

Emergency medical care to resolve a medication emergency includes but is not limited to the following, as appropriate under the circumstances or: *(in the event of a medication emergency, the following will be readily available:)*

- A. The use of the 911 emergency response system;
- B. The contact of a local poison information center;
- C. The physician, clinic or emergency room to be contacted in such an emergency;
- D. The name of the person responsible for the decision-making in the absence of the school nurse;

Students

Administering Medication to Students

Administration of Emergency Medication under Connecticut General Statute [10-212a](#) (continued)

- E. The application by properly trained and/or certified personnel of appropriate emergency medical care techniques, such as cardio-pulmonary resuscitation;
- F. Administration of emergency medication in accordance with policy #[5141.21](#) and this administrative regulation; and
- G. Transporting the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.

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.

The school nurse is responsible for notifying 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.

Supervision

The school nurse is responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned. The school nurse's duty of general supervision includes, but is not limited to the following:

1. Availability on a regularly scheduled basis to:

- a. review orders or changes in orders, and communicate these to personnel designated to administer medication for appropriate follow-up;
- b. set up a plan and schedule to ensure medications are given;
- c. provide training to qualified personnel for schools and other licensed nursing in the administration of medications, and assess that the qualified personnel for schools are competent to administer medications;
- d. support and assist other licensed nursing personnel and qualified personnel for schools to prepare for and implement their responsibilities related to the administration of specific medications during school hours; and,
- e. provide consultation by telephone or other means of telecommunications. (In the absence of the school nurse, an authorized prescriber or other nurse may provide this consultation.)

2. In addition, the school nurse shall be responsible for:

- a. implementing policies and procedures regarding the receipt, storage, and administration of medications;
- b. reviewing, on a monthly basis, all documentation pertaining to the administration of medications for students;

Students

Administering Medication to Students

Administration of Emergency Medication under Connecticut General Statute [10-212a](#) (continued)

Before- and After-School Programs and School Readiness Programs

- c. observing the competency to administer medication by qualified personnel for schools; and
- d. conducting periodic reviews, as needed, with licensed nursing personnel and qualified personnel for schools, regarding the needs of any student receiving medication.

Before- and After-School Programs and School Readiness Programs

Directors, or their designees, who may include 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, in school readiness programs and before- and after-school programs that are child care programs. (Such programs must either be District-administered or administered by a municipality exempt from licensure by the Department of Public Health and are located in a District public school). Medicine may be administered pursuant to the Regulations of Connecticut State Agencies, Section [10-212a-10](#), to children enrolled in these programs.

Administration of medications shall be provided only when it is medically necessary for program participants to access the program and maintain their health status while attending the program. Investigational drugs or research or study medications may not be administered by Directors or their designees, lead teachers or school administrators. Properly trained Directors, Directors' designees, lead teachers or school administrators may administer medications to students as delegated by the school nurse or other registered nurse. They may administer oral, topical, intranasal, or inhalant medications. No medication shall be administered without the written order of an authorized prescriber and the written approval of the parent/guardian.

A child attending any before- or after-school program, as defined in policy [#5141.21](#), upon the request and with the written authorization of the child's parent/guardian and pursuant to the written order from the student's authorized prescriber, will be provided medication and supervised by the District staff member (Director or designee, lead teacher, school administrator) trained to administer medication with a cartridge injector **epinephrine**. Such administration shall be to a particular student who is medically diagnosed with an allergy that may require prompt treatment to avoid serious harm or death.

The selected staff member shall be trained in the use of a cartridge injector **epinephrine** by either a licensed physician, physician's assistant, advanced practice registered nurse or registered nurse.

The administration has determined, in cooperation with the School Medical Advisor and school nurse supervisor, the level of nursing services that is/is not required on site based on the needs of the program and its participants.

Students

Administering Medication to Students

Before- and After-School Programs and School Readiness Programs (continued)

Administration of Medication During Intramural and Interscholastic Athletics

A child attending any before- and after-school programs or school readiness programs operated and administered by the Board or municipality in any building or on the grounds of any District school, upon the request and with the written authorization of the child's parent/guardian or eligible student and pursuant to the written order from the student's authorized prescriber, will be supervised by a District staff member trained to administer medication with ~~a cartridge injector~~ epinephrine. Such administration shall be to a particular student diagnosed with an allergy that may require prompt treatment to avoid serious harm or death. The selected staff member shall be trained in the use of ~~a cartridge injector~~ epinephrine by either a licensed physician, physician's assistant, advanced practice registered nurse or registered nurse.

Supervision of the administration of medication in before- and after-school and school readiness programs shall be pursuant to the "Supervision" section of these administrative bylaws.

Administration of Medication During Intramural and Interscholastic Athletics

A coach or licensed athletic trainer, trained in the general principles of medication administration applicable to receiving, storing, and assisting with inhalant medications or ~~cartridge injector~~ epinephrine medications and documentation, may administer medication for select students, according to the student's individualized medication plan, for whom self-administration plans are not viable options as determined by the school nurse.

The medication which may be administered is limited to: (1) inhalant medications prescribed to treat respiratory conditions and (2) epinephrine medication ~~administered with a cartridge injector~~ for students with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.

The school nurse, responsible for the student's individualized medication plan, shall provide the coach with a copy of the authorized prescriber's order and the parental/guardian permission form. Parents are responsible for providing the coach or licensed athletic trainer the medication, such as the inhaler or ~~cartridge injector~~ epinephrine, which shall be kept separate from the medication stored in the school health office during the school day.

Medications to be used in athletic events shall be stored in containers for the exclusive use of holding medications; in locations that preserve the integrity of the medication; under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and in a locked secure cabinet when not in use at athletic events.

The coach or licensed athletic trainer's agreement is necessary for the administration of emergency medication and the implementation of the student's emergency care plan.

Coaches and licensed athletic trainers are required to fulfill the documentation requirements as outlined in these administrative regulations. A separate medication administration record for each student shall be maintained in the athletic area. Errors in the administration of medication

Students

Administering Medication to Students

Administration of Medication During Intramural and Interscholastic Athletics (continued)

shall be addressed as specified in Section [10-212a-6](#) of the Regulations of Connecticut State Agencies, and detailed in these administrative regulations. If the school nurse is not available, a report may be submitted by the coach or licensed athletic trainer to the school nurse on the next school day.

An administration of medication record shall be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

Legal Reference: Connecticut General Statutes

[10-206](#) Health assessment

[10-212](#) School nurses and nurse practitioners. Administration of medications by parents or guardians on school grounds. Criminal history; records check

[10-212a](#) Administration of medicines by school personnel. (as amended by P.A. 03-211, PA 04-181 PA 09-155, PA 14-176 and PA 18-185)

[19a-900](#) Use of cartridge injector by staff member of before- or after-school program, day camp or day care facility

[21a-240](#) Definitions

[29-17a](#) Criminal history checks. Procedure. Fees

[52-557b](#) Immunity from liability for emergency medical assistance first aid or medication by injection. School personnel not required to administer or render.

Students

Administering Medication to Students

Legal Reference: (as amended by PA 05-144 – An Act Concerning the Emergency Use of Cartridge Injectors)

Connecticut Regulations of State Agencies

[10-212a-1](#) through [10-212a-10](#) Administration of Medication by School Personnel and Administration of Medication During Before- and After-School Programs and School Readiness Programs

1307.21 Code of Federal Regulation

PA 18-185 An Act Concerning the Recommendations of the Task Force on Life-Threatening Food Allergies in Schools

Regulation adopted: November 17, 2011
Regulation revised: December 6, 2012
Regulation revised: December 17, 2015
Regulation revised: March 7, 2019
Regulation revised:

NEW FAIRFIELD PUBLIC SCHOOLS
New Fairfield, Connecticut

School District: _____ School: _____ Grade: _____

Authorization for the Administration of Medicine by Authorized School Personnel

Connecticut State Law and Regulations 10-212(a) require a written medication order of an authorized prescriber, (physician, dentist, advanced practice registered nurse or physician's assistant) and parent/guardian written authorization, for the nurse, or in the absence of the nurse, qualified personnel for schools to administer medication. Medications must be in the original properly labeled container and dispensed by a physician/pharmacist.

Authorized Prescriber's Authorization

Name of Student: _____ Date of Birth: _____

Address: _____

Condition for which drug is being administered: _____

Drug name: _____ Dose: _____ Route: _____

Time of Administration: _____ If PRN, specify criteria: ____

Relevant side effects: None expected Specify: _____

Allergies: No Yes (specify): _____

Medication shall be administered from: _____ to _____
Month/Day/Year Month/Day/Year

Authorized Prescriber's Name/Title: _____
(Type or Print)

Telephone: _____ Fax: _____

Address: _____

Authorized Prescriber's
Signature: _____ Date: _____

Use for Authorized Prescriber's Stamp

Parent/Guardian Authorization

I hereby request that the above ordered medication be administered by school personnel. I understand that I must supply the school with no more than a three (3) month supply of medication. I understand that this medication will be destroyed if not picked within one (1) week following termination of the order or the last day of school, whichever comes first.

Parent/Guardian Signature: _____ Date: _____

Parent's/Guardian's Home Phone #: _____ Work #: _____

Self-Administration of Medication Authorization/Approval - *Self-administration of medication may be authorized by the authorized prescriber and parent/guardian and must be approved by the school nurse in accordance with Board policy. Students will be allowed to self administer medications only when the health problem could be life threatening.*

Authorized prescriber's authorization for self-administration: Yes No _____
Signature Date

Parent/Guardian authorization for self-administration: Yes No _____
Signature Date

School nurse approval for self-administration: Yes No _____
Signature Date

MEDICATION ERROR OR INCIDENT REPORT

Date or Report: _____ School: _____ Prepared by: _____

Name of Student: _____ Grade: _____

Home Address: _____ Phone: _____

Date error occurred: _____ Time noted: _____

Person Administering Medication: _____

Authorized Prescriber: _____

Reason medication was prescribed: _____

Date of Order: _____ Instructions for Administration: _____

Medication(s)	Dose	Route	Scheduled Time	Dispensing Pharmacy	Prescription Number

Describe the error and how it occurred (use reverse side if necessary)

Action Taken: *(by school nurse)*

Prescribing practitioner notified: Yes No Date _____ Time _____

School Medical Advisor notified: Yes No Date _____ Time _____

School Principal notified: Yes No Date _____ Time _____

Superintendent of Schools notified (by Principal): Yes No Date _____ Time _____

Parent/Guardian notified: Yes No Date _____ Time _____

Outcome: _____

Name: _____

Print or Type

Signature

Title

Date

Note: Any error in the administration of medication shall be documented in the student's cumulative health record, or for before- and after-school programs and school readiness programs in the child's program record.

Record of Training of Qualified Personnel for Schools in the Administration of Medicines**

School Building

Responsible School Nurse/School Medical Advisor

Date	Name Qualified Personnel for Schools	Generic Principles of Safe Administration of Medications *	Review of State Statute & School Regulations Regarding Administration of Medication by Qualified School Personnel *	Procedural Safe Handling and Documentation Storage *	Aspects Recording *	Specific Student Needs* (including name or generic name of medication, indications for medication, dosage, routes, time & frequency of administration, therapeutic effects of the medication, overdose, missed dose.)	Medication Idiosyncrasies *	Desired Effects *	Potential Side Effects Untoward Reactions, When to Implement Emergency Interventions *

***Directions: Check (x) when completed.**

** Qualified Personnel for Schools means (a) a full time employee as a principal, teacher, occupational therapist, or physical therapist who has been trained in the administration of medication pursuant to Section 10-212a-3 of the State regulations; (b) a coach and licensed athletic trainer trained in the administration of medication pursuant to Section 10-212a-8 of the State regulations; (c) a paraprofessional who has been trained in the administration of medication pursuant to Section 10-212a-9 of the State regulations. For school readiness programs and before- and after-school programs, directors, director's designee, lead teacher and school administrators trained in the administration of medication pursuant to Section 10-212a-10 of the State regulation.

NEW FAIRFIELD PUBLIC SCHOOLS
New Fairfield, Connecticut

HIPAA-Compliant Authorization for Exchange of Health & Education Information

Patient/Student Name: _____ Date of Birth: _____

I hereby authorize _____ [insert health care provider name & title]
and

_____ [insert address & telephone of school/school district]

_____ [insert address & telephone of health care provider]

Description:

The health information to be disclosed consists of:

The education information to be disclosed consists of:

Purpose: This information will be used for the following purpose(s):

- Educational evaluation and program planning
- Health assessment and planning for health care services and treatment in school
- Medical evaluation and treatment
- Other: _____

Authorization

This authorization is valid for one calendar year. It will expire on _____ [insert date]. I understand that I may revoke this authorization at any time by submitting written notice of the withdrawal of my consent. I recognize that health records, once received by the school district, may not be protected by the HIPAA Privacy Rule, but will become education records protected by the Family Educational Rights and Privacy Act. I also understand that if I refuse to sign, such refusal will not interfere with my child's ability to obtain health care.

Parent Signature: _____ Date: _____

Student Signature*: _____ Date: _____

* If a minor student is authorized to consent to health care without parental consent under federal or state law, only the student shall sign this authorization form. In Connecticut, a competent minor, depending on age, can consent to outpatient mental health care, alcohol and drug abuse treatment, testing for HIV/AIDS, and reproductive health care services.

Copies: Parent or student*
Physician or other health care provider releasing the protected health information
School official requesting/receiving the protected health information

INDIVIDUALIZED HEALTH CARE PLAN

Name: _____ DOB: _____ Sex: _____ Allergies: _____ Physician: _____

Relevant Diagnosis(es): _____

Diet: _____ Mobility: _____ Equipment: _____

Medical History: _____

Medication/Treatment: _____

Signature: _____ (Parent) Signature: _____ (Student) Signature: _____ (School Nurse)

HEALTH CARE GOAL

DATE	HEALTH PROBLEM / NURSING DIAGNOSIS	STUDENT OBJECTIVES	INTERVENTION AND RESPONSIBLE PERSON	EVALUATION AND TIMELINE

5141.21
FORM #8
(continued)

NAME: _____

DATE	HEALTH PROBLEM / NURSING DIAGNOSIS	STUDENT OBJECTIVES	INTERVENTION AND RESPONSIBLE PERSON	EVALUATION AND TIMELINE

Adapted from Hartford Public Schools for use in Connecticut Department of Education Guidelines for Students with Special Health Care Needs.

Connecticut Statewide School Health Services Report

Report of Epinephrine* Administration

Please mail or fax form to: Stephanie Knutson, Connecticut State Department of Education, 25 Industrial Park Road,
Middletown, CT 06457 Fax number: (860) 807-2127

School District: _____ Name of School: _____

Public Non Public

Student/Staff DOB: _____ Gender: M F Ethnicity: Spanish/Hispanic/Latino:
Yes No

Race: American Indian/Alaskan Native African American Asian Native Hawaiian/other Pacific Islander White

Diagnosis/History of Asthma: Yes No History of Anaphylaxis: Yes No Previous Epinephrine
Use: Yes No

Incident:

Date/Time of occurrence: _____ Known allergen(s): _____

Trigger that precipitated this allergic episode: _____

Symptoms: _____

Location of individual when symptoms developed: _____

Location of individual when Epinephrine administered: _____

Location of Epinephrine storage: _____

Epinephrine administered by: RN Other If other, please specify: _____

If other than an RN, was this person formally trained? Yes No Date of training: _____

If epinephrine was self-administered by an individual at school or a school-sponsored function, did the individual follow school
protocols to notify school personnel and activate EMS? Yes No NA

Approximate time between onset of symptoms and administration of Epinephrine: _____

Was Epinephrine administered under a patient specific order for a particular student? Yes No

Does school district have non-patient specific standing orders/protocols in place for Anaphylaxis? Yes No

Individual Health Care Plan (IHCP) in place? Yes No School Physician notified? Yes No

Written school district policy on management of life-threatening allergies in place? Yes No

Disposition:

Transferred to ER: Yes No Discharged after ____ hours Biphasic reaction: Yes No
Unknown

Hospitalized: Yes No Discharged after ____ days

Outcome:

Recommendations for changes/improvements to current policy or procedures: _____ Debriefing meeting? Yes No

Form completed by: _____ Date: _____

(please print) Title: _____ Phone number: _____

Address: _____

*EpiPen®, or EpiPen® Jr. or Twinject™

Global Leadership Summit International Trip (NFHS)

New Fairfield Public Schools

Board of Education Curriculum Subcommittee Meeting

April 27, 2026

About the Trip

Budapest, Krakow, and Prague, July 3-12, 2027

- **Trip Leader:** Christine Haddad (NFHS Library Media Specialist)
- **Chaperones:** NFHS staff (social studies teacher, etc.)
- **Trip Company:** Education First



Itinerary

- **Curriculum-related historical sites and museums** (facilitated Auschwitz visit, architecture in Prague, Military History Institute; curriculum connections - English Grade 9, Global Studies / World History, and NFPS VoL)
- **Culminating experience at Global Summit Leadership Conference** (Keynote by Malala Yousafzai; leadership workshops for students with emphasis on social responsibility, technology, and educational access)
- **Cultural experiences across countries**



Additional Details

- **Approximately \$5400 per student** (cost is not dependent on size of group)
- **Travel Packet includes waivers, insurance, and cancellation policies.**



TRAVEL PACKET FOR
NEW FAIRFIELD HIGH SCHOOL OVERNIGHT INTERNATIONAL FIELD TRIP TO
BUDAPEST, KRAKOW, AND PRAGUE
JULY 2027

DATE:

Dear Parent/Guardian:

We are excited about the upcoming New Fairfield High School Global Leadership Summit trip to Budapest, Krakow, and Prague (the “Trip”). The educator responsible for the Trip is Christine Haddad and we are working with a tour company called Education First (the “Tour Company”).

There will be a parent meeting on **(TBD)** to review the travel plans, flight information, hotel accommodations, itinerary, and to answer any logistical questions. We will also provide you with an update on our plans to help ensure a safe and successful experience for all students and chaperones. It is very important that each student be represented by a parent/guardian at this meeting. Students are also welcome to attend.

In addition to the medical and permission forms we provided previously, we are providing additional information in this Travel Packet and requiring that additional forms be signed and submitted to Christine Haddad by participating students (“Student” or “Students”) and their parents or legal guardians (“Parents”). Failure to review the information in this packet and to submit the required forms may result in difficulties with the Student’s ability to participate in the Trip.

Included in this packet are the following:

- TRAVEL DESCRIPTION
- AGREEMENT, WAIVER AND RELEASE OF LIABILITY
- EXPECTATIONS AND CODE OF RESPONSIBILITY AND RESPECT
- REFUND POLICIES

THESE DOCUMENTS HAVE IMPORTANT LEGAL CONSEQUENCES.
DO NOT SIGN THEM UNLESS YOU KNOW WHAT THEY MEAN.

TRAVEL DESCRIPTION

Trip Destination: Budapest (Hungary), Krakow (Poland), Prague (Czech Republic)

Departure Date: July 3, 2027

Return Date: July 12, 2027

Trip Leader(s): Christine Haddad

Tour Company/Trip Sponsor : Education First

Detailed Itinerary: Attached/linked (see itinerary for more details about destinations)

Day 1: July 3, 2027: Overnight flight to Hungary

Students meet at a designated location at JFK airport.

Day 2: July 4, 2027:

Meet Education First Tour Director at arrivals section of the Budapest International Airport (BUD)

Travel by bus (vetted charter company TBD) with the tour director and “sister” group we will be traveling with throughout the trip. This means that we will be sharing a bus and tour director.

*We will have the same tour director and bus driver for the entire trip.

Walking tour of Budapest: get acquainted with the city, its layout and currency, history, culture, behavior and etiquette expectations

Lunch in the area

Return to the bus at the designated time.

Dinner as a group at the hotel or local restaurant

Return to hotel via bus

Hotel check in at the end of the day

Room checks conducted by chaperones at designated time.

Budapest Accommodations: Groups stay a half hour to an hour from St. Stephen’s Basilica in areas such as the District 9 neighborhood. Hotels are selected to minimize travel time between the previous and following stops on your itinerary and may not always be located near public transport. Accommodations meet the standard you’d expect from a typical European hotel, which means that rooms come with private bathrooms and feature multiple single or shared double beds. Rooms may also be on the smaller side without AC, and hotels may not have elevator access.

Sample Hotel: Ibis Stadium

<https://all.accor.com/hotel/B876/index.en.shtml>

Address: Budapest, Könyves Kálmán krt. 34, 1097 Hungary

Day 3: July 5, 2027

Breakfast at hotel

Meet tour director in hotel lobby

Board the bus for a tour of Budapest with our tour director

Heroes’ Square: Noted for its central statue featuring the Seven chieftains of the Magyars (early Hungarian tribes)

Castle Hill: Buda Castle, a 13th century fortification

Gellert Hill: Excellent vantage point overlooking Budapest

Lunch in the area

Exploration time

House of Terror Museum: discover how people lived under fascist and communist regimes.
Return to the bus at the designated time.
Dinner as a group in a local restaurant.
Add-On: Evening cruise on the Danube
Return to hotel via bus
Room checks conducted by chaperones at designated time.

Day 4: July 6, 2027

Breakfast at hotel
Meet tour director in hotel lobby
Travel via bus with tour director through Slovakia and the Tetra Mountains to Krakow, Poland (7 hours) with a stop in Slovakia for lunch.
Walking tour of Krakow Old Town: get acquainted with the city, its layout and currency, history, culture, behavior and etiquette expectations
Visit: [Glowny Square](#): (Main Market Square) in Kraków, Poland, is the largest medieval town square in Europe, covering 40,000 square meters. Designed in 1257, this vibrant 13th-century hub is surrounded by historic townhouses, featuring St. Mary's Basilica, the Cloth Hall (Sukiennice), and the Town Hall Tower.
[Wawel Hill](#): A cathedral and royal castle; the most picturesque and recognizable landmark in Krakow. Some of its oldest stone buildings date back to the 10th century. Until 1611 Wawel was the formal seat of the Polish monarchy
Exploration time: scavenger hunt, shopping, etc.
Return to the bus at the designated time.
Dinner as a group in a local restaurant
Check into hotel TBD
Room checks conducted by chaperones at designated time.

Krakow Accommodations: Groups stay in various areas around greater Krakow, about 30 minutes to an hour from Stare Miasto—or Krakow's Old Town—by tram or bus.
Accommodations meet the standard you'd expect from a typical European hotel, which means that rooms come with private bathrooms and feature multiple single or shared double beds.
Rooms may also be on the smaller side without AC, and hotels may not have elevator access.

Sample Hotel: Premier Hotel
<https://www.premierkrakowhotel.pl/>
Address: Opolska 14A, 31-323 Kraków, Poland

Day 5: July 7, 2027

Breakfast at hotel
Meet tour director in hotel lobby
Board the bus with tour director; travel to Auschwitz and Berkinau (1 hour)
Guided tour of Auschwitz and Berkinau
Participate in an interactive workshop at Auschwitz to reflect on human resilience
Return to bus
Lunch in the surrounding area
Dinner as a group in a local restaurant
Return to hotel
Given the “weight” of the day's experience, there is a group reflection and discussion in the evening.
Room checks conducted by chaperones at designated time.

Day 6: July 8, 2025

Breakfast at hotel
Meet tour director in hotel lobby

Board the bus with tour director
Travel to Prague (6-6.5 hours)
Lunch en route
Walking tour of Prague: get acquainted with the city, its layout and currency, history, culture, behavior and etiquette expectations.

Visit: [Prague Castle](#) and [St.Vitus Cathedral](#): the world's largest ancient castle and architectural masterpieces

Charles Bridge: As the only means of crossing the river Vltava until 1841, Charles Bridge was the most important connection between Prague Castle and the city's [Old Town](#) and adjacent areas. It made Prague important as a trade route between Eastern and Western Europe.

Old Town Square: The square features buildings belonging to various architectural styles, including the 14th century [Gothic Church of Our Lady before Týn](#), The Baroque [St. Nicholas Church](#) is another church located in the square

Dinner as a group in a local restaurant or our hotel (TBD)
Room checks conducted by chaperones at designated time.

Day 7: July 9, 2027

Breakfast at hotel
Meet tour guide in hotel lobby
Board the bus and travel to the [Military History Institute](#) to explore how societies respond to conflict and crisis
Lunch in the area
Return to bus
Return to hotel for Global Leadership Summit Kickoff
Dinner and welcome party hosted by EF
Room check by chaperones at designated time

Day 8: July 10, 2027

Breakfast at hotel
Meet tour guide in hotel lobby
Full day of Summit conference for students and adults
Lunch and dinner at Summit/hotel
Room check by chaperones at designated time

Day 9: July 11, 2027

Breakfast at hotel
Full day of Summit workshops for students and adults
Keynote Speaker: Malala Yousafzai
Summit closing dinner and party
Room check by chaperones at designated time

Day 10: July 12, 2027

Breakfast at our hotel.
Transfer by bus to Prague Airport.(PRG)
Return to New York City/ JFK Airport
Parents pick up students from JFK

Means of Travel: Parent drop off and pick up at JFK

Air Transportation: Details to be confirmed. Direct flights.
Flights from JFK to Budapest/ Prague to JFK

Flight Information: Departure and arrival times to be provided within 70 days prior to departure

Bus Transportation: Motor coach provided by a vetted charter company TBD

Expected Number of Student Participants: Maximum of 20

Names of Chaperones: Minimum of 3: Christine Haddad, Marc Coccillo, TBD

Name of Trip Nurse: NA

Anticipated Cost per Student:

- This trip cost is \$5189.00 per student **through April 1, 2026 (includes \$200 early enrollment discount)** based on triple or quadruple occupancy.
- Includes breakfast and dinner, flights, ground transportation, accommodations, entrance fees associated with site visits, lunch during the conference, and 24-hour EF support. Cost does not fluctuate based on number of participants
- An additional amount of approximately \$200 will be collected from each student for tips: driver, tour guide, additional local guides, servers.
- Scholarships and fundraising opportunities are available.

AGREEMENT, WAIVER AND RELEASE OF LIABILITY

The parties to this Agreement, Waiver and Release of Liability (“Agreement”) are the Student, the Student’s parents or legal guardians, and the New Fairfield Board of Education (the “District”). The Student, with the consent of the Student’s parents or legal guardians (“Parents”), has chosen to participate in an off-campus, overnight travel program (the “Trip”). Participation in the Trip is voluntary and not an educational requirement of the District.

The Student and the Parents will:

- complete all forms and provide the necessary information as detailed in this Travel Packet,
- certify that the information provided in this Travel Packet is correct, and agree to keep it updated as necessary, and
- review and understand all information provided by the third-party Tour Company/trip sponsor (“Tour Company”) (as applicable).

I. Acknowledgements

- Participation in the Trip is voluntary and is not an educational requirement of the District. The Trip is offered as an accommodation to students who wish to participate and is not considered part of the District’s curriculum. No grade, award or academic advancement will be granted by the District as a result of a student’s participation in the Trip.
- The Trip is not open to the general public and is offered only to qualified members of the District community. The District does not make any financial profit from the proceeds of the Trip nor does it charge any surcharge or other fee beyond those fees necessary to cover the cost of the Trip.
- The Student and the Parents have been given ample opportunity to review the Agreement and understand that the Agreement includes, among other things, a release of their claims against the District, its officers, directors, trustees, administrators, faculty, employees, agents and representatives (hereinafter “Released Parties”) for personal injuries, damages and/or losses relating to and/or arising out of the Trip.

II. Acknowledgement of Risk(s)

The Student and Parents acknowledge and agree that:

- Travel generally and the activities associated with it and with the Trip present risks to the Student personally and to the Student’s property, some of which may result in serious personal injury or death, and that these risks can be a consequence of not only the Student’s actions or negligence but also the actions or negligence of others, or travel conditions or equipment. Travel includes risks associated with the conduct of third parties, such as risk of traffic accidents, crime, assault and/or theft.

- Travel may also involve other risks, such as unfamiliar or different terrain, climate, food and drink, customs, laws, social and sexual mores, safety practices and regulations, communications, criminal and law enforcement activities, acts of war or terrorism, disability access, driving practices, disease, and lack of access to health care providers and facilities.
- The Student and the Parents have had the opportunity to read information that was provided about the Trip, and understand that it is their responsibility to review websites for the Centers for Disease Control (“CDC”) and other public health authorities and to review such information periodically for updates and changes prior to the Trip. For Students who will be required to take any medications during the Trip, the Student and the Parents have conferred with the appropriate District personnel about any applicable laws, rules and/or regulations regarding the possession, use and administration of medications in the particular location(s) where the Student will be traveling during the Trip, which may be different from Connecticut’s laws, rules and/or regulations regarding the possession, use and administration of medications.

PLEASE READ AND INITIAL TO CONFIRM:

I have read and/or reviewed the website for the CDC concerning health and other travel risks, cautions, and warnings, and recommendations, including any CDC Outbreak Notice/Travel Health in the areas in which the Student will be traveling.

I am responsible for consulting with a physician or appropriate specialist for advice on the risks of travel and recommendations for appropriate precautions.

I am responsible for taking the precautions recommended by the CDC.

I will continue to review the information above to obtain the most current, up-to-date travel information possible up to the departure date for the Trip.

_____ Initials of Student

_____ Initials of Parent/Guardian

- The Student and the Parents have reviewed the Trip literature provided by the District and, if applicable, the Tour Company, that describes the risks associated with the Trip. The Tour Company is solely responsible for describing the risks related to the services it provides. The Student’s and the Parents’ questions and concerns regarding those risks have been addressed to their satisfaction, and they fully understand and assume those risks.
- The Student and the Parents are responsible for evaluating the risks that the Student may face and for taking any health precautions that they deem advisable or necessary and agree that the Student may participate safely in all Trip activities with or without reasonable accommodation. If the Student requires a reasonable accommodation or if the Parents have concerns about the Student’s participation in any Trip activities, they agree to provide written notice to the District at least four (4) weeks in advance of the Trip, unless extraordinary circumstances exist.

- The specific itinerary for the Trip may change during the course of the Trip due to unforeseen and unknowable circumstances and any activities that the Student may take part in, whether as a component of the Trip or separate from it, will be considered to have been undertaken with the Student's and the Parents' approval and understanding of any and all risks involved.
- The District is not responsible for any injury, loss, or damage to the Student's person or property, whether resulting from acts or omissions of third parties, or other persons not under the control of the District, from the operation or condition of facilities or premises, from acts of war or terrorism, or from acts of God or nature, except to the extent that the injury, loss, or damage is caused by the sole negligence or reckless, wanton or intentional misconduct of the District, its officers, trustees, faculty, employees, agents, or representatives.

III. Assumption of Risks and Waiver of Liability/Release of All Claims

In consideration for being allowed to participate in the Trip, and with only those exceptions described below, the Student and the Parents fully ASSUME ALL RISKS, inherent and otherwise, whether or not described above, in connection with the Trip and RELEASE AND DISCHARGE the District, its officers, trustees, faculty, employees, agents or other representatives under the direction and control of the District (the "Released Parties") from any and all liability, damage, injury or loss, including bodily injury or death, arising from, related to, occurring during, or associated with the Student's participation in the Trip for any reason. These agreements of Assumption of Risks and Waiver of Liability/Release of All Claims do NOT apply if (1) the liability, damage, loss or injury is CAUSED SOLELY BY THE NEGLIGENCE of the Released Parties and do not include the negligence or any other act or omission by any other person or entity (such as the Student, the Parents, other third parties or independent vendors/contractors); or (2) the liability, damage, loss or injury is CAUSED BY THE RECKLESS, WANTON or INTENTIONAL MISCONDUCT of a Released Party. These agreements of Assumption of Risks and Waiver of Liability/Release of All Claims will be construed in accordance with Connecticut law.

IV. Indemnification and Hold Harmless

The Student and the Parents agree to defend, indemnify and hold harmless the Released Parties from any and all claims, lawsuits or demands made by anyone arising from or relating to the Student's involvement with the Trip, except for negligence caused solely by a Released Party or the reckless, wanton or intentional misconduct of a Released Party.

V. Code of Responsibility and Respect and Adherence to Standards

The Student and the Parents understand and agree that:

- By participating in the Trip, the Student is subject to the policies, rules and regulations of the District and the Tour Company, and may be subject to District disciplinary action as provided in the District's Student Handbook and applicable student discipline policies for any violations of applicable policies, rules and/or regulations.
- The Student will be subject to the laws, rules and regulations of the location where the

Student is traveling and those laws may be substantially and materially different from those in Connecticut.

- While participating in the Trip, the Student will comply with the Expectations and Code of Responsibility and Respect attached as Appendix A, and will not engage in inappropriate conduct, including but not limited to the use of physical or verbal threats or violence or unauthorized absences from scheduled Trip activities.
- Consumption, use or possession of illegal drugs or alcohol will not be tolerated.
- The Student will obey all directives issued by the District, the Trip Leader(s), any associated organizations.

VI. Financial Obligations

The Student and the Parents agree:

- to pay any money owed to cover any costs and fees relating to the Trip (for travel, accommodations, cultural visits and the like) by the date specified;
- to pay any additional costs that may be incurred relating to the termination of the Student's participation in the Trip, as explained in Appendix A and Section VIII below; and
- to abide by the Tour Company's and/or the District's Refund Policies, which are attached as Appendix B.

VII. Participation and Trip Modification

The Student and the Parents understand and agree that:

- The District and/or Tour Company reserve the right to cancel or modify the Trip at any time for any reason, including but not limited to emergencies, low enrollment, change in conditions, and unavailability of facilities and/or personnel.
- Absent express permission from the Trip Leader(s), the Student will attend and participate in all scheduled Trip activities and will adhere to the Trip schedule as set by the District and/or the Tour Company.
- Failure of the Student to attend and participate in all scheduled Trip activities may result in increased risk for all of the participants and the District, and may result in disciplinary consequences in accordance with the Expectations and Code of Responsibility and Respect

VIII. Termination of Participation

The Student and the Parents understand and agree that:

- In its sole discretion, the District may terminate the Student's involvement with the Trip

at any time, including before departure or during the Trip. Reasons for termination may include, but are not limited to, inappropriate conduct or other behavior by the Student deemed detrimental to the best interests of the Trip and violations of this Agreement, including (but not limited to) the Expectations and Code of Responsibility and Respect, the Expectations and Protocols related to emergencies, or health or safety conditions or considerations.

- If the Student's conduct or health should cause him/her to be removed from the Trip, the Participant and the Parents or legal guardians will bear the costs of return transportation. Such termination shall not diminish or otherwise alter the Student's obligation to make any payment required for the Trip, and the District shall not be required to make any refund.

IX. Activities Outside the Trip's Itinerary

The District strongly advises against voluntarily withdrawing the Student early from the Trip and thereby causing the Student to travel separately from Trip participants and chaperones. Such early withdrawal of the Student from the Trip by the Parents and/or the Student presents risks to the Student personally and to his/her property, some of which may result in serious personal injury or death. Notwithstanding the foregoing, should the Student choose to, or should the Parents cause the Student to, remain at the Trip location or elsewhere after the Trip ends, or should the Student leave the Trip voluntarily or involuntarily, the Student will cease to be involved in the Trip; the Parents will be fully responsible for the Student thereafter; and the District will not be responsible for supervising the Student in any respect, or for any injury, loss, or damage to the Student's person or property.

X. Severability

It is understood and agreed that, if any provision or term of this Agreement or the application thereof is held invalid, the invalidity shall not affect other provisions, terms or applications of this Agreement which can be given effect without the invalid provisions, terms or applications. To this end, the provisions and terms of this Agreement are declared severable.

XI. Governing Law; Venue

This release shall be construed in accordance with, and governed by, the laws of the State of Connecticut. The parties agree that the venue for any dispute arising under this Agreement shall be in any Connecticut court of competent jurisdiction.

XII. Construction and Scope of Agreement

The language of all parts of this Agreement shall in all cases be construed as a whole, according to its fair meaning, and not strictly for or against any party. This Agreement, which includes the entire Travel Packet, including the permission slips and medical forms provided on **DATE TO BE DETERMINED**, is the entire and complete agreement of the parties relating in any way to the subject matter hereof. This Agreement supersedes any earlier written or oral understandings or agreements between the parties.

Student signature Date

Parent/Legal Guardian signature Date

Parent/Legal Guardian signature Date

New Fairfield Board of Education

Signature Date
Superintendent of Schools

Print Name

Title

APPENDIX A

Expectations and Code of Responsibility and Respect

The New Fairfield Board of Education wishes to insure that the Trip is a great one for everyone involved. With large groups, order is important. Rules are necessary to guarantee your safety and the success of the Trip. Please understand that the expectations listed below are important and are for everyone to follow. As this is a District-sponsored trip, all participants are expected to conduct themselves with the maturity, respect, and dignity that are expected of a student in the District. Each participant is an ambassador for the District and the reputation you create by your behavior, actions, and performance directly reflects on the entire school community.

1. All students will be expected to follow behavior guidelines and requirements as set forth in the [New Fairfield High School Student Handbook](#).
2. The use of any alcoholic beverages, drug substances, or any type of tobacco is not permitted.
3. Students will follow the directives of all chaperones that have been appointed for the Trip.
4. Involvement in any misconduct during the Trip that violates local or federal law, where such conduct or the likelihood of engaging in such conduct poses a clear and present danger to the health, welfare or safety of other students or chaperones, will result in disciplinary action, Chaperones cannot intervene on behalf of any student who might be arrested for shoplifting, vandalism, disturbing the peace, etc. Such an event would jeopardize the success of the Trip and the possibility of any future trips hereafter.
5. Leaving assigned areas without prior consent from a chaperone will not be permitted.
6. Students will be responsible for their own belongings, including luggage, electronic devices, and passports.
7. Do not use hotel phones or make any additional room purchases.
8. Students will be on time on all occasions, respecting the group timeline of the Trip.
9. Students are not permitted to leave hotel rooms after curfew. Disciplinary action will be taken.
10. Students will be expected to have spending money and money for meals/snacks as requested on the Trip.
11. All students are expected to travel in groups of three or more at all times.

If infractions occur during the Trip, it will be at the discretion of the chaperones and/or District administrators what action will be taken during the Trip, including but not limited to the following: (1) limited free time; and/or (2) students will be sent home early at parent's or legal guardian's expense. Students may also face disciplinary action upon return to New Fairfield High School after the Trip.

I have read the above rules and regulations. I agree to the consequences in the event a problem with my child arises. I understand that I will be required to provide transportation for my child to return home, if it is deemed necessary by the chaperone(s) and/or the District's administration.

Parent's Signature: _____ **Date:** _____

I have read the above rules and regulations and I agree to abide by them. I also understand that, in the event of my misconduct, I will be sent home at my parent's or legal guardian's expense.

Student's Signature: _____ **Date:** _____

APPENDIX B

Refund Policies

Cancellation Penalties

For this trip, the goal is to have 20 or fewer Participants. Participants and families are given all relevant information and sign booking conditions with Education First that outline cancellation policies and behaviors that may result in disciplinary action, including participants being sent home at the parent's expense, at time of purchase.

Education First provides the tour, which includes an insurance package through the provider Broadspire. The Global Travel Protection package is included in the tour price. Should a traveler need to cancel a trip due to reasons specified in the plan, this reimburses non-refundable pre-paid payments. (limited and predefined reasons usually include hospitalization, job loss). Upgrades are available:

COVERAGE	GLOBAL TRAVEL PROTECTION	GLOBAL TRAVEL PROTECTION FLEX	GLOBAL TRAVEL PROTECTION PLUS
Program cancellation	Limited and pre-defined reasons	Any reason up to 60 days prior to departure	Any reason up to 24 hours prior to departure
Program interruption	✓	✓	✓
Illness & accident	✓	✓	✓
Baggage & property	✓	✓	✓
Flight delay	✓	✓	✓
Emergency evacuation	✓	✓	✓
Baggage tracking service	X	✓	✓

Emergency Medical

Included in tour price when a traveler requires medical assistance

Regular Cancellation

EF's Standard Cancellation Policy*

- 360 days or more prior to departure: Full refund less the \$95 non-refundable enrollment fee, all Non-Refundable Fees, and a \$100 cancellation fee.
- 359 to 180 days prior to departure: Full refund less the \$95 non-refundable enrollment fee, all Non-Refundable Fees, and a \$300 cancellation fee.
- 179 to 110 days prior to departure: Full refund less the \$95 non-refundable enrollment fee, all Non-Refundable Fees, and a \$500 cancellation fee.
- 109 to 60 days prior to departure: Full refund less the \$95 non-refundable enrollment fee, all Non-Refundable Fees, and 50% of the program price.
- 59 days or less prior to departure: No refund will be issued.

Travelers purchase a Global Travel Protection plan and receive two options to cancel the trip due to reasons not covered by the insurance underwritten by United States Fire Insurance Company: (i) travelers who cancel 360 days or more prior to departure will have the cost of the plan refunded and the \$100 cancellation fee waived; (ii) travelers who cancel 60 days or more prior to departure may rebook to another EF Educational Tour within 30 days of such cancellation.

CFAR coverage (Cancel for Any Reason): Requires Global Travel Protection Flex or Plus Plan

Examples include fear of travel, change in destination entry requirements, schedule conflicts; participants would be eligible for a 100% refund of their claim less the non-refundable fees. Cancellation must occur at least 60 days prior to departure for the Flex Plan, or 24-hours prior to departure for the Plus Plan.

Enrollment deadline must occur at least 110-days prior to departure.

The insurance company will be the sole determiner of eligible refund. Policy questions and what if situations should be directed to the insurance company:

Provider Name	Broadspire
Distributor Name	Risk Strategies Travel
Phone Number for Questions	877-314-1193
Booking Contact	insurance@riskstrategiestravel.com

Peace of Mind Program The Peace of Mind program allows schools to change their plans due to unforeseen circumstances. This program is automatically included for all travelers and can be enacted at the group level for any reason, including terrorism, pandemics, or other world events.

If 60 days or more prior to departure, groups can (1) work with EF to modify the current tour itinerary and dates, or find a new tour and apply all money paid to the new tour; (2) cancel the tour and all travelers receive a Future Travel Voucher in the amount of all monies paid for the original tour, less the cost of any purchased travel protection plan; or (3) cancel the tour with applicable fees under the standard cancellation policy.

Cancellation of the Entire Group

If 59 days or less prior to departure, groups can work with EF to discuss options. If any location(s) included in the group's itinerary is newly designated as a Travel Advisory Level 4 by the U.S. Department of State; or a U.S federal or state government has newly imposed a travel ban to your destination, or newly issues an order requiring a self-quarantine for travelers upon arrival to a location on your itinerary or upon return home from a location on your group's itinerary; the Group Leader or the individual traveler may choose not to depart on the tour as scheduled and will have the same Peace of Mind options set forth above.