Hickman County Board of Education

	Descriptor Term: **Promoting Student Welfare**	Descriptor Code: **6.400**	Issued Date: **05/03/21**
		Rescinds: **6.400**	Issued: **04/05/21**

The Director of Schools shall develop procedures to promote and protect the health and welfare of students. These should provide, at a minimum, for the following:[1]

1. Student guidance services;
2. School health services;
3. School psychological services; and
4. School social work services.

The development of these programs and the scope of the services provided shall be consistent with state law.

Cross References

Acquired Immune Deficiency Syndrome 5.401
Attendance 6.200
Drug-Free Schools 6.307
Physical Examinations and Immunizations 6.402
Student Communicable Diseases 6.403
Acquired Immune Deficiency Syndrome 6.404
Medicines 6.405
Reporting Child Abuse 6.409
Student Suicide Prevention 6.415

Hickman County Board of Education

	Descriptor Term:	Descriptor Code:	Issued Date:
	Student Surveys, Analyses, and Evaluations	**6.4001**	**04/05/21**
		Rescinds: **6.4001**	Issued: **12/03/18**

Surveys, analyses, and evaluations for research purposes shall be allowed by the Board when the project is viewed as contributory to a greater understanding of the teaching-learning process, the project does not violate the goals of the Board, and the disruption of the regular school program is minimal. The director of schools shall develop administrative procedures for approving requests for conducting surveys, analyses, or evaluations by agencies, organizations or individuals. The requests shall outline what is to be done, who is to be involved and how the results will be used and distributed.[1]

Prior to the dissemination of a survey, analysis, or evaluation to students, parents/guardians shall be notified of their ability to review the materials. Such notification shall include information indicating the purpose of the survey, analysis, or evaluation as well as who will have access to the results. Following such notification and prior to the administration of the survey, analysis, or evaluation, parents/guardians may opt their child out of participation.

The director of schools shall develop procedures for granting such parental requests and to implement the other provisions of this policy.[1]

No student shall be required, as part of any program, to submit to a survey, analysis or evaluation that reveals information concerning: [1,2]

1. mental or psychological problems of the student or the student's family;
2. sexual behavior or attitudes;
3. illegal, anti-social, self-incriminating, or demeaning behavior;
4. critical appraisals of other individuals with whom respondents have close family relationships;
5. legally privileged relationships;
6. income; or
7. the collection of student biometric data involving the analysis of facial expressions, EEG brain wave patterns, skin conductance, galvanic skin response, heart-rate variability, pulse, blood volume, posture, and eye-tracking[3]

without the prior consent of the student (if the student is an adult or emancipated minor), or in the case of an unemancipated minor, without the prior written consent of the parent.[5]

The collection of the following student data is strictly prohibited:[4]

1. political affiliation or voting history;
2. religious practices; and
3. firearm ownership.

COLLECTING, DISCLOSING OR USING INFORMATION FOR MARKETING[5]

In general, the district will not collect, disclose or use personal student information for the purpose of marketing or selling that information or otherwise providing that information to others for that purpose.

If any collected information is to be marketed or sold, parents will be directly notified at least annually at the beginning of the school year of the specific or approximate dates when such information will be collected. Parents, upon request, may inspect any instrument used to collect personal information for the purpose of marketing or selling that information before the instrument is administered or distributed to the student. All parents and students of appropriate age may decline to provide the information requested.

This portion of the policy does not apply to the collection, disclosure or use of personal information collected from students for the exclusive purpose of developing, evaluating or providing educational products or services for or to students or educational institutions to the extent allowed by law, such as the following: [4]

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

Legal References

1. TCA 49-2-211
2. 20 USCA § 1232h
3. TCA 49-1-706
4. TCA 49-1-705
5. 20 USCA § 1232h(c)(1); 20 USCA § 1232h(c)(4)

Cross References

Testing Programs 4.700

Hickman County Board of Education

	Descriptor Term: **Physical Examinations and Immunizations**	Descriptor Code: **6.402**	Issued Date: **08/02/21**
		Rescinds: **6.402**	Issued: **05/03/21**

PHYSICAL EXAMINATIONS[1]

The principal shall ensure that there is a complete physical examination of each student prior to:[2]

1. Entering school for the first time. This applies to kindergarten, first grade and other students for whom there is no health record; and

2. Participation as a member of any athletic team or in any other strenuous physical activity program.

Cost of the examination shall be borne by the parent or guardian of the student. These records shall be on file in the principal's office.

Screening tests for vision, hearing, scoliosis and lice will be conducted. Parents/Guardians will receive written notice of any screening result that indicates a condition that might interfere or tend to interfere with a student's progress.

In general, the school district will not conduct physical examinations of a student without parental consent to do so or by court order, unless the health or safety of the student or others is in question.[3]

IMMUNIZATIONS

No students entering school, including those entering kindergarten or first grade, those from out-of-state and those from nonpublic schools, will be permitted to enroll (or attend) without proof of immunization, as determined by the Commissioner of Public Health. It is the responsibility of the parents or guardians to have their children immunized and to provide such proof to the principal of the school which the student is to attend.[4]

Exceptions will be granted to any student whose parent/guardian files with school authorities a signed, written statement that such measures conflict with the one of the following:

1. His/her religious tenets and practices if in the absence of an epidemic or immediate threat of an epidemic, except in the event of a COVID-19 or any variant outbreak;[5] or
2. Due to medical reasons if the student has a written statement from his/her doctor excusing him/her from the immunization.[6]

Proof of exceptions will be in writing and filed in the same manner as other immunization records.

The Director of Schools shall ensure that appropriate immunization records are maintained for each student.

A list of transfer students shall be kept at each school throughout the school year in order that their records can be monitored by the Department of Health and Environment.

Legal References

1. 20 USCA § 1232h(c)
2. TRR/MS 0520-01-13-.01(1)(a)
3. Tennessee School Health Screening Guidelines, https://www.tn.gov/content/dam/tn/education/esh/esh_school_health_screening_guidelines.pdf; 20 USCA § 1232h(c)(2)(C)
4. TCA 49-6-5001(a),(c)
5. TCA 49-6-5001(b)(2); Public Acts of 2021, Chapter No. 513
6. TCA 49-6-5001(c)(2)

Cross References

Promoting Student Welfare 6.400

Hickman County Board of Education

	Descriptor Term: **Student Communicable Diseases**	Descriptor Code: **6.403**	Issued Date: **12/03/18**
		Rescinds: **6.403**	Issued: **08/02/99**

No student will be denied an education solely because of a communicable disease, and his/her educational program shall be restricted only to the extent necessary to minimize the risk of transmitting the disease.

Parents or guardians of infected students shall inform appropriate school officials of the infection so that proper precautions for the protection of other students, employees, and the infected student shall be taken.

No student with a communicable disease which may endanger the health of either himself/herself or other individuals will enter or remain in the regular school setting.[1,2] If a school principal has reason to believe a student has a communicable disease which may endanger the health of either himself/herself or other individuals in the regular school setting, the principal shall:

1. Assign the student to a setting which will protect other students, employees and the student himself; or

2. Exclude the student from school until certification is obtained from a physician or the County Health Department by either the parent or principal stating that the disease is no longer communicable.

If the principal has reason to believe that the student has a long-term communicable disease, the principal must require confirmation from a physician or the County Health Department as to the student's condition. If the student is confirmed to have a long-term communicable disease the principal shall refer the student for special education services.[1]

The principal may request that further examinations be conducted by a physician or County Health Department and may request periodic re-examinations after the student has been readmitted to the school.[2]

Expenses incurred from examinations requested by school officials shall be paid by the Board.

The names of all students excluded from school under this policy will be forwarded to the office of the director of schools.

Legal References

1. TRR/MS 0520-01-03-.08
2. TCA 49-2-203(b)(2)

Cross References

Special Education 4.202
Homebound Instruction 4.206

Hickman County Board of Education

	Descriptor Term: **Pediculosis (Head Lice)**	Descriptor Code: **6.4031**	Issued Date: **04/05/21**
		Rescinds: **6.4031**	Issued: **12/03/18**

No student shall be denied an education solely by reason of Pediculosis (head lice) and his/her educational program shall be restricted only to the extent necessary to minimize the risk of transmitting the infestation.

It shall be the responsibility of the principal, school nurse, or designee to notify the parents in the event a child has head lice. A letter shall be sent home to explain the condition, requirements for readmission, and deadlines for satisfactory completion of the treatment.

Prior to readmission, satisfactory evidence must be submitted to school personnel that the student has been treated for head lice. Evidence may include but not be limited to:

(1) Proof of treatment with a pediculicide product (head lice shampoo) or
(2) Satisfactory examination by a principal, school nurse, or designee.

Treatment and prevention procedures shall be developed by the director of schools in consultation with Coordinated School Health and distributed to all classroom teachers. Prevention procedures include students re-entering school will be re-screened for live lice in 7-10 days.

Any subsequent incidences of head lice for a student during the school year shall require submission of satisfactory evidence of treatment for head lice and be found free of lice by a school health official.

A student shall be expected to have met all requirements for treatment and return to school. A student will be allowed a total of four excused absences for treatment of lice at any given time during the school year. Any days in excess of this will be unexcused.

Hickman County Board of Education

	Descriptor Term: **Bed Bugs**	Descriptor Code: **6.4032**	Issued Date: **04/05/21**
		Rescinds: **6.4032**	Issued: **12/03/18**

In those situations when a bed bug is found on a student or the student's belongings, it will be the goal of the school system to assist the student and to prevent transmission of bed bugs to the school and other students. While undertaking these goals, it is the further goal of the school system to restrict the affected student's educational program only to the extent necessary to minimize the risk of transmitting a bed bug infestation.

It shall be the responsibility of the principal, school nurse, or designee to notify the parents or guardians in the event a bed bug has been found on a student or their belongings. A letter shall be sent home to explain the condition, that the student will be excluded from school until the requirements for readmission have been met, and deadlines for satisfactory completion of any required treatment. Readmission of the student to school will be conditioned upon a satisfactory examination by a school health official and if circumstances deem such necessary proof of treatment by a professional pest management service.

A student shall be expected to have met all requirements for readmission and return to school no later than 7 days following exclusion for bed bugs. All days in excess of the 7 day allowable period shall be marked as unexcused absences and referred to the attendance supervisor.

Procedures for the school system's prevention of bed bug infestations, the response to the sighting of a bed bug, and of any necessary treatment of school facilities in the event of a bed bug infestation shall be developed by the director of schools in consultation with the school system's Coordinated School Health Office.

Hickman County Board of Education

	Descriptor Term: Acquired Immune Deficiency Syndrome	Descriptor Code: 6.404	Issued Date: 04/05/21
		Rescinds: 6.404	Issued: 12/03/18

LIABILITY AND NON-DISCRIMINATION

Students infected with HIV shall not be denied enrollment in school. The Board shall not prevent an HIV infected student from participating in the continuation of his/her education on the basis of HIV infection. Further, the student shall be subject to the same rules for class assignment, privileges and participation in any school-sponsored activities as all other students. The Board shall strive to maintain a respectful school climate for HIV infected students.

Mandatory screening for communicable diseases not spread by casual everyday contact, such as HIV infection, shall not be a condition for school entry or attendance.[1]

ATHLETICS

A student who is HIV positive may not be denied the opportunity to participate in school athletic programs based solely on his/her HIV status. All reasonable accommodations shall be made to allow students with HIV to participate in school-sponsored physical activities.[1]

ADMINISTRATIVE RESPONSIBILITIES FOR CONFIDENTIALITY

If a student's parents/guardians choose to disclose the child's HIV status, all matters pertaining to that student will be directed by procedures initiated by the director of schools.

The director of schools shall be responsible for requesting medical records from the parent/guardian and a statement from the student's physician regarding health status of the student reported to have HIV/AIDS. In addition, the director of schools will gather information regarding the student's cumulative school record.

CONFIDENTIALITY

No information concerning an HIV infected student shall be divulged, directly or indirectly, to any other individual or group without the written consent of the parent/guardian. All medical information and written documentation of discussions, telephone conversations, proceedings and meetings shall be kept by the director of schools in a locked file. If the HIV infected student is under the age of eighteen (18), access to this file will be granted only to those persons who have the written consent of the infected student's parents/guardians.

Under no circumstances shall information identifying a student with AIDS be released to the public.[2, 3]

APPROPRIATE ALTERNATIVE EDUCATION PROGRAMS

In determining the educational placement of a student known to be infected with HIV, school authorities shall follow established policies and procedures for students with disabilities. School authorities shall reassess placement if there is a change in the student's need for accommodations or services.

HIV PREVENTION EDUCATION/CURRICULUM[5]

The director of schools shall be responsible for developing instructional objectives to address each terminal objective in the state AIDS curriculum framework and provide each teacher responsible for teaching AIDS education with these objectives. Students shall further be taught universal precautions through the K-8 Healthful Living and Lifetime Wellness curricula and through the Board's HIV prevention education program.

The state AIDS curriculum and related instructional objectives will be used in grades K-12. Parents and guardians shall have convenient opportunities to preview all HIV prevention curricula and materials in accordance with the provisions of the Family Education Law of 1989.

Students shall have access to voluntary and confidential counseling about matters related to HIV. Administrators shall maintain a list of counseling and testing resources for student use.

INFECTION CONTROL

The director of schools shall develop an Occupational Safety and Health Administration (OSHA)-based infection control plan in which each school will provide for: 1) well-maintained and easily accessible materials necessary to follow universal precautions, and 2) designate first responders responsible for implementing infection control guidelines, including investigating, correcting, and reporting on instances of exposure. All schools shall further follow the most current Centers for Disease Control and Prevention (CDC) Universal Precautions for Prevention of Transmission of Human Immunodeficiency Virus, Hepatitis B Virus, and Other Blood borne Pathogens in Health Care Settings and the OSHA blood borne pathogens standard.[4]

Legal References

1. TRR/MS 0502-01-03-.08
2. TCA 68-10-113
3. 20 USCA § 1232g; 34 CFR § 300.622, 623
4. TRR/MS 0520-01-03-.05(1)(c)
5. State Board of Education Policy 5.300

Cross References

Section 504 & ADA Grievance Procedures 1.802
Special Education 4.202
Homebound Instruction 4.206
Student Records 6.600

Hickman County Board of Education

	Descriptor Term: **Medicines**	Descriptor Code: **6.405**	Issued Date: **04/05/21**
		Rescinds: **6.405**	Issued: **01/04/21**

If under exceptional circumstances a child is required to take non-prescription or prescription medication during school hours and the parent/guardian cannot be at school to administer the medication, only the principal or the principal's designee will assist in self-administration of the medication if the student is competent to self-administer medicine with assistance in compliance with the following regulations: [1]

Written instructions signed by the parent will be required and will include:

1. Child's name;
2. Name of medication;
3. Name of physician;
4. Time to be self-administered;
5. Dosage and directions for self-administration (non-prescription medicines must have label direction);
6. Possible side effects, if known; and
7. Termination date for self-administration of the medication.

Students with asthma shall be permitted to self-administer prescribed, metered dosage asthma-reliever inhalers if the additional information is provided by a parent/guardian:

1. Written statement from the prescribing health care practitioner that the student suffers from asthma and has been instructed in self-administration; and

2. Purpose of the medication.

The medication shall be delivered to the principal's office in person by the parent/guardian of the student unless the medication shall be retained by the student for immediate self-administration.

The medication must be delivered to the principal's office in person by the parent/guardian or their designee of the student unless the medication must be retained by the student for immediate self-administration (i.e. students with asthma), in which case a doctor's order is required to be on file at the school.

Volunteer personnel, trained by a registered nurse, may administer emergency medication to a student based on that student's Individual Health Plan (IHP) or a physician's standing order. A call to 911 will be made in the event of these emergencies.

The administrator/designee will:

1. Inform appropriate school personnel of the medication to be self-administered;
2. Keep written instructions from parent in student's record;
3. Keep an accurate record of the self-administration of the medication;
4. Keep all medication in a locked cabinet except medication retained by a student per physician's order;
5. Return unused prescription to the parent or guardian only; and
6. Ensure that all guidelines developed by the Department of Health and the Department of Education are followed.

The parent or guardian is responsible for informing the designated official of any change in the student's health or change in medication.

A copy of this policy shall be provided to a parent or guardian upon receipt of a request for long-term administration of medication.

TRANSPORTATION OF MEDICATIONS ON SCHOOLS BUSES

In an effort to ensure the safety and well-being of all students, no medications except inhalers or other medications which a physician has indicated in writing should be kept on a student's person, may be transported on school buses. Parents must make arrangements for delivery of medications to the school that their child attends.

In the event that medication is sent to school on a bus in violation of this policy, the following procedure will be utilized:

1. *First Non-Compliance Incident*

   Parents will be contacted by phone or letter. A copy of this policy will be attached to the letter.

2. *Second Non-Compliance Incident*

   A referral will be made to the Juvenile Court of Hickman County and/or the Department of Children's Services for disposition of the matter.

DISPOSAL OF MEDICATIONS

Notification will be provided by phone call or notes sent home to parents one week prior to the end of the school year that unused medication is remaining at school.

If a parent/guardian or their designee does not pick up remaining medication, disposal will occur at the end of the school year by transporting to the Hickman County Sheriff's Department to be disposed of properly through the Community Drug Take Back Program. Two school personnel shall be present at disposal. Appropriate school personnel will be trained annually in disposal procedures. Documentation shall occur regarding disposal of all medications.

BLOOD GLUCOSE SELF-CHECKS[2]

Upon written request of a parent or guardian, and if included in the student's medical management plan and in the IHP, a student with diabetes shall be permitted to perform a blood glucose check or administer insulin using any necessary diabetes monitoring and treatment supplies, including sharps. The student shall be permitted to perform the testing in any area of the school or school grounds at any time necessary. The student will report the use of the monitoring or treatment supplies to school employee for proper disposal.

Sharps shall be stored in a secure, but accessible location, including the student's person, until use of such sharps is appropriate.

Use and disposal of sharps shall be in compliance with the guidelines set forth by the Tennessee Occupational Safety and Health Administration (TOSHA).

STUDENTS WITH PANCREATIC INSUFFICIENCY OR CYSTIC FIBROSIS[3]

Students diagnosed with pancreatic insufficiency or cystic fibrosis shall be permitted to carry and self-administer their prescribed medication in a manner directed by a licensed healthcare provider without additional assistance or direction. The Director of Schools shall develop procedures for the development of both an Individualized Healthcare Plan (IHP) and an Emergency Care Plan (ECP) that conforms to state law for every student with pancreatic insufficiency or cystic fibrosis that wishes to self-medicate.

STUDENTS WITH ADRENAL INSUFFICIENCY[4]

The parent/guardian of a student diagnosed with adrenal insufficiency shall notify the school district of the student's diagnosis. Once notified, the district shall observe the following procedure:

1. The district shall train school personnel who will be responsible for administering the medication for the treatment of adrenal insufficiency and any who volunteer to administer the medication.

2. The district shall maintain a record of all school personnel who have completed this training.

3. If a student is suffering from an adrenal crisis, a school nurse or other licensed health care professional may administer the prescribed medication to the student. If a school nurse or other licensed health care professional is not immediately available, trained school personnel may administer the prescribed medication.

The director of schools shall develop procedures on the administration of medications that treat adrenal insufficiency and recordkeeping per rules set forth by the State Board of Education.

Legal References

1. TCA 49-50-1602
2. TCA 49-50-1602(d)(7)
3. TCA 49-50-1601; State Board of Education Policy 4.205
4. TRR/MS 0520-01-12; State Board of Education Policy 4.205

Cross References

Emergency Allergy Response Plan 6.412

Hickman County Board of Education

	Descriptor Term: **Emergency Medication**	Descriptor Code: **6.4051**	Issued Date: **04/05/21**
		Rescinds: **6.4051**	Issued: **12/03/18**

This policy addresses those instances when students need to receive medication in an emergency situation. Board Policy 6.405 addresses instances wherein students take medicine during the school day in non-emergency situations.

School personnel, who volunteer, under no duress or pressure and have been properly trained by a registered nurse, are permitted to administer glucagon in emergency situation to a student based on physician's order and/or the student's Individual Health Plan (IHP). If the school nurse is on site, the nurse shall provide the service to the student.[1]

The school nurse shall be responsible for updating and maintaining each IHP. There must be a parent/guardian signature on file giving permission prior to training school personnel to administer glucagon.

Following are specifics relating to glucagon and diazepam. Volunteer personnel, trained by a registered nurse, may administer emergency medication to a student based on that student's Individual Health Plan (IHP) or a physician's standing order. A call to 911 will be made in the event of these emergencies.

DEFINITION OF GLUAGON

Glucagon is a hormone that helps the liver release sugar, thus increasing the level of sugar in the blood. It must be injected with a syringe into the body like insulin.

WHEN TO USE GLUCAGON

Glucagon is administered when the student has low blood sugar and is unable to take liquid or food by mouth because of unconsciousness or seizure activity as per a medical provider's written instructions.

TRAINING

1. Review physicians' orders for glucagon and parent/guardian permission on file.
2. The volunteer must complete an initial in-depth diabetes-related training recognizing signs and symptoms of hypoglycemia and respond with student-specific interventions.
3. The volunteer trainee must be able to state glucagon's action and the need for its use.
4. The volunteer trainee must be able to state how glucagon should be prepared, the dosage, and side effects as well as follow-up care after the administration of glucagon.

5. The volunteer trainee must be able to identify where glucagon will be stored (must be kept in a secure location away from heat and direct light) and readily available to the student.

6. The volunteer trainee will notify or delegate notification of EMS/911 personnel, parents/guardian, and the school nurse any time glucagon is administered to any student.

7. The volunteer trainee must document observations, administration of glucagon, and follow-up care on the appropriate diabetic and medication forms.

8. Training will be provided until competency is demonstrated, and retraining shall be completed on a yearly basis. Training will be documented and include a skills checklist, instructor's name, trainee's name, date of training, and documentation of competency of trainee to administer glucagon. A copy of the trainee's competency training form will be kept in the employee's personnel file.

DEFINITION OF DIAZEPAM (DIASTAT)

Diastat works to stop seizure activity by acting on brain cell interactions that inhibit the seizure discharges. This special formulation of diazepam is administered rectally as a gel.

School personnel who volunteer under no duress or pressure and who have been properly trained by a registered nurse or employed or contracted by the Hickman County School System may administer anti-seizure medication, including diazepam gel to a student in an emergency situation based on the student's IHP. If the school nurse is available, on site, and able to reach the student within the time limit for administration specified in the IHP, then the school nurse shall provide this service to the student.

WHEN TO USE DIASTAT

Upon the decision of a trained volunteer to administer diazepam gel (Diastat), school officials shall immediately summon local emergency medical services to the school to provide necessary monitoring of transport to safeguard the health and condition of the student.

Trained volunteer school personnel administering anti-seizure medications, any registered nurse who provides training to administer such medications, and any local board of education shall not be liable in any court of law for injury resulting from the reasonable and prudent assistance in the administration of such medications, if performed pursuant to the policies and guidelines developed by the departments of health and education and approved by applicable regulatory or governing boards or agencies.

The Hickman County School System shall not assign a student with epilepsy or other seizure disorder to a school other than the school for which the student is zoned or would otherwise regularly attend because the student has a seizure disorder.

A student's parent/guardian, who has given the student's school written authorization to administer anti-seizure medication, shall, in accordance with the student's IHP, notify the school administrator or school nurse if anti-seizure medication or prescription over-the-counter medicines are administered at a

time at which the student is not present in school. The student's IHP shall set forth with specificity the requirements of reporting administration of medication and for the dissemination of such information to volunteer school personnel trained to administer anti-seizure medication. Such notification shall be given after administration of medication before or at the beginning of the next school day in which the student is in attendance.

TRAINING

Prior to administration of an anti-seizure medication to a student by volunteer school personnel or a school nurse in an emergency situation, the student's parent/guardian shall provide:

1. The school with a written authorization to administer the medication at school;

2. A written statement from the student's health care practitioner, which shall contain the student's name, the name and purpose of the medication, the prescribed dosage, the route of administration, the frequency that the medication may be administered, and the circumstances under which the medication may be administered;

3. Prior to its date of expiration, the prescribed medication to the school is in its unopened, sealed package with the intact label affixed by the dispensing pharmacy.

EMERGENCY ALLERGY RESPONSE PLAN

The director of schools shall develop and maintain an Emergency Allergy Response Plan that meets state guidelines for managing students with life-threatening allergies. The Plan shall include measures to reduce exposure to allergens and procedures to treat allergic reactions. Components of the plan shall include, but are not limited to: education and training of personnel, record keeping/documentation, development and reviews of the allergy action plan, and protocols for classrooms and cafeterias that include strategies to reduce exposure to allergens.[2]

Using the state food allergy guidelines plan as a guide, the direction shall also develop a process to identify all students with food allergies and develop and implement an Individualized Health Care Plan (IHCP) with an Allergy Action Plan for each specific student.[3]

Legal References

1. TCA 49-50-1602(g)(1)
2. TCA 49-50-1602(f)
3. *Guidelines for Use of Health Care Professionals and Health Care Procedures in a School Setting, including Guidelines for Managing Life Threatening Food Allergies in Tennessee Schools* (Tennessee Department of Education and Tennessee Department of Health, 2014)

Cross References

Medicines 6.405

Hickman County Board of Education

	Descriptor Term:	Descriptor Code:	Issued Date:
	Supervision of Students	**6.408**	**04/05/21**
		Rescinds: **6.408**	Issued: **12/03/18**

Students will be under the supervision of school personnel, either certificated or non-certificated,[1] at all times, including play periods and lunch periods, as well as during the school day and during extracurricular activities.

The principal shall assign students to school personnel and ensure proper supervision.

Legal References

1. TCA 49-2-303(b)(7)

Cross References

Staff Time Schedules 5.602

Hickman County Board of Education

Monitoring:	Descriptor Term:	Descriptor Code:	Issued Date:
Review: Annually, in April	**Safe Relocation of Students**	**6.4081**	**12/07/21**
		Rescinds: **6.4081**	Issued: **04/05/21**

Teachers who are directly responsible for a student's education or other employees who interact with students on a professional basis may relocate a student from the student's present location to another location when such relocation is necessary for the student's safety or the safety of others.[1] If relocation is necessary, the process will comply with all special education laws. Such employees may also intervene in a physical altercation between two (2) or more students or between a student and a district employee. Reasonable or justifiable force may be used to physically relocate or intervene in a conflict if a student is unwilling to cooperate.[2] If an employee is unable to resolve the matter with the use of reasonable or justifiable force, the student shall be allowed to remain in place until local law enforcement officers or school resource officers can be summoned to relocate the student or take the student into custody until a parent/guardian can retrieve the student.

In the event that physical relocation becomes necessary, the employee shall immediately file a brief report of the incident with the principal. If the student's behavior constitutes a violation of the Board's zero tolerance policy, the report shall be placed in the student's permanent record. Otherwise, the report shall be kept in the student's discipline record and not become a part of that student's permanent record. The principal/designee shall notify the employee involved of the actions taken to address the behavior of the relocated student.[1]

The Director of Schools shall develop administrative procedures regarding the safe relocation of students consistent with state law. Each principal shall fully support the employees' authority to relocate a student and ensure appropriate implementation and reporting.

Legal References

1. Public Acts of 2021, Chapter No. 77
2. TCA 39-11-603; TCA 39-11-609 to 614

Cross References

Code of Conduct 6.300
Interference/Disruption of School Activities 6.306
Zero Tolerance Offenses 6.309
Special Education Students 6.500