

Trumbull Public Schools
Trumbull, Connecticut
Trumbull Board of Education Policy Committee
Regular Meeting – November 18, 2015
Long Hill Administration Building

The Trumbull Board of Education convened in the Long Hill Administration Building for a Regular Meeting.

Members present:

Rosemary Seaman, Chair, BOE member
Loretta Chory, BOE member
Dr. Jonathan Budd, Central Office Admin.
Patricia Frillici, TAA Rep.
Kristine Kelty Murano, Parent Rep.
Cindy Katske, Community Rep.

Members absent:

Susan LaFrance, BOE member
Laura McNaughton, TEA Rep.
Jennifer Mottolese, Parent Rep.
Bryan Woodward, Parent Rep.
Mary Pierson, Community Rep.

Pauline Smith, invited guest
Elaine Adams, Admin. Assistant
2 members of the public

Agenda Item I – Preliminary Business

- A. Introduction – The meeting was called to order at 5:35 p.m.
- B. Correspondence – There was no correspondence.
- C. Public Participation – There were no public comments.

Agenda Item II – Reports / Action Items

- A. Approval of Minutes – Regular Meeting, October 14, 2015 – The minutes were approved as presented.
- B. Board of Education Meeting Updates
 - a. Oct. 20, 2015 First Readings – Mrs. Seaman noted that the Board heard First Readings of the following two policies as presented at its Oct. 20, 2015, meeting, and suggested no revisions, so these policies will be returned to the Board for Second Readings in December, 2015.
 - i. Non-Discrimination in Instruction/Classroom, Policy Code 6121.4
 - ii. Health Assessments and Immunizations, Policy Code 5141.3
 - b. Oct. 20, 2015 Second Readings – Mrs. Seaman noted that the Board approved the following policy as presented at its Oct. 20, 2015, meeting.
 - i. Budget Transfer, Policy Code 3160

- c. Nov. 10, 2015 Second Readings – Mrs. Seaman noted that the Board approved the following two policies as presented at its Nov. 10, 2015, meeting.
 - i. Attendance Grades K-8, Policy Code 5113.1
 - ii. Pay to Participate, Policy Code 5138

Agenda Item III – Policy Review/Discussion

- A. ~~Concussions and Head Injuries~~, Policy Code 5141.7 – Dr. Budd presented the proposed policy in this evening’s packet. He also distributed a copy of the “Concussion Education Plan and Guidelines for Connecticut Schools” developed by the State Board of Education, a copy of which is attached to these minutes. Additional revisions to the policy were suggested. The Committee unanimously agreed to bring the policy, with the revisions, to the Board for a first reading in December, 2015.
- B. Standard of Conduct, Policy Code 5131 – Dr. Budd presented the proposed policy in this evening’s packet. He also presented the “Policy Overview Form” signed by the Superintendent and the Policy Committee Chair, a copy of which is attached to these minutes. Additional revisions to the policy were suggested. The Committee unanimously agreed to bring the policy, with the revisions, to the Board for a first reading in December, 2015.
- C. ~~Child Abuse and Neglect~~ Reporting of Child Abuse, Neglect, and Sexual Assault, Policy Code 5141.4 – Dr. Budd presented the proposed policy in this evening’s packet. He also presented the “Policy Overview Form” signed by the Superintendent and the Policy Committee Chair, a copy of which is attached to these minutes. The Committee unanimously agreed to bring the policy to the Board for a first reading in December, 2015.
- D. ~~Physical Restraint of Students with Disabilities~~ Use of Physical Force, Policy Code ~~5145.7~~ 5144.1 – Dr. Budd presented the proposed policy in this evening’s packet. Additional revisions were suggested. The Committee unanimously agreed to bring the policy to the Board for a first reading in December, 2015.
- E. Homebound and Hospitalized Instruction, Policy Code 6173 – Dr. Budd presented the proposed policy in this evening’s packet. Additional revisions were suggested. The Committee unanimously agreed to bring the policy to the Board for a first reading in December, 2015.

Adjournment

Mrs. Seaman moved to adjourn the meeting at 7:05 p.m.; it was seconded by Mrs. Chory, and unanimously agreed to. Due to scheduling constraints in December, the scheduled December 9, 2015, meeting of the Policy Committee has been cancelled; the next meeting of the Policy Committee will take place on Wednesday, January 20, 2016, at 5:30 p.m.

**Student and Parent Concussion Informed Consent Form
2015-16**

This consent form was developed to provide students and parents with current and relevant information regarding concussions and to comply with Connecticut General Statutes (C.G.S.) Chapter 163, Section 149b: *Concussions: Training courses for coaches. Education plan. Informed consent form. Development or approval by the State Board of Education* and Section 10-149c: *Student athletes and concussions. Removal from athletic activities. Notification of parent or legal guardian. Revocation of coaching permit.*

What is a Concussion?

National Athletic Trainers Association (NATA) - *A concussion is a "trauma induced alteration in mental status that may or may not involve loss of consciousness."*

Centers for Disease Control and Prevention (CDC) - *"A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way your brain normally works. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth."* -CDC, Heads Up: Concussion

http://www.cdc.gov/headsup/basics/concussion_what.html

Even a "ding," "getting your bell rung," or what seems to be mild bump or blow to the head can be serious" -CDC, Heads Up: Concussion Fact Sheet for Coaches http://www.cdc.gov/concussion/HeadsUp/pdf/Fact_Sheet_Coaches-a.pdf

Section 1. Concussion Education Plan Summary

The [Concussion Education Plan and Guidelines for Connecticut Schools](#) was approved by the Connecticut State Board of Education in January 2015. Below is an outline of the requirements of the Plan. The complete document is accessible on the CSDE Web site: <http://www.sde.ct.gov/sde/cwp/view.asp?a=2663&q=335572>

State law requires that each local and regional board of education must approve and then implement a concussion education plan by using written materials, online training or videos, or in-person training that addresses, at a minimum the following:

1. The recognition of signs or symptoms of concussion.
2. The means of obtaining proper medical treatment for a person suspected of sustaining a concussion.
3. The nature and risks of concussions, including the danger of continuing to engage in athletic activity after sustaining a concussion.
4. The proper procedures for allowing a student athlete who has sustained a concussion to return to athletic activity.
5. Current best practices in the prevention and treatment of a concussion.

Section 2. Signs and Symptoms of a Concussion: Overview

A concussion should be suspected if any one or more of the following signs or symptoms are present, or if the coach/evaluator is unsure, following an impact or suspected impact as described in the CDC definition above.

Signs of a concussion may include (i.e. what the athlete displays/looks like to an observer):

- Confusion/disorientation/irritability
- Trouble resting/getting comfortable
- Lack of concentration
- Slow response/drowsiness
- Incoherent/ slurred speech
- Slow/clumsy movements
- Loses consciousness
- Amnesia/memory problems
- Acts silly/combative/aggressive
- Repeatedly ask same questions
- Dazed appearance
- Restless/irritable
- Constant attempts to return to play
- Constant motion
- Disproportionate/inappropriate reactions
- Balance problems

Symptoms of a concussion may include (i.e. what the athlete reports):

- Headache or dizziness
- Nausea or vomiting
- Blurred or double vision
- Oversensitivity to sound/light/touch
- Ringing in ears
- Feeling foggy or groggy

State law requires that a coach MUST immediately remove a student-athlete from participating in any intramural or interscholastic athletic activity who: a) is observed to exhibit signs, symptoms or behaviors consistent with a concussion following a suspected blow to the head or body, or b) is diagnosed with a concussion, regardless of when such concussion or head injury may have occurred. **Upon removal of the athlete, a qualified school employee must notify the parent or legal guardian within 24 hours that the student athlete has exhibited signs and symptoms of a concussion.**

Section 3. Return to Play (RTP) Protocol Overview

Currently, it is impossible to accurately predict how long an individual’s concussion will last. There must be full recovery before a student-athlete is allowed to resume participating in athletic activity. Connecticut law now requires that no athlete may resume participation until they have received written medical clearance from a licensed health care professional (physician, physician assistant, advanced practice registered nurse (APRN), athletic trainer) trained in the evaluation and management of concussions.

Concussion Management Requirements:

1. No athlete SHALL return to participation in the athletic activity on the same day of concussion.
2. If there is any loss of consciousness, vomiting or seizures, the athlete MUST be immediately transported to the hospital.
3. Close observation of an athlete MUST continue following a concussion. The athlete should be monitored for an appropriate amount of time following the injury to ensure that there is no worsening/escalation of symptoms.
4. Any athlete with signs or symptoms related to a concussion MUST be evaluated by a licensed health care professional (physician, physician assistant, advanced practice registered nurse (APRN), athletic trainer) trained in the evaluation and management of concussions.
5. The athlete MUST obtain an initial written clearance from one of the licensed health care professionals identified above directing her/him into a well-defined RTP stepped protocol similar to the one outlined below. If at any time signs or symptoms return during the RTP progression, the athlete should cease activity*.
6. After the RTP protocol has been successfully administered (no longer exhibits any signs or symptoms or behaviors consistent with concussions), final written medical clearance is required by one of the licensed health care professionals identified above for the athlete to fully return to unrestricted participation in practices and competitions.

Medical Clearance RTP protocol (Recommended one full day between steps)

Rehabilitation stage	Functional exercise at each stage of rehabilitation	Objective of each stage
1. No activity	Complete physical and cognitive rest until asymptomatic. School may need to be modified.	Recovery
2. Light aerobic exercise	Walking, swimming or stationary cycling maintaining intensity ,<70% of maximal exertion; no resistance training	Increase Heart Rate
3. Sport specific exercise No contact	Skating drills in ice hockey, running drills in soccer; no head impact activities	Add Movement
4. Non-contact sport drills	Progression to more complex training drills, ie. passing drills in football and ice hockey; may start progressive resistance training	Exercise, coordination and cognitive load
5. Full contact sport drills	Following final medical clearance, participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6. Full activity	No restrictions	Return to full athletic participation

* If at any time signs or symptoms should worsen during the RTP progression the athlete should stop activity that day. If the athlete’s symptoms are gone the next day, she/he may resume the RTP progression at the last step completed in which no symptoms were present. If symptoms return and don’t resolve, the athlete should be referred back to her/his medical provider.

Section 4. Local/Regional Board of Education Policies Regarding Concussions

***** Attach local or regional board of education concussion policies *****

I have read and understand this document the “Student and Parent Concussion Informed Consent Form” and understand the severities associated with concussions and the need for immediate treatment of such injuries.

Student name: _____ Date _____ Signature _____
(Print Name)

I authorize my child to participate in _____ for school year _____
(Sport/Activity)

Parent/Guardian name: _____ Date _____ Signature _____
(Print Name)

References:

1. NFHS. Concussions. 2008 NFHS Sports Medicine Handbook (Third Edition). 2008: 77-82. <http://www.nfhs.org>. http://journals.lww.com/cisportsmed/Fulltext/2009/05000/Consensus_Statement_on_Concussion_in_Sport_3rd.1.aspx.
2. Centers for Disease Control and Prevention. Heads Up: Concussion in High School Sports. http://www.cdc.gov/NCIPC/tbi/Coaches_Tool_Kit.htm.
3. CIAC Concussion Central - <http://concussioncentral.ciacsports.com/>

Resources:

- Centers for Disease Control and Prevention. Injury Prevention & Control: Traumatic Brain Injury. Retrieved on June 16, 2010. <http://www.cdc.gov/TraumaticBrainInjury/index.html>
- Centers for Disease Control and Prevention. Heads Up: Concussion in High School Sports Guide for Coaches. Retrieved on June 16, 2014.

POLICY OVERVIEW FORM

Policy Title: Standard of Conduct

Section: 5000 Category: Students Code: 5131

New: Revision: X

Initiated by: Jonathan S. Budd, Ph.D., Director of Curriculum, Instruction, & Assessments

Phone No.: (203) 452-4336 Email: buddj@trumbullps.org

Need for New Policy/Revision: Public Act 15-96 restricts the circumstances under which the Board of Education can impose out-of-school suspensions and expulsions on students in grades preschool through grade two.

State Statute if applicable: Connecticut Public Act 15-96

Summary of Actions Required by New Policy/Revision: Revisions to the policy will conform the policy to the revised state statutes related to out-of-school suspensions and expulsions for students in grades preschool through grade two.

Please complete this form and send to the Office of the Superintendent, Trumbull Public Schools, 6254 Main Street, Trumbull, CT 06611

Office Use Only

Approval

Superintendent: *Luigi A. Gial* Date: 11/16/15

Policy Committee Chair: *Rosemary Seamon* Date: 11/18/15

POLICY OVERVIEW FORM

Policy Title: Child Abuse and Neglect Reporting of Child Abuse, Neglect, and Sexual Assault

Section: 5000 Category: Students Code: 5141.4

New: _____ Revision: X

Initiated by: Jonathan S. Budd, Ph.D., Director of Curriculum, Instruction, & Assessments

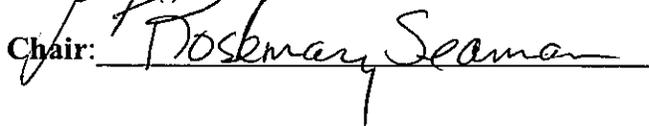
Phone No.: (203) 452-4336 Email: buddj@trumbullps.org

Need for New Policy/Revision: Since the time of this policy's last revision (2005), significant updates have occurred in statutes related to the reporting of complaints of child abuse, neglect, and sexual assault. Most recently, Public Act 15-205 extended the mandated reporter law protection to high school students over the age of 18 and not enrolled in adult education; it also requires the establishment of a district confidential rapid response team to coordinate with the Department of Children and Families, and adjusts penalties, including hiring restrictions, for individuals not compliant with mandated reporter laws.

State Statute if applicable: various; referenced in proposed Policy revision

Summary of Actions Required by New Policy/Revision: Due to the depth and extent of legislative changes, and the District's moral and ethical obligations in the reporting of suspected child abuse, neglect, and sexual assault, the proposed Policy revision adopts in its entirety the recommended language from the Connecticut Association of Boards of Education.

Please complete this form and send to the Office of the Superintendent, Trumbull Public Schools, 6254 Main Street, Trumbull, CT 06611

Office Use Only **Approval**
Superintendent:  Date: 11/16/15
Policy Committee Chair:  Date: 11/18/15