

## **Psychotropic Drug Use**

In accordance with Conn. Gen. Stat. § 10-212b, the Board of Education prohibits school personnel from recommending the use of psychotropic drugs for any student enrolled within the school system. Moreover, personnel may not require that a child obtain a prescription for a controlled substance (as defined in the Controlled Substances Act, 21 U.S.C. § 801 et seq.) in order for the child to: 1) attend school; 2) received an initial evaluation or reevaluation to determine the child's eligibility for special education; or 3) received special education and related services. Notwithstanding the foregoing, school health or mental health personnel may recommend that a child be evaluated by an appropriate medical practitioner and school personnel may consult with such practitioner with the consent of the parents or guardian of such child, in accordance with the procedures outlined below.

### **I. Definitions**

For purposes of this policy, the following definitions apply:

- A. Psychotropic drugs are defined as prescription medications for behavioral or social-emotional concerns, such as attention deficits, impulsivity, anxiety, depression and thought disorders and included but is not limited to stimulant medications and antidepressants.
- B. Recommend means to directly or indirectly suggest that a child should use psychotropic drugs.
- C. School health or mental health personnel means:
  - 1. School nurses or nurse practitioners appointed pursuant to Conn. Gen. Stat. § 10-212;
  - 2. School medical advisors appointed pursuant to Conn. Gen. Stat. § 10-205;
  - 3. School psychologists;
  - 4. School social workers;
  - 5. School counselors;
  - 6. School administrators;

7. Other school personnel (such as a teacher designated as a child's Case Manager) who have been identified by a Planning and Placement Team, Section 504 team, Student Assistance Team or similar group of district professionals as the person responsible for communication with a parent or guardian about a child's need for medical evaluation.

## II. Procedures

- A. A school health or mental health personnel, as defined above, may communicate with other school personnel about a child who may require a recommendation for a medical evaluation, provided that 1) there is a legitimate educational interest in sharing such information; and 2) such communication shall remain confidential, to the extent required by law.
- B. A school health or mental health personnel, as defined above, may communicate a recommendation to a parent or guardian that a child be evaluated by a medical practitioner provided that 1) based on such person's professional experience, objective factors indicate that a medical evaluation may be necessary to address concerns relating to the child's education and overall mental health; and 2) any communication includes the basis for the recommendation.
- C. If a parent or guardian determines that it is necessary to share medical information, including results of any medical evaluation, with school personnel who receive such information directly from a parent must maintain the confidentiality of such information, to the extent required by law.
- D. Any school personnel with a legitimate educational interest in obtaining information from a child's medical practitioner outside the school who is not a school employee must obtain prior, written consent from the child's parent or guardian to communicate with such outside medical practitioners. Any school health or mental health personnel, as defined above, may request written consent from the parent or guardian. To be valid, the written consent must: 1) be signed by the child's parent or guardian; 2) be dated; 3) provide the child's name; 4) provide the name of the medical practitioner and relevant contact information, to the extent known; and 5) indicate the scope of the consent.

Nothing in this policy shall be construed to prevent school personnel from consulting with a medical practitioner who has information concerning a child, as long as the school district has obtained consent from the parent(s) or guardian(s) of the child, in accordance with Section II.D., above. Nothing in this policy shall prevent a Planning and Placement Team (PPT) from recommending a medical evaluation as part of an initial evaluation or reevaluation, as needed to determine a child's (i) eligibility for special education and related services, or (ii) educational needs for an individualized education program.

The Board recognizes that the refusal of a parent or other person having control of a child to administer or consent to the administration of any psychotropic drug to the child shall not, in and of itself, constitute grounds for the Department of Children and Families (DCF) to take such student into custody or for any court competent jurisdiction to order that such student be taken into custody by the Department, unless such refusal causes such student to be neglected or abused, as defined in C.G.S. 46b-120.

The Superintendent of Schools or his/her designee shall promulgate this policy to district staff and parents/guardians of students annually and upon registration of new students. (cf. 514.4-Reporting of Child Abuse and Neglect).

Legal Reference:        Conn. Gen. Stat. 10-76d  
                              Conn. Gen. Stat. § 10-212b  
                              34 C.F.R. § 300.174 Prohibition on mandatory medication

Policy Adopted: January 2005  
Policy Revised: 6/19/07  
Policy Revised: 11/15/16

NORWICH PUBLIC SCHOOLS  
Norwich, Connecticut