



Chelsea Public Schools

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Chelsea Public Schools

Substance Use Prevention Policy

The goals of the **Chelsea Public Schools Substance Use Prevention Policy** is to increase awareness of substance abuse within the community and enhance communication between youth, parents, educators and residents utilizing evidenced based data in order to promote education, encourage prevention and provide access to resources. The policy strives to develop the ability of our students to make good choices, utilizing effective techniques for resisting peer pressure regarding use of illicit drugs and alcohol as well as to understand the personal, social and economic problems caused by drug use. This policy will be reviewed and updated annually during October of each school year to assess effectiveness and to include the latest research based practices.

This policy is organized according to the six elements of a Safe and Supportive Schools Framework: *Leadership; Professional Development, Access to Resources and Services; Academic and Non-Academic Strategies; Policies, Procedures, and Protocols; and Collaboration with Families.*

Leadership:

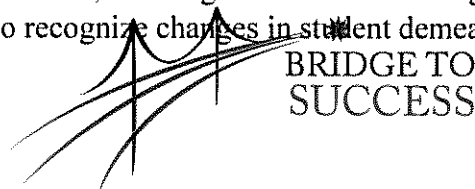
Maintaining a safe and supportive learning environment is implicitly the overall mission of the Chelsea Public Schools. This policy was written by district leadership including staff from the Superintendent's office, the district health manager and the coordinator of social work services as well as legal counsel. We used the guidance document published by the Massachusetts Department of Elementary and Secondary Education to develop this policy. Per Mass. Gen. Laws c.71, s.96, the policy was prescribed by the school committee and adopted in October 2016.

This comprehensive substance use and prevention program involves the use of multiple strategies that include education and training; social competency skill development; social norms with expectations for behavior; policies, procedures and protocols; and problem identification and referral services. The district and school administrators play an integral role in implementing and overseeing these programs.

Professional Development:

Chelsea Public Schools provides training to faculty and staff on district policies, procedures and protocols for prevention, intervention, and follow-up in preventing and responding to substance use and abuse. School administrators, teaching staff and the nursing staff are trained at the beginning of the school year to recognize changes in student demeanor, behavior, and

Last review 10/25/2016



appearance that might indicate a student at risk. They are also made aware of the structures in place for building-based referrals and protocols to follow when students are suspected of experiencing substance use problems.

The nursing staff and social work staff are trained in SBIRT (a verbal screening tool) that will be implemented as a pilot in 2016-17 with grade 7 students in one middle school. SBIRT will then go live for all 7th grade student and 9th grade students in the 2017-18 school year. (See Appendix A)

The nursing staff as well as other trained staff members can administer Naloxone (NARCAN), which is stocked in all Health Offices. (See Appendix B)

Access to Resources:

The Chelsea Public Schools recognizes the importance of addressing our student's social and emotional health. Each school within the district has at least one full-time school social worker on staff as well as additional supports throughout the district, including guidance counselors, psychologists, and other behavior supports. Along with these CPS staff, the district also partners with the following community agencies to offer school-based services and ongoing programs to further support students and families. These partnerships include:

- North Suffolk Mental Health
301 Broadway
Chelsea, MA 02150
1-888-294-7802 (intake appointment)
(617) 912-7900
Services include: Child and Family Outpatient and School-Based Counseling, Child Psychiatry, Early Intervention, CBHI services (In-home therapy, Intensive Care Coordination, Therapeutic Mentors, Family Partners, Community Service Agency)
- MGH Chelsea – Mental Health, 4th Floor
151 Everett Avenue
Chelsea, MA 02150
(617) 889-8515
Services include: Child Outpatient and School-Based Counseling, Child Psychiatry
- Teen Connexions
14 Porter Street
East Boston, MA 02128
(617) 912-7511
Services include: Outpatient Adolescent Substance Use Assessment and Treatment through school, clinic, and community-based support
- South Bay Mental Health
70 Everett Avenue
Chelsea, MA 02150
Contact: Liz Richard (857) 217-3700 ext 428
Services include: Home and school-based child and family treatment, CBHI service

Evaluation and Assessment: In case of psychiatric emergency:

- **BEST (Boston Emergency Services Team) at 1-800-981-HELP (4327) or go to your local emergency room.**

Additional Outpatient Mental Health and Substance Use Services referred to by CPS staff:

- MGH: ARMS Program Boston 617-643-4699
(Addiction Recovery Management Service)
- Harbor COV Chelsea 617-884-9799
(Communities Overcoming Violence: focus on domestic violence)
- MGH Haven Chelsea 617-887-3513
(Domestic Violence Services)
- Cambridge Eating Disorders Center Cambridge 617-547-2255
(Adolescent/Adult Eating Disorders)
- Cambridge Health Alliance Cambridge 617-665-3458
(Mental health services for children/families/adults)
- Bridge Over Troubled Waters Boston 617-423-9575
(Services for homeless youth ages 18-24)
- Alateen (variety of locations) 508-366-0556
(Substance Use Support Groups)

Hotline and Resource Numbers:

- Samarateens (Teen Suicide Prevention Hotline –24 hour assistance) 800-252-8336
- Boston Area Rape Crisis Center (24 hour assistance) 800-841-8371
- Sexual Assault Crisis Line 800-643-6250
- Bridge Over Troubled Waters (ages 14-17) 800-RUN-AWAY
- National Drug Abuse Hotline 800-327-5050
- Domestic Violence Youth Hotline 617-773-HURT
- SafeLink (Dating/Domestic Violence Shelters) 887-547-2255
- Parental Stress Line (Confidential/Anonymous) 800-632-8188
- Girls & Boys Town 800-448-3000
- Outright Youth Support Line (LGBTQ) 800-452-2428

Academic and Non-academic Strategies:

Chelsea Public Schools will implement an evidenced-based substance use prevention curriculum for students in grades 5 through 12. We intend to use health classes in both middle and high school as well as advisory periods. At this point we are researching curriculum that will best fit our needs however, the curriculum will be in place by January 2017.

Chelsea Public Schools also has adopted a Wellness Policy that includes our commitment to providing school environments that promote and protect children's health, well-being and ability to learn. We adopt policies that reflect our commitment including policies against hazing, bullying, discrimination and harassment and policies that support zero tolerance for weapons, drugs, tobacco, and gang activity on school grounds or during school functions.

Chelsea Public Schools has at least one Social Worker/School Adjustment Counselor at each of our schools. These are the point people at each school who work directly with and support students who are identified as being at risk. They connect students and families to in-school and outside resources.

Policies and Protocols:

Pursuant to Massachusetts General Laws, Chapter 71, Sec. 37H(a), any student who is found on school premises or at school-sponsored or school-related events, including athletic games, in possession of a controlled substance as defined in Chapter 94C, including but not limited to marijuana, cocaine, and heroin, may be subject to expulsion from the school or school district by the principal.

Any student found or suspected of using, possessing, or being under the influence of drugs or alcohol in or around school buildings and grounds, or at a school sponsored activity, will be subject to the following:

- **Immediate Response** - Teacher or staff verifies and confiscates contraband or suspects use thereof. Teacher or staff escorts student to the principal and gives contraband to the principal.
- **Response of Administration: Disciplinary action**
 - The principal notifies parent/guardian and police. Student is escorted to and supervised by school nurse or authorized staff until parent or guardian(s) or rescue unit (if necessary) arrives.
 - Student and parent/guardian must attend hearing with the principal. Student will be suspended for a period of time as determined by the principal and expulsion procedures may be initiated by the principal. Student and parent/ guardian must meet with the principal and counselor to be reinstated to school. A behavior contract must be signed by the student, parent/guardian and principal at the reinstatement conference. The disciplinary procedures pursuant to M.G.L. c. 71 and the Chelsea Public Schools Disciplinary Policy will be followed.
 - Student is required to participate in an intervention activity such as a support group or drug education workshop. A professional evaluation may be required. Student and parent/guardian have the right to appeal this decision.
 - Student and parent/guardian must meet with the principal. Student will be suspended for up to ten days and expulsion procedures will be initiated by the principal.

- Student loses privilege to participate in school sponsored activities for up to one year at the principal's discretion.
- Police Referral - principal gives contraband to police.
- The nurse will complete an Impairment Assessment Tool (See Appendix C)

- **Response of Support Staff: Referral to Support Services**

In accordance with the CPS Student and Parent Handbook, if a student is found under the influence and/or in possession of substances on school property, the student will receive both disciplinary action and a referral for substance use assessment/intervention services.

- Student is found under the influence and/or in possession of substances.
- At time of infraction:
 - Student is seen by School Nurse for quick screen.
 - School Administrator/Dean determines consequence.
 - School Administrator/Dean contacts parent/guardian regarding incident and informs parent/guardian that a referral for substance use assessment will be made (as stated in the student handbook).
 - Student will be dismissed to the care of parent/guardian.
 - School Administrator/Dean informs School Social Worker/School Adjustment Counselor.
- School Social Worker/School Adjustment Counselor will meet with student (and possibly parent) re. referral for assessment/intervention services.
 - 1st School Infractions: Student may be referred to School Social Worker for individual assessment and/or group psychoeducational intervention.
 - 2nd School Infraction: Student will be referred by School Social Worker for additional assessment/intervention services. These services may be provided in or out of school by one of our partner agencies: South Bay Mental Health, North Suffolk Mental Health, or MGH Behavioral Health (additional community agencies may provide services based on availability of services and/or insurance requirements)
 - 3rd School Infraction: Student will be required to meet with Superintendent of Schools to discuss concerns of substance use and supports that are necessary for student to achieve academic success. This meeting will be set up by the Building Administrator or Designee.
- School Social Worker/School Adjustment Counselor will obtain necessary releases of information and maintain contact with provider re. assessment/intervention plan and services.

- School Social Worker/School Adjustment Counselor will follow-up with School Administrator/Dean regarding student's status with follow-through recommendations from assessment/intervention services.

Collaboration with Families:

All stakeholder within the Chelsea Public Schools from Central Office Administration down to the teachers and paraprofessionals in the classroom realize the importance of families as essential partners in the education of their children. Parental input is encouraged and welcome by all staff in all aspects of their child's education. Annually, parents/guardians are provided with information regarding the district and school's substance use and prevention policies via our website, student/parent handbooks, School Site Council meetings, and notifications of various special programs such as SBIRT. Each school also hold various parent workshops providing age appropriate information on keeping students safe from substance use. Content of these workshops how to talk to students at home about substance use, recognizing the signs of students who may be using such as changes in demeanor, behavior, and appearance and what they can do to get the support and resources needed.

Appendix A
SBIRT IN SCHOOLS

SBIRT IN SCHOOLS

SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT

SBIRT Protocol: for School Nurses and Other School Staff to Identify Students at Risk for Substance Use or Related Problems.

WHY: On March 14, 2016 Governor Charlie Baker signed landmark legislation into law to address the deadly opioid epidemic plaguing the Commonwealth. The bill is titled *An Act relative to substance use, treatment, education and prevention*. This new law includes multiple provisions including a 7-day limit on every opiate prescription for minors (with certain exceptions), **a mandate for a verbal screen for substance use disorders in students** and a requirement that information on opiate-use and misuse be disseminated to all students participating in an extracurricular athletic activity prior to their athletic season.

In order to help prevent students from starting to use substances, or intervene with early use, CPS nursing staff will be providing an interview-based screening for 7th grade students about the use of alcohol, marijuana, and other drugs. This screening utilizes the most commonly used substance use screening tool for adolescents in Massachusetts, the CRAFFT. A copy of the screening tool is enclosed for your review. Student screening sessions will be brief (5-10 minutes) and conducted confidentially in private, one-on-one sessions during other routine screenings conducted by the school nurse in the 7th grade CAMS only) in 2016-2017 and in grades 7 (all middle) and 9th in 2017-2018 school year. Students who are not using substances will have their healthy choices reinforced by the screener. The screener will provide brief feedback to any student who reports using substances, or is at risk for future substance use. If needed, we will refer the student to our guidance/social worker department for further evaluation and contact parents. Results of the screening will not be included in your student's school record. As with any school screening, you have the right to opt your child out of this screening. Please contact Marie Washington, CPS School Health Manager, at 466-5314 if you wish to do so. Additionally, screening is voluntary and students may choose not to answer any or all of the screening questions.

How: Starting next school year 2016-2017 there will be a pilot group completed at the Clark Avenue Middle School for the 7th graders. The nursing staff will conduct this new screening tool and review the results with the SBIRT team as well as school social workers for any needed follow up.

The following school year and continuing every year after, the SBIRT tool will be used in one middle school grade and one early high school grade as part of the state mandated screening that is completed yearly i.e.(Height/weight, vision/hearing and postural exams).

SBIRT Screening in Schools: What it is and what it isn't.

Marie Washington, MEd, BSN, RN

CPS School Health Manager

In March, 2016, the Massachusetts Legislature passed House Bill 4056, which outlines the requirements for public schools in the Commonwealth to engage in substance use prevention and education. The Screening, Brief Intervention and Referral to Treatment, or SBIRT, will begin taking place at the Clark Avenue Middle School in November of 2016. This screening will be performed confidentially during the time of other screenings, such as vision and hearing and postural screens. The initial grade will be the 7th and the following school year the SBIRT screening will be done in grades 7 and 9. This information will help parents, staff and students who may have questions about this new screening process.

What is SBIRT screening? SBIRT is a comprehensive, integrated public health approach for early identification and intervention for students who may have a pattern of alcohol or drug use that puts their health and safety at risk. The screening tool will help the screener to identify unhealthy behaviors. It is estimated that 75-85% of students will screen negative. Students who screen positive will be assessed further to determine their level of risk. The screening will provide feedback and education regarding the risks related to unhealthy substance use, and will try to motivate the student to make healthy behavioral changes. If determined by the screener that the student is at imminent risk of harm (usually <5% of students), a referral to treatment to help facilitate access to addiction assessment and treatment will be made. This referral will usually be to the student's social worker, who will work with the SBIRT team members, to access treatment.

SBIRT screening is not drug testing. SBIRT is a brief student interview conducted using a standardized screening tool. The interview takes approximately 3-5 minutes to administer and quickly ascertains a student's level of risk for alcohol/drug involvement and unhealthy behaviors. No biological specimens such as urine, blood or hair cuttings will be obtained for drug screening purposes.

Parents may opt their children out of SBIRT screening. Just as parents may choose to opt a student out of postural screening, parents will be able to decline SBIRT screening for their child. A passive consent form will be sent home with the student, and any parent choosing to decline are advised to return the form to the school nurse with a signed opt-out for this screening. However, parents are strongly encouraged to consider allowing their children to participate in this important new screening.

SBIRT results are not recorded in the student's health or academic records. The only copy of the screening tool will be shredded by the SBIRT team and the results are only recorded as unidentified aggregate data to the Massachusetts Department of Public Health. No names will be shared.

SBIRT results are confidential, and do not result in disciplinary action against the student. As stated above, this is a public health screening to identify students who may be at risk for unhealthy behaviors related to substance abuse. The ultimate goal of SBIRT screening is to identify and obtain help for at-risk students as early as possible in order to prevent life-long issues with drugs and alcohol.

I am the School Health Manager and the district coordinator for the SBIRT program and I would appreciate any feedback, questions or concerns you may have about this new screening. Please email me at washingtonm@chelseaschools.com.

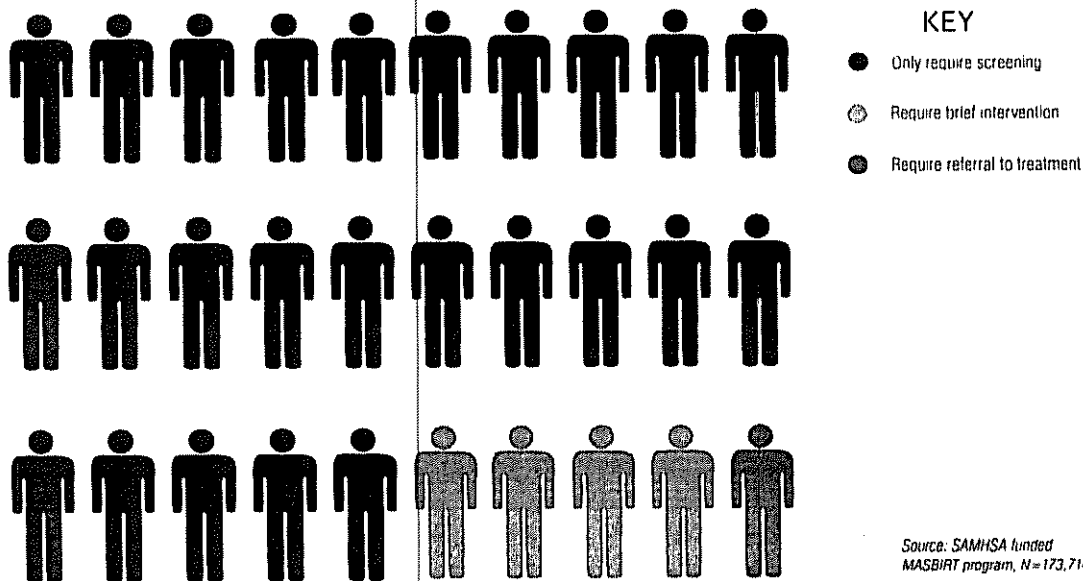
What is SBIRT?

Screening, **B**rief **I**ntervention and **R**eferral to **T**reatment (SBIRT) is a comprehensive, integrated, public health approach for early identification and intervention with patients whose patterns of alcohol and/or drug use put their health at risk.

SBIRT components are:

- Universal, annual **Screening (S)** identifies unhealthy use. 75-85% of patients will screen negative. For those who screen positive, further assessment is needed to determine level of risk.
- **Brief Intervention (BI)** provides feedback about unhealthy substance use. It also focuses on education, increasing patient insight and awareness about risks related to unhealthy substance use, and enhances motivation toward healthy behavioral change.
- **Referral to Treatment (RT)** helps facilitate access to addiction assessment and treatment. A referral is usually indicated for only about 5% of people screened.

Research shows SBIRT to be most effective with patients with unhealthy alcohol or drug use who do not have a substance use disorder.⁵





Chelsea Public Schools School Health Manager

Mary C. Burke Complex
300 Crescent Ave.
Chelsea, MA 02150
(617) 466-5314
(617) 592-0606 (Cell)
(617) 889-8455 (Fax)

Dear Families,

We are writing to inform you about a new screening in our schools that will help your child make healthy choices. This year we are initiating a screening program related to the use of alcohol, marijuana and other substances. Our goal is to let the students know that we are available to reinforce healthy decisions and to assist them in obtaining support if needed.

The Screening, Brief Intervention, and Referral to Treatment (SBIRT) program screening process will be incorporated into our annual state mandated screenings. This year we will screen all 7th graders at the Clark Avenue Middle School and the following year all 7th and 9th graders will be screened in all three middle schools and the High School.

All screenings will be conducted by our school nurse confidentially in private one-on-one sessions. We will utilize the CRAFT screening tool, the most commonly used substance use screening tool for adolescents in Massachusetts. A copy of the screening tool is enclosed for your review.

Students who are not using substances will have their healthy choices reinforced by the screener. The screener will provide brief feedback to any student who reports using substances, or who is at risk for future substance use. If needed, the nursing staff will confer with the social workers and guidance staff for further evaluation. This program focuses on harm prevention and does not generate disciplinary action. Results of the screening will not be included in your student's school or medical record.

As with any school screening, you have the right to opt your child out of this screening. Please contact Marie Washington, RN, School Health Manager at 617-466-5314 or the Clark Avenue Middle School nurse at 617-466-5106 if you have any questions about this program or if you wish to opt out. Additionally, screening is voluntary and students may choose not to answer any or all of the screening questions. The screening will be conducted in late October.

We encourage all parents/guardians to talk to their child about substance use. Together, schools and parents/guardians CAN make a difference for our youth.

Sincerely,

Marie Washington, MEd, BSN, RN

School Health Manager





Chelsea Public Schools School Health Manager

Mary C. Burke Complex
300 Crescent Ave.
Chelsea, MA 02150
(617) 466-5314
(617) 592-0806 (Cell)
(617) 889-8455 (Fax)

Estimadas Familias,

Le escribimos para informarle acerca de una nueva evaluación médica en nuestras escuelas que le ayudará a su hijo/a a tomar decisiones saludables. Este año estamos iniciando un programa de evaluación médica en relación con el uso de alcohol, marihuana y otras sustancias. Nuestro objetivo es permitir que los estudiantes sepan que estamos a su disposición para reforzar las decisiones saludables y para asistirlos en la obtención de apoyo si es necesario.

La Evaluación Médica, Intervención Breve y Referido al Tratamiento al (SBIRT) programa del proceso de evaluación será incorporado a nuestros exámenes anuales mandatos del estado. Este año vamos a examinar a todos los alumnos del 7º grado en la Escuela Intermedia Clark Avenue y el siguiente año todos los alumnos del 7º y 9º grados serán examinados en todas las tres Escuelas Intermedias y la Escuela Superior.

Todos los exámenes serán conducidos por la enfermera de la escuela de forma confidencial en sesiones privadas uno-a-uno. Vamos a utilizar la herramienta de detección CRAFT, la herramienta de detección de uso de sustancias más comúnmente utilizada para adolescentes en Massachusetts. Una copia de la herramienta de evaluación se adjunta para su revisión.

Los estudiantes que no utilizan sustancias tendrán sus decisiones saludables reforzadas por el agente de control. El agente de control proporcionará breve retroalimentación a cualquier estudiante que reporte el uso de sustancias, o que está en riesgo del consumo de sustancias en el futuro. Si es necesario, el personal de enfermería hablará a los trabajadores sociales y al personal de orientación para una evaluación adicional. Este programa se centra en la prevención del daño y no genera medidas disciplinarias. Los resultados de la evaluación no se incluirán en la escuela de su estudiante o el registro médico.

Al igual que con cualquier evaluación en la escuela, usted tiene el derecho de excluir a su hijo/a de esta prueba de detección. Por favor, póngase en contacto con Marie Washington, RN, Administradora de la Salud Escolar al 617-466-5314 o la enfermera de la Escuela Intermedia, Clark Avenue al 617-466-5106, si tiene alguna pregunta sobre este programa o si desea participar. Además, la evaluación es voluntaria y los estudiantes pueden optar por no responder a cualquiera o todas las preguntas de la evaluación. La evaluación se llevará a cabo a finales de octubre.

Le exhortamos a todos los padres / encargados de hablar con sus hijos sobre el consumo de sustancias. Juntos, las escuelas y los padres / encargados PUEDEN hacer una diferencia para nuestra juventud.

Atentamente,

Marie Washington, MEd, BSN, RN
Administradora de la Salud Escolar



Appendix B
IMPLEMENTATION PLAN
FOR
TRAINING OF
NALOXONE (Narcan) ADMINISTRATION
BY THE
SCHOOL NURSING STAFF
IN THE
CHELSEA PUBLIC SCHOOLS

REVISED (2015-2016)

Implementation plan

For

Training of Naloxone Administration by School Nurses

Planning and implementation:

1. Department approves policy and procedures for training
2. In consultation with the school physician, designated school nurses, including “trainers” are trained and tested for competency in accordance with standards established by Mass. Public Health Department (MDPH) and the Chelsea Public School (CPS) administration.
3. Approved trainers:
 - Marie Washington, RN, School Health Manager
 - Joan Cromwell, RN, Public Health Nurse
4. The school nurse will document the training and testing competency, in accordance with the standards and curriculum established by the MDPH and the CPS administration.
5. Training will include:
 - a. Procedures for risk reduction
 - b. Recognition of symptoms in an individual with an opiate overdose;
 - c. Importance of following the prescribed method of medication administration
 - d. Proper use of both the nasal inhaler and auto-injector
 - e. Requirement to call local emergency services prior to administration, and
 - f. Requirements for proper storage and security, notification of appropriate persons following administration and record keeping.
6. The nurse shall maintain and make available upon request by the Department a list of all unlicensed individuals trained to administer Naloxone by nasal administration and auto-injector.
7. All trainings in the administration of Naloxone will be done in accordance with prescribed methods.
8. The School Health Manager will submit a report to the DPH School Health Unit each time training of Naloxone administration is completed.
9. All other medication administration procedures will hold forth including:
 - a. Reporting of any medication errors per 105 CMR 210.0

- b. Proper disposal of a used Naloxone administration delivery system.
10. The city solicitor or her designee will write a city wide policy on the administration of Naloxone for the school nurses, police and fire departments.

Training tools:

1. Massachusetts Department of Public Health-Opioid Overdose Education and Naloxone Distribution-Core Competencies (attachment 1)
2. Overdose Response Training-(attachment 2)
3. Certificate of Completion (attachment 3)

Training will take place on at the beginning of the school year and yearly as a refresher.

Dr. Lambert will write a Standing Order and the nursing staff will have a supply of the Narcan in each health office. The medication will be in all the Health Offices and the staff will follow general rules for medication in school protocols.

Marie Washington, MEd, BSN, RN will oversee the implementation, training and ordering of the Narcan as needed.

Respectfully submitted by

Marie Washington, MEd, BSN, RN, School Health Manger

Sept. 23, 2015

Appendix C
Request for Impairment Assessment
and
Impairment Assessment Tool
(Used by Nursing Staff)

**Chelsea Public Schools
School Health Services
Referral Form
Request for Impairment Assessment**

Name: _____ Date _____ Time _____ am/pm

School: _____ Grade _____ DOB _____

Referring Person's Position: Teacher Counselor Administrator Other _____
Name _____

The student was advised at the onset of this assessment that he/she is suspected of being under the influence: Yes _____ No _____

OBSERVATIONS:

Vital signs: B/P _____ Apical Pulse _____ reg/irreg RR _____ Temp: _____

Appearance: Normal Dazed Distant-look Scared Sleepy Jittery Other _____

Behavior: Appropriate Restless Anxious Hyperactive Belligerent Depressed Euphoric Excited Paranoid Silly Irritable Drowsy Relaxed Other _____

Level of Orientation: Alert and Oriented to Person _____ Place _____ Time _____
Confused _____ Stuporous _____ Other _____

HISTORY:

Have you recently been ill, injured or hospitalized No _____ Yes _____
If yes, describe: _____

Are you under the care of a doctor/dentist for this particular issue/condition?
Yes _____ No _____

Are you taking any medications (prescribed or OTC)? Yes _____ No _____
Type _____ Amount _____ Frequency _____
Type _____ Amount _____ Frequency _____

When did you last sleep? _____ How many hours? _____
When did you last eat? _____ What did you have? _____
Have you taken drugs or alcohol within the last 24 hours? Yes _____ No _____
Name of drug: _____ Amount: _____ Route: _____
Time used: _____
Any other substances? _____

Speech: Clear Slurred Rambling Slow Deliberate Rapid Raspy

Odor: Breath None ETOH Marijuana Fruity Smoke Chemical Rancid Other _____

Hands None ETOH Marijuana Fruity Smoke Chemical Rancid Other _____

Clothing None ETOH Marijuana Fruity Smoke Chemical Rancid Other _____

Thought Process: Remains focused: Yes ___ No ___
Able to count backwards from 58-43? Yes ___ No ___

Coordination: Gait: Steady ___ Weaving ___ Needs Assistance ___

Finger to nose? Yes ___ No ___

Turns without staggering? Yes ___ No ___

Romberg: Positive ___ Negative ___

Student stands with feet together. Closes eyes and able to maintain balance is a negative result.

Eye Examination

Eye Clarity: Bloodshot ___ Watery ___ Normal ___ Other _____

Pupils: Left: Normal ___ mm Constricted ___ mm Dilated ___ mm

Right: Normal ___ mm Constricted ___ mm Dilated ___ mm

Reaction to Light: (Right) Reactive ___ Slowed ___ Non-Reactive ___

(Left) Reactive ___ Slowed ___ Non-Reactive ___

Redness to Conjunctiva: Present ___ Not Present ___

Ngstagmus: Present ___ Not Present ___

Disposition

Students assessed and is found to be: Impaired ___ Not Impaired ___ Questionable ___

Not impaired. Returned to class at _____ am/pm

Nurse Signature _____ Date _____

To be Completed by Administration

Parent/Guardian informed at _____ am/pm by _____

Method of transit to/from school: Bus Walk Auto : Self Parent Other _____

Administrative referral to _____

Ambulance called _____ am/pm Transported to _____

Dismissed home with Parent/Guardian _____ Time _____ am/pm

School Psychologist/Substance Abuse Counselor/Guidance Counselor referral:

Other Agency Referral _____

Administrator Signature _____ Date _____