

**Board of Education
Newtown, Connecticut**

Minutes of the Board of Education meeting held on October 17, 2023 at 7:00 p.m. in the Council Chambers, 3 Primrose Street.

D. Zukowski, Chair	C. Melillo
J. Vouros, Vice Chair (absent)	A. Uberti
D. Ramsey, Secretary	T. Vadas
D. Cruson	2 Staff
A. Plante	31 Public
T. Higgins	1 Press
S. Tomai	
I. Khazadian	
G. Peteronjes (absent)	

Ms. Zukowski called the meeting to order at 7:01 p.m.

Item 1 – Pledge of Allegiance

Item 2 – Celebration of Excellence

Dr. Longobucco, Principal at Newtown High School, recognized eight students as commended students and two as semi-finalists of the 2024 National Merit Scholarship Program. She explained that 24,000 commended students throughout the nation are being recognized for their exceptional academic promise. Commended students placed among the top 50,000 students who entered the 2024 competition by taking the 2022 PSAT National Merit Scholarship Qualifying Exam. She introduced the eight commended students: *Glenn Adams, Grace Chiriatti, James Guerrieri, Braden Macey, Puma Marx, Thomas Milligan, Lauren Smiley and Tyler White*. Dr. Longobucco continued by stating that 160,000 talented high school seniors were named as National Merit Semi-Finalists and has the opportunity to continue in the competition of roughly 7,000 scholarships worth nearly \$28 million. To be considered for a Merit Scholarship Award, semi-finalists must fulfill several requirements to advance to the finalist level. She recognized two semifinalists: *Andrew Arena and Adrian Totir*.

Ms. Zukowski asked if there was any objection to move the agenda item “Discussion and Possible Action on the Newtown Association of School Administrators Contract” after the first public participation. There was no objection.

Item 3 – Consent Agenda

MOTION: Ms. Plante moved that the Board of Education approve the consent agenda which includes the correspondence report. Mr. Higgins seconded. Motion passes unanimously.

Item 4 – Public Participation

Newtown Association of School Administrators Contract:

Ms. Plante moved that the Board of Education approved the ratified Newtown Association of School Administrators Contract. Mr. Cruson seconded.

Mr. Melillo said that the contract is a fair three-year contract. The administration representation worked cooperatively with Board of Education representation, Legislative Council representation and Board of Finance representation. He stated that Newtown has a strong administrative team and this contract falls within the average of the area.

Motion passes unanimously.

Item 5 – Reports

Chair Report: Ms. Zukowski reported that despite the rain on the weekend, she was able to attend the Grasso Festival with Mr. Melillo and Mr. Ramsey. She also thanked all of the Newtown teams who have been playing in the rainy weekend weather for their dedication to our schools.

Superintendent Report: Mr. Melillo reported that Reed Intermediate, Newtown Middle School and Newtown High School principals presented their school success plans to the Administrative Team. The school success plans are aligned with our overarching strategic plan designed to address the four core strategic priorities. As part of the work, schools have developed teams of teachers to participate in learning walks. The learning walks improve instruction by providing opportunities for educators to observe and learn from their colleagues. Mr. Melillo also reported that he attended the Sandy Hook Walkathon on Monday. He said it was a great time for all. Also, Head O' Meadow is having their annual Halloween Hop and Trunk o' Treat on Friday. Lastly, on October 24th, the World Language Department classes at NHS will be celebrating the 20th annual Italian Day Festival.

Committee Reports:

Mr. Cruson reported that the Policy Subcommittee met on October 11, 2023. The committee reviewed the policies that are on tonight's agenda for second read and made the changes that had Board comments on them. The committee also worked on Policy 3160, Policy 1700 and discussed including supporting documents on publicly posted agendas.

Ms. Plante reported that the CFF subcommittee met prior to the Board meeting. Transportation continues to be a challenging issue for the District but Mr. Melillo and Ms. Vadas are on top of it and staying in tight sync with All-Star on how we can address it. She also reported that there was a plan to use funds from the non-lapsing account in the spring for the Reed Intermediate chiller, however, Mr. Barlow advised the committee that the funds are needed to order the parts now.

Mr. Ramsey reported that he attended a PTA meeting at Newtown Middle School. He praised all of the PTAs for all of the support that they offer to the teachers and staff. Newtown Middle School will have a Field of Flags event sponsored by the PTA and will be displayed in front of the school until October 25th.

Student Report:

Ms. Khazadian reported that students have begun completing their college applications and attending the college rep visits hosted by the college and career center. Last week, boy soccer won their senior night game against Stratford 5-0 and this week, students are celebrating five senior nights with field hockey on Wednesday, girls' soccer on Thursday and football, dance and cheer on Friday after the pep rally. Students across all grades have been participating in Spirit Week with today being Decade's Day. The week will conclude with the Barbie and Ken themed Pep Rally. She concluded her report stating that Homecoming will be on November 6th and ticket sales should be starting in the coming weeks.

Financial Report:

MOTION: Ms. Plante moved that the Board of Education approve the financial report and transfers for the month ending September 30, 2023. Mr. Ramsey seconded.

Ms. Vadas spoke about the financial report and transfers for the month ending September 20, 2023.

Ms. Tomai asked how many Behavioral Therapist jobs were filled at this point.
Ms. Vadas answered that the District has done a great job at filling those positions and only have two or three spots open.

Motion passes unanimously.

Item 6 – Presentations

Grant Update:

Judit DeStefano, Grant Specialist for Newtown Public Schools, presented the Grant Update.

Mr. Higgins asked if the Title I grant was the only grant that is targeted at supporting services directed at low income families.

Ms. DeStefano answered that it is the only grant for the state.

Mr. Higgins understands that this grant supports two reading teachers and asked if those are targeted services towards low income families.

Ms. DeStefano said the reading teachers would support any student who needs it in the school.

Mr. Higgins asked if the grant sets parameters on how you deploy the funds.

Ms. DeStefano said they do not.

Mr. Melillo said that the grant recognizes which schools qualify as a Title I school and then the supports go to the school.

Mr. Ramsey asked if a RFP had to be submitted to receive the funds for the entitlement grant.

Ms. DeStefano said that they have to complete an application in EGMS.

Mr. Melillo said it is not a competitive grant. When Title I, II, III, IV are allocated to schools districts, the number of funds is given to the district through data that they've collected. The district then has to submit an application plan to the State Department of Education for approval in order to access those funds.

Ms. Tomai asked if they gave some direction on why Newtown was denied for the Hawley HVAC Grant.

Ms. DeStefano said that the grant opened after we had undertaken the project so a lot of what we did was retroactive and didn't meet requirements and specifications of the grant.

Mr. Melillo said that the grant requires that we have a building committee but we have a commission and that is by Charter.

Ms. Zukowski added that the Board has now created a building committee.

Ms. Tomai asked if Ms. DeStefano needed more funding for the backpack program.

Ms. DeStefano said that the need is growing with more students year on year and the food is getting more expensive. Right now the funding is being absorbed by one donor so it would be beneficial to find other support for it.

Mr. Ramsey complimented the Perkins Enhancement Supplemental Grant that is involved with the new food truck. He loves the multi-department participation. He asked if this grant was only for the high school and the middle school.

Ms. DeStefano answered that it is almost exclusively for the high school because it is a career readiness program.

Mr. Higgins asked about the parameters for the dual credit grant and the amount of fees.

Ms. DeStefano said that is a capacity building grant and does not allow us to cover that fee

Mr. Higgins said that this ties to the subject about how Newtown is targeting support for low income students.

Mr. Melillo said that he believes Mr. Higgins made a good point about access and cost of programming and will look into support for these students who may fall into the low income category.

Ms. Plante asked if Ms. DeStefano felt she was at capacity with the amount of work load. Ms. DeStefano answered no.

Mr. Cruson asked if there are any other sources of grants that she was working on and how she finds private grants.

Ms. DeStefano said that Newtown uses a grant seeker and there are grant databases. She is also on different lists and google searches are always helpful.

Mr. Ramsey asked if Ms. DeStefano receives feedback from teachers regarding potential grants.

Ms. DeStefano answered that she does.

Ms. Zukowski said that she is very impressed with the detailed presentation and believes it will help during the budget process.

Item 7 – Old Business

Budget Assumptions and Priorities:

MOTION: Ms. Plante moved to approve the discussion and possible approval of the 2024-2025 Board of Education Budget Assumptions and Priorities.

Mr. Ramsey seconded.

Ms. Plante asked Mr. Melillo to clarify the process and the goal of the document.

Mr. Melillo said the document is used to be a focus for budget discussions moving forward. It highlights areas that we need to support, areas that our budget dollars will bring value and areas that have been identified through data analysis that we can improve.

Mr. Higgins added that he collaborated with Mr. Melillo and Ms. Zukowski for several weeks to make sure that the assumptions are actually operating assumptions that drive the priorities and then for the priorities to actually tie back to the assumptions.

Ms. Plante said that she asked the question because she assumed that this was Mr. Melillo's document that he was asserting to the Board. However, she believes that this is the Board's document that we are giving to the Administration to show what our priorities are before crafting the budget.

Ms. Zukowski said that her understanding is different. She believes that this document is supposed to be available to the staff prior to them starting their work on the budget. There is also a new strategic plan that our priorities is based on.

Mr. Melillo hopes that this document will not have to change yearly. He believes that the priorities should remain somewhat constant over time for continued success.

Mr. Ramsey believes that the original document was not bad but agrees that the new proposed draft is superior.

Mr. Cruson added that there has been a shift in the purpose of this document from past years. It has always been a BOE document and the Board Chair would work on the document and present the draft to the Board. The Board would then work on it and bring it back for approval.

Ms. Zukowski said that it is still a Board of Education plan and told the Superintendent that it needs to reflect the strategic plan.

Mr. Higgins added that the previous document did not have any value and the assumptions and priorities were vague and general. He believes that this document shows very clear priorities and assumptions.

Ms. Plante agrees with Mr. Higgins. She also believes that they should go a step further on the priorities and arrange them with the framework of the strategic plan.

Mr. Melillo said it was a very collaborative process and worked from scratch. The first two hours were spent discussing about what we want and what we think we need for the district.

Mr. Ramsey complimented the work that was done on this document. It shows the community what is being done in terms of the strategic plan all the way down to the implementation and delivery of instruction in the classrooms.

Mr. Cruson appreciates the work that has been done to the document; however, he wishes the Board had more time to provide input.

Ms. Zukowski said that there is time and asked for a motion to postpone the approval of this document. She asked the Board to send all of their input to her so she can include them in the draft document.

MOTION: Ms. Plante moved to postpone the discussion and possible approval of the 2024-2025 Board of Education Budget Assumptions and Priorities until the next Board of Education meeting. Mr. Cruson seconded. Motion passes unanimously.

Second Read on Grades 5 and 6 Health Curriculum:

MOTION: Ms. Plante moved that the Board of Education approve the grades 5 and 6 Health Curriculum. Mr. Ramsey seconded. Motion passes unanimously.

Second Read on Policies:

MOTION: Ms. Plante moved that the Board of Education approve Policy 9100 Organization Meeting of the Board. Mr. Cruson seconded.

Mr. Cruson said that this policy had some concerns raised at the last Board meeting so he made edits to incorporate new language.

Motion passes unanimously.

MOTION: Ms. Plante moved that the Board of Education approve Policy 9221 - Method of Filling Vacancies. Mr. Cruson seconded.

Mr. Cruson said that they did not have any feedback on this policy.

Motion passes unanimously.

MOTION: Ms. Plante moved that the Board of Education approve Policy 6000 -Instruction. Mr. Cruson seconded.

Mr. Cruson said that they did not have any feedback on this policy.

Motion passes unanimously.

MOTION: Ms. Plante moved that the Board of Education approve Policy 6111- School Calendar. Mr. Higgins seconded. Motion passes unanimously.

MOTION: Ms. Plante moved that the Board of Education approve Policy 6146 Requirements for Graduation. Mr. Higgins seconded.

Mr. Cruson said that they struck the duplicated language that made the sentence awkward. Motion passes unanimously.

Item 8 – New Business

First Read of Policy 5141.21 – Administration of Student Medication in the Schools:

Mr. Cruson said that the policy subcommittee worked with Karen Powell and Anne Dalton on this policy. There was a lot of back and forth with attorneys. If this policy is adopted, it will replace Policy 4-608.1 – Administration of Medications.

MOTION: Ms. Plante moved that the Board of Education approve the minutes of October 3, 2023. Mr. Ramsey seconded. Motion passes unanimously.

Item 9 – Public Participation

Randa Alzubi, 47 Horseshoe Ridge Road, spoke about the concerns from the Muslim and all other communities about the events that are happening in the Middle East. They notice the hate speech and crimes are on the rise. She asked the Board if they had a plan to work with the children to eliminate the hate speech and crimes. She added that all the children need to feel included and a part of this community.

Mr. Melillo said that Newtown does have a plan in place. Newtown is working with our Diversity, Equity, and Inclusion Coordinator and will be at our schools next week to work directly with our Equity Leaders. Newtown also has incorporated discussions about unity and peace in our SEL lessons. We are working with building leaders to make sure that we have processes and supports in place. If children are feeling that they are a victim of bullying or hate crimes, they can report the incident through anonymous alerts on our website. Mr. Melillo also provided information and links on how we can handle hate situation in our schools. He added that they will continue to work hard to ensure that our students are safe and hate is eradicated within our school community and community at large.

Ms. Zukowski assured Ms. Alzubi that she has the Board's commitment to supporting all of the kids and embracing one another's diversity.

MOTION: Ms. Plante moved to adjourn. Mr. Cruson seconded. Motion passes unanimously.

Item 10 – Adjournment

The meeting adjourned at 9:14 p.m.

Correspondence Report
10/03/2023 – 10/16/2023

Date	Name	Subject
10/03/2023	Donald Ramsey	Correspondence Report for the BOE Meeting 10/03/2023
10/03/2023	Uberti, Anne	Follow-up Data Presentation
10/03/2023	Zukowski, Deborra	NBC CT Media Inquiry
10/03/2023	Barb Patrick via Newtown BOE	Regional Hospice Newtown Breakfast
10/06/2023	Kiley Gottschalk	BOF 10-10-2023 Agenda
10/08/2023	Melillo, Christopher	10/8 Superintendent's Sunday Update
10/08/2023	Zukowski, Deborra	October 8, 2023 Week in Preview
10/09/2023	Melillo, Christopher	Parked Bus 38
10/10/2023	June, Kathy	Fwd: Board of Ed
10/11/2023	Melillo, Christopher	Presentations Update
10/12/2023	Melillo, Christopher	Resources for Support
10/12/2023	Melillo, Christopher	Addressing Safety Concerns
10/13/2023	Amy S	NAFC email
10/13/2023	Michelle McStay	Fwd: Parent Information
10/13/2023	Melillo, Christopher	Sad News
10/13/2023	June, Kathy	BOE Mailing – October 17,2023
10/13/2023	June, Kathy	Remaining BOE Meeting Items
10/15/2023	Melillo, Christopher	10/15/2023 Superintendent's Sunday Update
10/15/2023	Zukowski, Deborra	October 15, 2023 Week in Preview
10/15/2023	Zon Huang	Public Participation
10/16/2023	Zukowski, Deborra	Fwd: You Are

**NEWTOWN BOARD OF EDUCATION
MONTHLY FINANCIAL REPORT
SEPTEMBER 30, 2023**

SUMMARY

The third financial report for the year continues to provide year to date expenditures, encumbrances and now includes information for anticipated obligations. However, it is still early in the year and our account analysis has not yet begun. Therefore, in order to display a more realistic year-end balance, we have projected to fully expend all accounts associated with the major objects, professional services, purchased property services, property and miscellaneous.

It's important to note that we have not included projections in educational assistant sub-object as this is an area that currently has many unfilled positions. These accounts will be analyzed over the course of the next month and reclassifications and or projections will be included in the October/November report. We also have reclassifications and budget transfers to prepare in our administrative and certified teacher accounts.

During the month of September, the district spent approximately \$6.2M for operations. Approximately \$4.2M was spent on salaries with the remaining balance of \$2.0M spent on all other objects. All expenditures at this time appear to be within the normal limits.

MAJOR MOVERS

SALARY ACCOUNTS

The overall salary object currently displays a positive position; however, there are a few sub-accounts within this category that are experiencing pressure and will remain under close watch.

- **Non-certified accounts** – these accounts currently display a large overall projected balance due to open positions found in our para professional union. As of the end of September, we had a total of 22 openings; 5 classroom, 12 SPED and 5 Pre-K. The district has been advertising for these important support positions by distributing multiple flyers, attending a job fair and advertising on indeed and our district website.

In contrary, we are experiencing a large deficit in our Behavioral Tech positions. This was a major area of concern last year where we had to fill many of these positions by hiring an outside service. This year, the Board approved rate adjustments for this non-union group in an effort to eliminate the need for the outside service. We have funding available in our noncertified salary adjustment line that will be transferred in October/November into this account when a majority of these positions will hopefully be filled. As of this past month, we had 3 open positions that were supported by the outside service.

OTHER PURCHASED SERVICES

- **Out-of-district tuition** - this account is currently showing a positive balance; however, it is still early in the year and encumbrances are still incoming. This account also includes tuition for our magnet students which is currently contributing to this balance. The excess cost grant revenue also plays a role in this balance as it is applied to the out-of-district special education tuition costs. The offset is \$1,423,941 however; this budgeted grant amount was based off of last year's numbers. Come December first, we will submit our actual costs and number of out placed students to the state and the reimbursement will be adjusted. This revision will be reflected in the November/December financial update.

SUPPLIES

- All of our supply accounts are currently forecasted at a full spend at this time; however, included in this object is electricity which is currently under review as we are expecting some upcoming changes. If you recall last year, our virtual net metering program was a home run, saving the district hundreds of thousands of dollars in energy costs. This program does run on a calendar year and at this time, we have just hit our credit cap. What this means is for the remaining last quarter of the year, we will no longer receive credits from Eversource until we begin with a new year in January. I will provide the board with an updated forecast in the next financial report.

ALL OTHER OBJECTS

Our account-by-account analysis will continue in the upcoming months and will provide more of an in-depth look at each account as more data becomes available. We will keep the board apprised of any issues or concerns as they arise.

Emergency Repairs

There were no emergency repairs over \$5,000 for the month of September.

Food Service Update

Our lunch program is its second year under the care of Chartwells. Now that they are more familiar with the district, our re-opening went off without a hitch. Our food service director, John Morris, is extremely passionate when it comes to providing our students with a variety of interesting and nutritionally balanced meals. John and his team are currently working on many new ideas for the upcoming year in conjunction with various marketing ideas, new concepts as well as a recycling program and waste management (more to come on this).

New this Year

This year we have introduced a second hot lunch to our elementary students in order to provide a larger variety of choice. At the Middle School we opened our “made to deli” Boar’s Head station where students can order a Boar’s Head sandwich or sub and have it just the way they like it! And at the High School, we introduced a new concept bar called “Revolution Noodle” (see the picture below). This station provides students with a made to order noodle bowl where they can add a variety of topping that include protein and fresh vegetables. The station will be open three days per week and has already proven to be a big hit and will become a permanent station in the near future.

As you are aware, this year we converted back to paid lunches. Last year the state had provided funding for all student meals as a way to transition back into paid meals. The Board of Education also supplemented this program and meals were free of charge for the entire year. However, this year meals are now paid for by families and despite increasing costs for food and supplies, we have decided to maintain our pre-covid meal price structure.

As expected, the transition has proven to show less participation (approximately 10%) but we are confident with all of the marketing, new concepts and exciting programs (mood boost, discovery kitchen and students’ choice) we will have another successful year. Check out our district website for information on school lunch menus and also the attachment that contains information on some of these exciting programs.



Tanja Vadas
Director of Business
October 13, 2023

September – October 2023



Discovery Kitchen – Power up

Our Discovery Kitchen theme for the month of September focuses on teaching students how to fuel their bodies with nutritious foods through “Power Up.” From competitive athletes working to achieve peak performance to any student looking to power through their active day, chef demonstrations and interactive events will show students how eating the right foods can help them perform at their best and stay ahead of the game.

Some of the choices we are providing:

- Elementary – Sun butter fun lunch with Fresh Fruit, Yogurt, and whole grain Cookie
- Middle School & High School are doing variations of Fajita bowls with chicken and Vegetarian options.

Discovery Kitchen – Seed to Table

Starting in October Newtown Public Schools and Chartwells K12 is committed to partnering with local farmers and suppliers. More than 60 percent of our produce is sourced from local farms right here in the state of Connecticut. Through the farm to school program, students can gain access to healthy, local foods, as well as learning opportunities, including school gardens, cooking demonstrations, nutrition and wellness education and farm field trips.

Some of the choices in October are listed below with the local CT Grown section

CT Grown

At the core, farm to school is built for and by communities, with all of us working together to cultivate a better future for us all. Farm to school brings together a community of individuals across sectors, generations, and interests—farmers, parents, students, advocates, teachers, food service workers, and lawmakers—who all share a common vision of an abundant, nourishing, and equitable food system.

Throughout October, our activities will be focused on celebrating achievements, sharing stories of collaboration and community, and highlighting progress toward racial equity in farm to school, so that we can continue to grow stronger, together.

With Sardilli Produce as a partner in this we will be offering these choices:

- Local Baked Potato Bar which will feature toppings of Broccoli, Bacon, Sour Cream & Cheddar Cheese at the High School, Middle and Intermediate schools.
- Local Tomatoes are a significant presence in our various salads like Cobb, Catalina Roast Turkey And Mediterranean chopped which are provided at all three school levels.
- The local squash has a popular flare with students and is served sautéed on the hot line.



Emerging research has shown that the foods we eat most often may have an effect on how we feel, not just physically, but mentally. When a person eats Mood Boost foods regularly, especially nutrient-rich fruit and vegetables, it can help to elevate his or her mood and enhance their sense of well-being. Mood Boost foods contain vitamins, minerals and antioxidants that communicate with our brain to support personal characteristics such as happy, alert, strong, calm and confident.

Elementary and middle school students are the ideal groups for the Mood Boost program. This group of students, known as Generation Z, enjoy the fun and social elements of eating which Mood Boost delivers. Our aim is to create a fun food environment where students leave the cafeteria happier and healthier than when they came in.

Mood Boost encourages students to select and eat fruits and vegetables made according to recipes developed by our chefs that are colorful, delicious and enticing. When you combine the recipes with fun giveaways for students to enjoy, collect and take home, it creates a perfect opportunity to encourage students to eat more fruits and vegetables that can improve their health and mood.

This year's program will begin in the Month of November with 7 consecutive weeks. The Mood Boost program will take place at all 4 elementary schools, once this is complete the Mood Boost will then be executed for 7 weeks at both the Newtown Middle School and Reed Intermediate.



Introducing in October:

SO DELI

Made to Order Deli – Newtown Middle School

Introducing So Deli, a station featuring seasonal sandwiches that incorporate whole grain breads and wraps, fresh, dark leafy greens, brightly colored vegetables, reduced fat cheeses, lean roasted meats, poultry and water packed tuna. This concept provides a flexible deli menu that is easily customizable to be applied to any and every deli station, in any size location. So Deli is an excellent venue for featuring locally sourced products, such as vegetables and fresh bread and rolls. So Deli incorporates a variety of service options and various condiments which can be customized to fit any size location. Smaller accounts may find it easier to focus on premade sandwiches, while larger accounts may prefer to utilize the Made to-order concept.



Noodles are always a good idea!

Revolution Noodle is a program that was developed to respond to guests' demands for authentic Asian cuisine. This concept is designed to be prepared exhibition-style, which gives your guests a fresh meal assembled to order. The key to this station is utilizing the freshest produce, specific noodles, and of course, authentic broths— the cornerstones of the cuisine. Our program includes three authentic broths, Beef Pho, Pork Ramen, and a Thai-style vegetarian and combines elements of Pho and Ramen into our very own brand, Revolution Noodle.



**NEWTOWN BOARD OF EDUCATION
2023-24 BUDGET SUMMARY REPORT
FOR THE MONTH ENDING SEPTEMBER 30, 2023**

OBJECT CODE	EXPENSE CATEGORY	EXPENDED 2022-2023	2023-2024 APPROVED BUDGET	YTD TRANSFERS 2023-2024	CURRENT BUDGET	YTD EXPENDITURE	ENCUMBER	BALANCE	ANTICIPATED OBLIGATIONS	PROJECTED BALANCE	% EXP
GENERAL FUND BUDGET											
100	SALARIES	\$ 53,194,333	\$ 55,194,736	\$ 170,000	\$ 55,364,736	\$ 7,281,835	\$ 45,751,787	\$ 2,331,114	\$ 1,704,545	\$ 626,569	98.87%
200	EMPLOYEE BENEFITS	\$ 11,895,679	\$ 12,775,678	\$ 21,500	\$ 12,797,178	\$ 3,655,282	\$ 7,263,560	\$ 1,878,336	\$ 1,868,336	\$ 10,000	99.92%
300	PROFESSIONAL SERVICES	\$ 606,860	\$ 597,698	\$ -	\$ 597,698	\$ 111,402	\$ 46,892	\$ 439,404	\$ 439,404	\$ -	100.00%
400	PURCHASED PROPERTY SERV.	\$ 1,770,926	\$ 1,807,982	\$ -	\$ 1,807,982	\$ 483,194	\$ 494,877	\$ 829,911	\$ 829,911	\$ -	100.00%
500	OTHER PURCHASED SERVICES	\$ 10,671,028	\$ 10,779,567	\$ (10,000)	\$ 10,769,567	\$ 2,536,900	\$ 6,822,826	\$ 1,409,841	\$ 856,730	\$ 553,111	94.86%
600	SUPPLIES	\$ 3,195,208	\$ 3,177,330	\$ -	\$ 3,177,330	\$ 657,868	\$ 166,669	\$ 2,352,792	\$ 2,352,792	\$ -	100.00%
700	PROPERTY	\$ 540,847	\$ 560,749	\$ (181,500)	\$ 379,249	\$ 100,446	\$ 25,350	\$ 253,453	\$ 253,453	\$ -	100.00%
800	MISCELLANEOUS	\$ 75,483	\$ 75,911	\$ -	\$ 75,911	\$ 57,469	\$ 4,889	\$ 13,554	\$ 13,554	\$ -	100.00%
910	SPECIAL ED CONTINGENCY	\$ -	\$ 100,000	\$ -	\$ 100,000	\$ -	\$ -	\$ 100,000	\$ -	\$ 100,000	0.00%
TOTAL GENERAL FUND BUDGET		\$ 81,950,365	\$ 85,069,651	\$ -	\$ 85,069,651	\$ 14,884,394	\$ 60,576,851	\$ 9,608,406	\$ 8,318,726	\$ 1,289,680	98.48%

900 TRANSFER NON-LAPSING (unaudited) \$ 184,274
this amount has been recommended for transfer into the BoE's Non-Lapsing Fund

GRAND TOTAL		\$ 82,134,639	\$ 85,069,651	\$ -	\$ 85,069,651	\$ 14,884,394	\$ 60,576,851	\$ 9,608,406	\$ 8,318,726	\$ 1,289,680	98.48%
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OBJECT CODE	EXPENSE CATEGORY	2023-2024		YTD		YTD		ANTICIPATED OBLIGATIONS	BALANCE	PROJECTED BALANCE	% EXP
		EXPENDED 2022-2023	APPROVED BUDGET	TRANSFERS 2023-2024	CURRENT BUDGET	EXPENDITURE	ENCUMBER				
100	SALARIES										
	Administrative Salaries	\$ 4,208,912	\$ 4,253,224	\$ 20,970	\$ 4,274,194	\$ 898,715	\$ 3,413,044	\$ 4,415	\$ (37,565)	\$ (41,980)	100.98%
	Teachers & Specialists Salaries	\$ 33,987,611	\$ 35,332,530	\$ (16,025)	\$ 35,316,505	\$ 4,150,836	\$ 31,117,552	\$ 48,117	\$ (148,800)	\$ 196,917	99.44%
	Early Retirement	\$ 89,000	\$ 13,000	\$ -	\$ 13,000	\$ 13,000	\$ -	\$ -	\$ -	\$ -	100.00%
	Continuing Ed/Summer School	\$ 100,943	\$ 112,606	\$ 1,583	\$ 114,189	\$ 70,514	\$ 41,807	\$ 1,868	\$ 1,868	\$ -	100.00%
	Homebound & Tutors Salaries	\$ 184,211	\$ 198,460	\$ -	\$ 198,460	\$ 8,602	\$ 87,889	\$ 101,969	\$ 101,969	\$ 5,094	97.43%
	Certified Substitutes	\$ 787,241	\$ 760,023	\$ -	\$ 760,023	\$ 59,215	\$ 323,802	\$ 377,007	\$ 377,007	\$ -	100.00%
	Coaching/Activities	\$ 719,019	\$ 688,567	\$ -	\$ 688,567	\$ 1,120	\$ 4,000	\$ 683,448	\$ 683,448	\$ -	100.00%
	Staff & Program Development	\$ 128,011	\$ 130,250	\$ -	\$ 130,250	\$ 18,438	\$ 2,484	\$ 109,329	\$ 109,329	\$ -	100.00%
	CERTIFIED SALARIES	\$ 40,204,949	\$ 41,488,660	\$ 6,528	\$ 41,495,188	\$ 5,220,439	\$ 34,990,577	\$ 1,284,172	\$ 1,284,141	\$ 160,032	99.61%
	Supervisors & Technology Salaries	\$ 1,000,730	\$ 1,020,284	\$ 27,057	\$ 1,047,341	\$ 210,980	\$ 759,638	\$ 76,723	\$ 76,723	\$ (1,718)	100.16%
	Clerical & Secretarial Salaries	\$ 2,326,236	\$ 2,420,059	\$ 53,116	\$ 2,473,175	\$ 428,561	\$ 1,968,710	\$ 75,904	\$ 75,904	\$ 12,904	99.48%
	Educational Assistants	\$ 2,885,257	\$ 3,023,349	\$ -	\$ 3,023,349	\$ 218,011	\$ 2,385,621	\$ 419,717	\$ 419,717	\$ 794	86.14%
	Nurses & Medical Advisors	\$ 892,743	\$ 957,221	\$ -	\$ 957,221	\$ 109,638	\$ 777,490	\$ 70,093	\$ 70,093	\$ 62,478	99.20%
	Custodial & Maint. Salaries	\$ 3,247,428	\$ 3,391,717	\$ 26,634	\$ 3,418,351	\$ 736,938	\$ 2,673,163	\$ 8,250	\$ 8,250	\$ (36,602)	101.07%
	Non-Certified Adj & Bus Drivers Salaries	\$ -	\$ 191,783	\$ 16,395	\$ 208,178	\$ -	\$ -	\$ 208,178	\$ 208,178	\$ -	0.00%
	Career/Job Salaries	\$ 158,051	\$ 180,335	\$ 1,714	\$ 182,049	\$ 25,019	\$ 152,732	\$ 4,298	\$ 4,298	\$ -	97.64%
	Special Education Svcs Salaries	\$ 1,378,049	\$ 1,437,033	\$ 28,556	\$ 1,465,589	\$ 207,418	\$ 1,429,744	\$ (171,572)	\$ (171,572)	\$ -	111.71%
	Security Salaries & Attendance	\$ 652,247	\$ 700,574	\$ -	\$ 700,574	\$ 61,950	\$ 614,113	\$ 24,512	\$ 24,512	\$ 24,512	96.50%
	Extra Work - Non-Cert.	\$ 123,294	\$ 115,721	\$ 10,000	\$ 125,721	\$ 41,537	\$ -	\$ 84,184	\$ 84,184	\$ -	100.00%
	Custodial & Maint. Overtime	\$ 290,185	\$ 236,000	\$ -	\$ 236,000	\$ 20,038	\$ -	\$ 215,962	\$ 215,962	\$ -	100.00%
	Civic Activities/Park & Rec.	\$ 35,166	\$ 32,000	\$ -	\$ 32,000	\$ 1,306	\$ -	\$ 30,695	\$ 30,695	\$ -	100.00%
	NON-CERTIFIED SALARIES	\$ 12,989,385	\$ 13,706,076	\$ 163,472	\$ 13,869,548	\$ 2,061,396	\$ 10,761,210	\$ 1,046,942	\$ 1,046,942	\$ 466,537	96.64%
	SUBTOTAL SALARIES	\$ 53,194,333	\$ 55,194,736	\$ 170,000	\$ 55,364,736	\$ 7,281,835	\$ 45,751,787	\$ 2,331,114	\$ 1,704,545	\$ 626,569	98.87%
200	EMPLOYEE BENEFITS										
	Medical & Dental Expenses	\$ 8,772,698	\$ 9,556,747	\$ -	\$ 9,556,747	\$ 2,463,411	\$ 7,066,134	\$ 27,202	\$ 27,202	\$ -	100.00%
	Life Insurance	\$ 89,281	\$ 88,000	\$ -	\$ 88,000	\$ 21,477	\$ -	\$ 66,523	\$ 66,523	\$ -	100.00%
	FICA & Medicare	\$ 1,651,662	\$ 1,702,277	\$ -	\$ 1,702,277	\$ 264,895	\$ -	\$ 1,437,382	\$ 1,437,382	\$ -	100.00%
	Pensions	\$ 905,844	\$ 931,687	\$ 21,500	\$ 953,187	\$ 686,823	\$ 750	\$ 265,614	\$ 265,614	\$ -	100.00%
	Unemployment & Employee Assist.	\$ 52,413	\$ 81,600	\$ -	\$ 81,600	\$ -	\$ -	\$ 81,600	\$ 81,600	\$ 10,000	87.75%
	Workers Compensation	\$ 423,781	\$ 415,367	\$ -	\$ 415,367	\$ 218,675	\$ 196,676	\$ 16	\$ 16	\$ -	100.00%
	SUBTOTAL EMPLOYEE BENEFITS	\$ 11,895,679	\$ 12,775,678	\$ 21,500	\$ 12,797,178	\$ 3,655,282	\$ 7,263,560	\$ 1,878,336	\$ 1,868,336	\$ 10,000	99.92%

OBJECT CODE	EXPENSE CATEGORY	2023 - 2024		YTD		CURRENT BUDGET	YTD EXPENDITURE	ENCUMBER	BALANCE	ANTICIPATED OBLIGATIONS	PROJECTED BALANCE	% EXP
		EXPENDED 2022 - 2023	APPROVED BUDGET	TRANSFERS 2023 - 2024								
300	PROFESSIONAL SERVICES											
	Professional Services	\$ 497,713	\$ 436,643	\$ -	\$ -	\$ 436,643	\$ 87,791	\$ 23,902	\$ 324,950	\$ 324,950	\$ -	100.00%
	Professional Educational Serv.	\$ 109,147	\$ 161,055	\$ -	\$ -	\$ 161,055	\$ 23,611	\$ 22,990	\$ 114,454	\$ 114,454	\$ -	100.00%
	SUBTOTAL PROFESSIONAL SERV.	\$ 606,860	\$ 597,698	\$ -	\$ -	\$ 597,698	\$ 111,402	\$ 46,892	\$ 439,404	\$ 439,404	\$ -	100.00%
400	PURCHASED PROPERTY SERV.											
	Buildings & Grounds Contracted Svc.	\$ 691,410	\$ 691,550	\$ -	\$ -	\$ 691,550	\$ 323,084	\$ 265,696	\$ 102,770	\$ 102,770	\$ -	100.00%
	Utility Services - Water & Sewer	\$ 122,590	\$ 135,620	\$ -	\$ -	\$ 135,620	\$ 15,386	\$ -	\$ 120,234	\$ 120,234	\$ -	100.00%
	Building, Site & Emergency Repairs	\$ 507,151	\$ 475,000	\$ -	\$ -	\$ 475,000	\$ 53,289	\$ 46,788	\$ 374,923	\$ 374,923	\$ -	100.00%
	Equipment Repairs	\$ 218,088	\$ 249,170	\$ -	\$ -	\$ 249,170	\$ 44,710	\$ 42,217	\$ 162,243	\$ 162,243	\$ -	100.00%
	Rentals - Building & Equipment	\$ 231,687	\$ 256,642	\$ -	\$ -	\$ 256,642	\$ 46,725	\$ 140,176	\$ 69,740	\$ 69,740	\$ -	100.00%
	Building & Site Improvements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	100.00%
	SUBTOTAL PUR. PROPERTY SERV.	\$ 1,770,926	\$ 1,807,982	\$ -	\$ -	\$ 1,807,982	\$ 483,194	\$ 494,877	\$ 829,911	\$ 829,911	\$ -	100.00%
500	OTHER PURCHASED SERVICES											
	Contracted Services	\$ 1,299,344	\$ 904,744	\$ (10,000)	\$ (10,000)	\$ 894,744	\$ 451,875	\$ 212,253	\$ 230,616	\$ 230,616	\$ -	100.00%
	Transportation Services	\$ 4,596,980	\$ 4,907,573	\$ -	\$ -	\$ 4,907,573	\$ 908,659	\$ 2,868,902	\$ 1,130,011	\$ 1,130,011	\$ -	100.00%
	Insurance - Property & Liability	\$ 443,316	\$ 446,219	\$ -	\$ -	\$ 446,219	\$ 234,819	\$ 174,569	\$ 36,831	\$ 36,831	\$ -	100.00%
	Communications	\$ 179,879	\$ 174,170	\$ -	\$ -	\$ 174,170	\$ 55,459	\$ 100,213	\$ 18,499	\$ 18,499	\$ -	100.00%
	Printing Services	\$ 25,262	\$ 22,966	\$ -	\$ -	\$ 22,966	\$ 4,699	\$ 139	\$ 18,128	\$ 18,128	\$ -	100.00%
	Tuition - Out of District	\$ 3,883,847	\$ 4,072,363	\$ -	\$ -	\$ 4,072,363	\$ 860,442	\$ 3,409,019	\$ (197,098)	\$ (750,209)	\$ 553,111	86.42%
	Student Travel & Staff Mileage	\$ 242,400	\$ 251,532	\$ -	\$ -	\$ 251,532	\$ 20,947	\$ 57,731	\$ 172,854	\$ 172,854	\$ -	100.00%
	SUBTOTAL OTHER PURCHASED SERV.	\$ 10,671,028	\$ 10,779,567	\$ (10,000)	\$ (10,000)	\$ 10,769,567	\$ 2,536,900	\$ 6,822,826	\$ 1,409,841	\$ 856,730	\$ 553,111	94.86%
600	SUPPLIES											
	Instructional & Library Supplies	\$ 944,749	\$ 792,074	\$ -	\$ -	\$ 792,074	\$ 285,850	\$ 112,496	\$ 393,728	\$ 393,728	\$ -	100.00%
	Software, Medical & Office Supplies	\$ 221,527	\$ 198,452	\$ -	\$ -	\$ 198,452	\$ 78,011	\$ 20,208	\$ 100,233	\$ 100,233	\$ -	100.00%
	Plant Supplies	\$ 398,008	\$ 365,600	\$ -	\$ -	\$ 365,600	\$ 100,432	\$ 30,645	\$ 234,523	\$ 234,523	\$ -	100.00%
	Electric	\$ 303,101	\$ 950,982	\$ -	\$ -	\$ 950,982	\$ 113,000	\$ -	\$ 837,982	\$ 837,982	\$ -	100.00%
	Propane & Natural Gas	\$ 472,827	\$ 469,981	\$ -	\$ -	\$ 469,981	\$ 27,337	\$ -	\$ 442,644	\$ 442,644	\$ -	100.00%
	Fuel Oil	\$ 93,031	\$ 94,098	\$ -	\$ -	\$ 94,098	\$ -	\$ -	\$ 94,098	\$ 94,098	\$ -	100.00%
	Fuel for Vehicles & Equip.	\$ 130,729	\$ 238,356	\$ -	\$ -	\$ 238,356	\$ 22,060	\$ -	\$ 216,296	\$ 216,296	\$ -	100.00%
	Textbooks	\$ 631,236	\$ 67,787	\$ -	\$ -	\$ 67,787	\$ 31,178	\$ 3,320	\$ 33,288	\$ 33,288	\$ -	100.00%
	SUBTOTAL SUPPLIES	\$ 3,195,208	\$ 3,177,330	\$ -	\$ -	\$ 3,177,330	\$ 657,868	\$ 166,669	\$ 2,352,792	\$ 2,352,792	\$ -	100.00%

OBJECT CODE	EXPENSE CATEGORY	2023-2024		YTD TRANSFERS 2023-2024		CURRENT BUDGET	YTD EXPENDITURE	ENCUMBER	BALANCE	ANTICIPATED OBLIGATIONS	PROJECTED BALANCE	% EXP
		EXPENDED 2022-2023	APPROVED BUDGET	2023-2024	2023-2024							
700	PROPERTY											
	Technology Equipment	\$ 355,440	\$ 422,996	\$ (181,500)	\$ 241,496	\$ 95,701	\$ 18,414	\$ 127,381	\$ 127,381	\$ 127,381	\$ -	100.00%
	Other Equipment	\$ 185,407	\$ 137,753	\$ -	\$ 137,753	\$ 4,745	\$ 6,936	\$ 126,072	\$ 126,072	\$ 126,072	\$ -	100.00%
	SUBTOTAL PROPERTY	\$ 540,847	\$ 560,749	\$ (181,500)	\$ 379,249	\$ 100,446	\$ 25,350	\$ 253,453	\$ 253,453	\$ 253,453	\$ -	100.00%
800	MISCELLANEOUS											
	Memberships	\$ 75,483	\$ 75,911	\$ -	\$ 75,911	\$ 57,469	\$ 4,889	\$ 13,554	\$ 13,554	\$ 13,554	\$ -	100.00%
	SUBTOTAL MISCELLANEOUS	\$ 75,483	\$ 75,911	\$ -	\$ 75,911	\$ 57,469	\$ 4,889	\$ 13,554	\$ 13,554	\$ 13,554	\$ -	100.00%
910	SPECIAL ED CONTINGENCY	\$ -	\$ 100,000	\$ -	\$ 100,000	\$ -	\$ -	\$ 100,000	\$ 100,000	\$ -	\$ 100,000	0.00%
	TOTAL LOCAL BUDGET	\$ 81,950,365	\$ 85,069,651	\$ -	\$ 85,069,651	\$ 14,884,394	\$ 60,576,851	\$ 9,608,406	\$ 9,608,406	\$ 8,318,726	\$ 1,289,680	98.48%
900	Transfer to Non-Lapsing											
	GRAND TOTAL	\$ 81,950,365	\$ 85,069,651	\$ -	\$ 85,069,651	\$ 14,884,394	\$ 60,576,851	\$ 9,608,406	\$ 9,608,406	\$ 8,318,726	\$ 1,289,680	98.48%

SPECIAL REVENUES	EXPENSED 2022-2023	APPROVED BUDGET	STATE PROJECTE	I-Jan	PROJECTED 1-Mar	ESTIMATED Total	VARIANCE to Budget	FEB DEPOSIT	MAY DEPOSIT	% TO BUDGET
EXCESS COST GRANT REVENUE										
Special Education Svcs Salaries ECG	\$ (7,750)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	#DIV/0!
Transportation Services - ECG	\$ (489,642)	\$ (408,408)	\$ -	\$ (408,408)	\$ -	\$ -	\$ -	\$ -	\$ -	100.00%
Tuition - Out of District ECG	\$ (1,373,396)	\$ (1,423,941)	\$ -	\$ (1,423,941)	\$ -	\$ -	\$ -	\$ -	\$ -	100.00%
Total	\$ (1,870,788)	\$ (1,832,349)	\$ -	\$ (1,832,349)	\$ -	\$ -	\$ -	\$ -	\$ -	100.00%
SDE MAGNET TRANSPORTATION GRANT	\$ (13,000)	\$ (15,600)	\$ -	\$ (15,600)	\$ -	\$ -	\$ -	\$ -	\$ -	100.00%
OTHER REVENUES										
BOARD OF EDUCATION FEES & CHARGES - SERVICES										
LOCAL TUITION		\$37,620	\$37,620	\$37,620	\$37,620	\$0	\$37,620	\$0	\$0	0.00%
HIGH SCHOOL FEES FOR PARKING PERMITS		\$30,000	\$30,000	\$30,000	\$30,000	\$0	\$30,000	\$0	\$0	0.00%
MISCELLANEOUS FEES		\$6,000	\$6,000	\$6,000	\$6,000	\$0	\$6,000	\$0	\$0	0.00%
TOTAL SCHOOL GENERATED FEES		\$73,620	\$73,620	\$73,620	\$73,620	\$0	\$73,620	\$0	\$0	0.00%

2023 - 2024
NEWTOWN BOARD OF EDUCATION
TRANSFERS RECOMMENDED
SEPTEMBER 30, 2023

AMOUNT	FROM		TO	REASON
	CODE	DESCRIPTION		
ADMINISTRATIVE				
\$45,405	100	NON-CERTIFIED ADJ	100	CUSTODIAL & MAINT. SALARIES
				TO ADJUST SALARY BUDGETS FOR NEW CONTRACT RATES AND STAFFING CHANGES
\$45,405	TOTAL TRANSFER REQUEST			

2023 - 2024

**NEWTOWN BOARD OF EDUCATION
 DETAIL OF TRANSFERS RECOMMENDED
 SEPTEMBER 30, 2023**

FROM		TO	
OBJECT CODE	AMOUNT	OBJECT CODE	AMOUNT
100	\$45,405	100	\$45,405
	NON-CERTIFIED ADJ		CUSTODIAL & MAINT. SALARIES
	\$45,405 001840880000-51271 DISTRICT - OTHER SERV		\$6,122 001900960000-51254 B&G - CUSTODIAL
			\$12,904 001900960000-51255 B&G - CUSTODIAL
			\$26,379 001900960000-51257 B&G - CUSTODIAL
			CUSTODIAL SALARIES - HOM
			CUSTODIAL SALARIES - RIS
			CUSTODIAL SALARIES - HS
	\$45,405		\$45,405
	TOTAL TRANSFER REQUEST		TOTAL TRANSFER REQUEST

BOE Grants Update

Grants and Support Impacting the 2023-24 School Year
10/17/2023



Newtown Public
School District

Entitlement Grants

Funder	Need to be Addressed	Award Value	Date Awarded/Expected
CSDE IDEA 611/619	Providing academic support and services to individuals with disabilities	\$989,469	October 2023
CSDE Title I	Assistance for children from low-income families	\$164,502	October 2023
CSDE Title II	Supporting Effective Instruction	\$58,256	October 2023
CSDE Title III	Instruction for ELL to improve language efficiency and academic achievement	\$7,682	November 2024
CSDE Title IV	Social and Emotional Learning and other needs	\$11,988	November 2023
CSDE Perkins Entitlement	Career and Technical Education learning opportunities	Anticipated \$41,000	November 2023
CSDE Right to Read	K-3 Reading Curriculum Implementation	\$123,000	January 2024 (Nov 22- Dec 24)
ARP Esser (Esser III)	COVID Relief; Last year of utilization (no salaries applied)	\$21,195	July 2020 - Sept 2024 \$1.2M total (9/24 deadline)

Competitive Grants

Funder	Need to be Addressed	Award Value	Date Awarded/Expected
VOCA Grant/CT Office of Victims Services	12/14 Recovery Support (NHS Social Worker and District Family Assistance Coordinator)	\$73,270 2 nd year of 2 years; final year of funding	June 2023 (June 2024 end date)
CT DOA	Hawley HVAC Funds up to 35%	Potential \$2.7 M	Expected Spring 2024 App due 12/31/23
CT DOA	Head O' Meadow HVAC Funds up to 35%	Potential \$165 K	Expected Spring 2024 App due 12/31/23
CT DOA	High School HVAC Funds up to 35%	Potential \$350 K	Expected Spring 2024 App due 12/31/23
NRWIB/CYEP	Summer work experience opportunities		MOVED (NYFS)
NRWIB/CYEP	Year-round work experience opportunities		MOVED (NYFS)

Competitive Grants

Funder	Need to be Addressed	Award Value	Date Awarded/Expected
CT CSDE	Dual Credit Capacity Building - HS	\$69,987	September 2023 (12/24-12/26 expenditure deadlines)

Probable Pilot Courses:

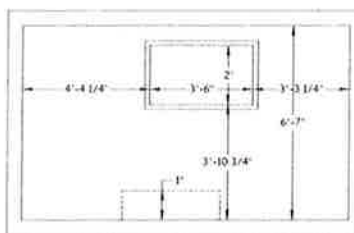
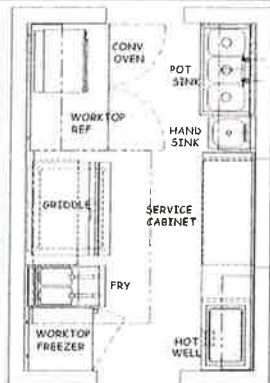
Comp and Reading for Native Spanish Speakers;
Latin;
Intro to Allied Health Professions;
Public Speaking;
Applied Research Science (Eastern)
Digital Imaging for Graphics Tech (Central)

Expenditure deadlines:

12/24 – Curriculum Development
12/26 – Other

Competitive Grants

Funder	Need to be Addressed	Award Value	Date Awarded/Expected
CSDE Perkins Supplemental Enhancement	Career and Technical Education learning opportunities - Food Truck CTE Advisory Board meeting Tues 10/24	\$44,000	June 2023



Competitive Grants

Funder	Need to be Addressed	Award Value	Date Awarded/Expected
NoVo Foundation Grant	Mental Health/ SEL Initiative Last year of funding	\$80,000	June 2023 2023/24 and/or 2024/25
CT DEMHS MMSSCG	Radio Upgrade and Hawley Wiring	Potential \$69,993.84 (up to 35% of project)	Declined Summer 2023
DOJ COPS	Radio Upgrade	Potential \$120,410 (up to 75% of project)	Fall 2023
CT DoPH	School Based Mental Health Center Expansion - NMS	\$37,340	Declined
CT CSDE	Primary Mental Health Program - early intervention/academic and SEL - SHS	\$20,000 ea. for 2 years	Today! Fall 2023 \$40,000 total
CT CSDE	NSLP - lunch equipment NHS - warmers Middlegate - milk cooler NMS - display (declined)	\$10,329 \$2,609 \$9,671.41	October 2023

Competitive Grants

Funder	Need to be Addressed	Award Value	Date Awarded/Expected
Olga Sipolin Foundation	Backpack Program	\$5,000	Winter/Spring 2024
Caraluzzi's	Backpack Program	\$1,000 \$2,000	Aug 2023 Jan/April 2024
PURA	Pegpetia - (Public Educational and Governmental Programming and Education Technology Investment Account)	\$58,400	June 2023
DoAg	CT Grown for CT Kids Grant ???	Up to \$50,000	Dec 2023
IACE	Italian Programming/Club Support Field Trip/AP exams	\$10,000	February 2023 Awarded \$10,000

Other Support/Income

Funder	Need to be Addressed	Award Value	Date Awarded/Expected
Child Health and Development Institute (CHDI)	Trauma/Mental Health Support and Student Support	Est. \$10,000	Fall 2023
Donor	Backpack program for students who are food insecure	Est. value \$25,000	Ongoing Support
Town of Newtown ARPA Funding	Project Adventure and Middlegate playground upgrades	\$127,000	Awarded March 2023; \$127,000

PTA grants, NEF grants, other opportunities.

Others TBD...

ASSUMPTIONS
2024-2025 BOARD OF EDUCATION BUDGET

- Special Education expenses are expected to maintain their growth trend, surpassing the expected rise in revenue allocated to the Board of Education. The expenses currently constitute 15.7% of the total education budget and have experienced a 15.3% increase over the past 5 years.
- The District needs to account for increased fixed costs, like contractual obligations and added inflation. These added costs are also expected to increase more than the revenue provided to the Board of Education.
- Sustained student support is essential for addressing a long-term trend of declining student performance, as measured by the State of Connecticut Performance Index.
- Town-wide collaboration, inclusive of all stakeholders, is crucial for developing and adopting a well-rounded and fiscally responsible budget that serves the diverse needs of the Newtown community.
- Staffing needs, class sizes, and resources may need to change in response to enrollment shifts and performance trends.
- The district's primary focus should be on student learning, which necessitates cultivating a growth mindset and allocating ample funds to facilitate ongoing enhancements in professional development, curriculum, and the provision of enhanced educational materials.
- Success and reputation of our schools is key to the long-term success of our community.

PRIORITIES
2024-2025 BOARD OF EDUCATION BUDGET

- Strategically allocate additional resources towards the implementation of state-of-the-art literacy programs, with a specific focus on supporting struggling students, aiming to substantially enhance reading performance, while cultivating a lifelong passion for reading and fostering critical thinking skills among all students.
- Designate funds for innovative mathematics programs and practices that integrate hands-on learning, real-world applications, and personalized support mechanisms, specifically targeting struggling students to enhance their mathematical performance and equip all students with essential problem-solving skills for the future.
- Concentrate resources towards activities that offer students a comprehensive education encompassing practical life skills, career preparation, clear career pathways, and post secondary readiness to guarantee a smooth transition into life after graduation.
- Continue to strategically invest in the technology infrastructure, devices, and software to ensure that Newtown graduates are proficient with the tools and practices needed to continue learning in the 21st century.
- Focus on school climate and staff development so that the Newtown Public School district continues to draw highly-qualified teachers and staff.
- Strengthen district, family, and community partnerships through enhanced programs and initiatives that promote collaboration, improved outcomes and more enriched educational experiences.
- Enhance parent, staff, and community communication processes and practices to ensure that there is open and honest two-way communication throughout the community.



Health Gr. 5

6 Curriculum Developers | Last Updated: Sunday, Sep 24, 2023 by Failla, Michelle

Unit Calendar by Year

Unit	Lessons	Au		Sep			Oct			Nov			Dec			Jan			Feb			Mar			Apr			May			Ju						
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36
Draft Introduction to Health & Wellnes...	0	█																																			
Draft Social and Emotional Health &...	0				█																																
Draft Disease Prevention (DP)	0							█																													
Draft Alcohol, Nicotine and other Drug...	0										█																										
Draft Nutrition Education & Physical...	0																█																				
Draft Human Growth & Sexual...	0																						█														
Draft Personal Safety (PS)	0																															█					

7 Units found

Previous Year



Unit Plan

Introduction to Health & Wellness (HW)

Reed Intermediate School / Grade 5 / Physical Education

Week 1 - Week 5 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purpose of the Introduction to Health & Wellness (HW) unit is to

- ~ introduce students to the wellness vocabulary, especially the 8 Dimensions of Wellness, which will lay the foundation for their Health Education and Health Literacy throughout their education.
- ~introduce students to the wellness concept that all choices have consequences on health and wellness.
- ~teach students the difference between Growth and Fixed Mindsets and using a Growth Mindset can improve personal wellness.

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Self Management
- Responsible decision-making
- Self awareness
- Self-respect
- Strengths/challenges
- Growth Mindset
- Goal setting
- Choices & Consequences
- Dimensions of Wellness

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: Applying knowledge about health and the eight dimensions of wellness (physical, social, intellectual, emotional, spiritual, environmental, occupational and financial) enables individuals to make informed choices about or improvements to their health now and in the future.

G2: All choices have consequences on health and wellness. Decision making enables individuals to understand positive and negative consequences of wellness choices.

G3: Health habits of daily living affect wellness each day.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

G1: What is Health? (F)

G1: What is Wellness? (F)

G1: What are the 8 Dimensions of Wellness? (F)

G1: What is your greatest strength and your biggest weakness/challenge in each dimension of wellness? (P)

G2: How can you improve your area of challenge?(P)

G3: What are the healthy habits of daily living for a child? (C)

G3: When you envision someone who is "healthy and well" what comes to mind? (C)

G4: Having a Growth Mindset is the first step to improving/achieving wellness.

G5: Achievement of goals requires a growth mindset instead of a fixed mindset.

G4: What is a Growth Mindset? (F)

G4: What is one way to achieve optimal personal wellness? (C)

G5: What is a Fixed Mindset?

G5: What are the differences between having a growth mindset and a fixed mindset? (C)

G5: Why is it important to set (and achieve) wellness goals? (P)

Content Knowledge

Critical facts and information that students are expected to **KNOW** at the end of the unit.

Students must know:

- The 8 Dimensions of Wellness (physical, intellectual, emotional, social, spiritual, environmental, occupational and financial).
- The 8 Dimensions of Wellness are interconnected - a choice in one effects the others.
- "All choices have consequences on all dimensions of wellness across the lifespan."
- The Health Habits of Daily Living

Students must be able to:

- Explain the 8 Dimensions of Wellness
- Demonstrate healthful habits and routines for each dimension of wellness
- Set and achieve realistic personal health and wellness SMART goals
- Advocate for personal health

 Wellness Wheel -grade 5 (2).pdf 

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 3-5

Core Concepts PK-12

Optimal Wellness and Disease Prevention (OWDP)

-  OWDP 1.2.5 Describe the benefits of personal health care practices such as tooth brushing and flossing, hand washing, covering a cough and sneeze, washing hair and bathing regularly.

Mental and Emotional Health (MEH)

-  MEH 1.1.5 Explain why sleep and rest are important for proper growth and good health.

Skills-Based PK-12

Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

-  INF 2.1.5 Identify and describe influences of peers, family, school, and community on health practices and behaviors.

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

4. IC 4.5.5 Demonstrate how to effectively ask for help to improve personal health.

Standard 5 Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

5. DM 5.5.5 Choose a healthy option when making a decision.
5. DM 5.6.5 Describe the final outcome of a health-related decision.

Standard 6 Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

6. GS 6.1.5 Set a realistic personal health goal.
6. GS 6.2.5 Track progress toward achieving a personal health goal. GS 6.3.5 Identify resources that can help achieve a personal health goal.

Standard 7 Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

7. SM 7.1.5 Describe practices and behaviors that reduce or prevent health risks.
7. SM 7.2.5 Demonstrate healthy practices and behaviors.
7. SM 7.3.5 Make a commitment to practice healthy behaviors.

Standard 8 Advocacy

Students will demonstrate the ability to advocate for personal, family, and community health.

8. AV 8.3.5 Demonstrate how to support self and others to make positive health choices.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- What is wellness?
- Life is a puzzle
- I Choose Wisely because all choices have consequences on wellness
- All about me: Gifts & Challenges
- Strength Chain <https://assets.ctfassets.net/p...>
- How do habits and hobbies influence health and wellness?

 Wellness Wheel -grade 5 (2).pdf  

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

- Health
- Wellness
- Personal Optimum Health & Wellness
- The 8 Dimensions of Wellness
 - Physical

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance (CTAHPERD)
- Connecticut Association of Administrators of Health Health & Physical Education (CAAHPE)

- Intellectual
- Emotional
- Social
- Spiritual
- Environmental
- Occupational
- Financial

Wellness Wheel**Consequence****Growth vs Fixed Mindset****Health Habits of Daily Living****SMART goals****Unit Plan**

- Connecticut State Department of Education (CSDE)
- Center for Disease Control and Prevention
<https://www.cdc.gov/>
- World Health Organization <https://www.who.int/>

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinella Media. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Videos [with Safelinks]:

- 8 Dimensions of Wellness defined
<https://video.link/w/QQNxd> [Time: 3:40.]

 8 Dimensions of Wellness defined  

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #1 Grade 5 Health & Wellness Reflection | Summative | Expository Essay**Student Portfolio**

Student will write a paragraph about a personal hobby and reflect on how personal decisions and actions affect health and wellness. Students must include unit vocabulary including the Dimensions of Wellness.

6 Standards Assessed

Unit #1 Grade 5 Health & Wellness Journal | Formative | Student Portfolio

This is the first unit of professional Health Education study for students in the fifth grade. Throughout the year, all students will answer guiding wellness questions then write a reflection at the end of each unit to add to their personal Health & Wellness Portfolio.

2 Standards Assessed

 Unit #1. Journal #1. Grade 5. Health & Wellness .pdf   Unit #1. Reflection #1. Grade 5 Health & Wellness .pdf 

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Social and Emotional Health & Wellness (SEHW)

Reed Intermediate School / Grade 5 / Physical Education

Week 6 - Week 10 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purpose of the Social and Emotional Health & Wellness (SEHW) unit is to help students

- ~better understand their own emotions
- ~become more self-aware of their thoughts and feelings
- ~understand that social and emotional wellness affects personal health & wellness
- ~learn and practice a variety of stress management techniques
- ~development empathy for the peers, their community and the world around them
- ~practice social skills in order to meet new people and make friends

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Self-Management
- Responsible decision-making
- Choices & Consequences
- Managing emotions
- Stress management
- Communication
- Friendship
- Empathy

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: Stress is a natural and normal emotion that occurs due to stimulating one, some or all five senses.

G2: A healthy lifestyle includes emotional awareness and regulation as well as stress management.

G3: Emotionally resilient individuals can cope appropriately with a variety of stressful situations they encounter with self and others.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

G1: What are the five human senses? (F)

G1: What is stress and what causes it?(C)

G1: What are the dimensions of stress? (F)

G1: What is the stress response? (C)

G1: Do you think stress is ever a good thing? (P)

G2: What are healthful ways to manage stress? (C)

G3: Why should you be an "upstander" instead of a bystander? (P)

G3: Positive self-management strategies minimize potentially negative influences on social and emotional health of self and others.

G4: Emotional stress effects all dimensions of wellness.

G5: There are a vast variety of human and material resources to help individuals process stress and other negative emotions.

G6: Social wellness includes both verbal and nonverbal communication with others and the ability to be empathetic.

G7: Having friends and being a friend is critical for social wellness.

G3: How can you avoid putting someone down when you are stressed or angry? (P)

G4: How can physical stress effect emotional stress and vice versa? (P)

G4: How does stress affect all dimensions of wellness? (C)

G4: What can happen when someone is teased or bullied? (C)

G5: Who are trusted adults in your life that can provide emotional support? (F)

G5: What should you do if you are feeling stressed or depressed? (P)

G5: What are some healthful tools and techniques for managing stress and negative emotions? (P)

G6: What can/should you do to build social skills? (C)

G6: What does it mean to be empathetic? (C)

G7: Who is a friend? (C)

G7: How do you make friends? (P)

Content Knowledge

Critical facts and information that students are expected to KNOW at the end of the unit.

Students must know:

- All choices have consequences on wellness
- Five human senses and their role in the stress response
- Three types of stress and what stress feels like
- A variety of stress management tools
- Stress Management strategies and techniques
- Mindfulness
- Emotional Wellness affects all other dimensions of wellness
- How to correctly wear their backpack because physical stress can lead to emotional stress

Students must be able to:

- Identify and verbalize their emotions
- Know where to locate healthful resources to aid in stress management
- Seek and find assistance with negative feelings
- Practice/demonstrate a variety of healthful Stress Management Skills and strategies
- Utilize the Zones of Regulation and the Mood Meter
- Practice time management
- Practice/demonstrate wearing their back pack correctly

Critical Skills

Critical skills that students are expected to be able to DO at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 3-5

Core Concepts PK-12

Violence Prevention (VP)

- VP 1.1.5 Summarize the impact of teasing or bullying others.
- VP 1.2.5 Identify nonviolent ways to manage anger.
- VP 1.3.5 Describe the difference between mean spirited behavior, bullying, and harassment.
- VP 1.4.5 Explain the difference between tattling and reporting aggressive or violent behavior.

Mental and Emotional Health (MEH)

- MEH 1.2.5 Explain what it means to be mentally or emotionally healthy.
- MEH 1.3.5 Describe the relationship between feelings and behavior and describe appropriate ways to express a variety of feelings (i.e. anger, happiness, sadness, frustration, excitement, etc.)
- MEH 1.6.5 Explain the importance of talking with parents and other trusted adults about feelings.
- MEH 1.7.5 Describe the importance of being aware of one's own feelings and of being sensitive to the feelings of others.
- MEH 1.8.5 Give examples of prosocial behaviors (e.g., helping others, being respectful of others, cooperation, consideration)
- MEH 1.9.5 Explain the importance of telling an adult if someone is in danger of hurting themselves or others.

Skills-Based PK-12

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- IC 4.1.5 Demonstrate effective verbal and nonverbal communication skills.
- IC 4.2.5 Demonstrate empathetic, compassionate, and supportive behavior toward others.
- IC 4.4.5 Demonstrate healthy ways to manage or resolve conflict.
- IC 4.5.5 Demonstrate how to effectively ask for help to improve personal health.

Standard 5 Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

- DM 5.2.5 Decide when help is needed and when it is not needed to make a healthy decision.
- DM 5.5.5 Choose a healthy option when making a decision.

Standard 7 Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

- SM 7.2.5 Demonstrate healthy practices and behaviors.
- SM 7.3.5 Make a commitment to practice healthy behaviors.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

Stress 101: How do I feel and who can help?

Healthful Stress Management Techniques & Reflection:

- Mindfulness
- Rainbow Breathing
- Tapping
- Yoga

Attack of the Backpack:

- Physical stress -Do you wear your backpack correctly?

Understanding the Stress Response

- Watch videos & Reflect in journal

Backpack use.pdf _Rainbow_breathing.pdf

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health**Wellness****Personal Optimum Health & Wellness****The 8 Dimensions of Wellness**

- Physical
- Intellectual
- Emotional
- Social
- Spiritual
- Environmental
- Occupational
- Financial

Stress

- Stressors
- Five senses
- Stress Response

Stress Management Techniques

- Breathing
- Mindfulness
- Rainbow Breathing
- Tapping
- Yoga

Mood Meter**Zones of Regulation****Friend****Empathy****Up-stander versus bystander****Verbal versus non-verbal communication****Resources**

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)
- Connecticut Association of Administrators of Health Health & Physical Education (CAAHPE)
- Connecticut State Department of Education (CSDE)

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Sprenger, M. *Social Emotional Learning and the Brain*. ASCD. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Nemours KidsHealth:

<https://kidshealth.org/en/kids...> [Stress]

<https://kidshealth.org/en/pare...> [Backpack]

Videos (with Safe Links):

- "Why do we flip our lid?" <https://video.link/w/B4qxd> [Time: 6:47 minutes]
- "Social Skills for Kids" <https://video.link/w/8Cqxd> [Time: 5:56 minutes]
- "Ocean Waves for Relaxing, Study, Work, Calming Stress relief" <https://video.link/w/DRwxd>
- Marine Aquarium <https://video.link/w/VQwxd>

District resources

- School nurse
- Guidance Counselors
- School Social worker
- School Psychologist

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #2. Reflection #2. Grade 5 SE | Summative | Other written assessments

During this unit, students will participate in several skills workshops, "Think, Pair, Share," "Turn & Talks", "What if..." exercises

 Unit #2. Reflection #2. Grade 5. SE (2).pdf

13 Standards Assessed

Unit #2. Journal #2. Grade 5. Social & Emotional Wellness | Formative | Other written assessments

Student will respond to questions about their social and emotional dimensions of wellness.

 Unit #2. Journal #2. Grade 5. SE.pdf

3 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Disease Prevention (DP)

Reed Intermediate School / Grade 5 / Physical Education

Week 11 - Week 16 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purpose of the Disease Prevention (DP) unit is to help students:

- ~ improve their Health Literacy
- ~ understand and utilize the Universal Precautions for disease prevention
- ~ understand other healthful behaviors and practices that would prevent disease/reduce health-risks for each dimension of wellness
- ~ learn to reduce or eliminate exposure to health risks that may increase their chances of incurring disease
- ~ engage and empower students to choose healthy behaviors and make any needed changes that will reduce the risk of developing sickness, disease and other illness

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Self-respect
- Wellness Skills
- Self-management
- Systems
- Choices & Consequences
- Communication
- Advocacy

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: There are universal precautions for disease prevention.

G2: Applying knowledge of the immune system and its organs enables students to make informed choices about their health and disease prevention now and in the future.

G3: Some diseases, illnesses and infections are communicable while others are not. Knowledge of germ types enables students to prevent transmission of diseases in order to protect themselves and others.

G4: Health literate individuals know when to seek medical help for illness and to follow treatment plans.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

G1: What are the universal precautions for disease prevention?(F)

G1: What are the benefits to daily hygienic practices? (C)

G1: Which is the most important hygiene habit for children? (P)

G2: What does the immune system do? (F)

G2: How doesdoes the immune system and its organs prevent or cure illness? (C)

G2: How can individuals boost their immune system? (P)

G3: What is the difference between a communicable (infectious) and a noncommunicable (noninfectious) disease?(F)

G3: What are the four pathogens that cause disease? (F)

G4: Trusted adults and medical professionals can help an individual avoid or manage disease/infection.

G3: What are some of the ways humans become infected with germs and/or diseases? (C)

G3: How can an individual prevent acquiring a communicable disease? (C)

G3: What are the consequences of not practicing disease prevention strategies? (C)

G4: What does it mean to be health literate? (F)

G4: When should someone seek medical treatment and when is it okay not to? (P)

G5: Who are the trusted adults/professionals that can help an individual treat/manage disease or infection? (F)

Content Knowledge

Critical facts and information that students are expected to **KNOW** at the end of the unit.

Students must know

- the universal precautions for disease prevention
- ways to prevent disease, injury
- healthful behaviors and practices that would prevent disease/reduce health-risks for each dimension of wellness (i.e "tick check")
- who and how to ask for help with disease or injury
- the difference between communicable and noncommunicable disease

Students must demonstrate/practice

Universal Precautions for disease prevention

- proper hand-washing, coughing, sneezing techniques, nose cleaning
- healthful habits and hobbies of daily living
- how to support self and others to make healthful choices
- empathy and sympathy towards others

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 3-5

Core Concepts PK-12

Optimal Wellness and Disease Prevention (OWDP)

- OWDP 1.1.5 Describe ways to prevent the spread of germs that cause infectious diseases.
- OWDP 1.2.5 Describe the benefits of personal health care practices such as tooth brushing and flossing, hand washing, covering a cough and sneeze, washing hair and bathing regularly.
- OWDP 1.3.5 Define the terms communicable and noncommunicable disease and identify ways to help prevent disease (e.g. HIV, diabetes, cancer, heart disease).

OWDP 1.4.5 Describe symptoms that prevent a person from daily activities (i.e. going to school, practices, playing with friends, etc.).

OWDP 1.5.5 Develop an awareness and empathy for health problems associated with common childhood chronic diseases or conditions such as asthma, allergies, diabetes, and epilepsy.

OWDP 1.6.5 Describe the importance of seeking help and treatment for diseases.

Skills-Based PK-12

Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

INF 2.1.5 Identify and describe influences of peers, family, school, and community on health practices and behaviors.

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

IC 4.2.5 Demonstrate empathetic, compassionate, and supportive behavior toward others.

IC 4.5.5 Demonstrate how to effectively ask for help to improve personal health.

Standard 7 Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

SM 7.1.5 Describe practices and behaviors that reduce or prevent health risks.

SM 7.2.5 Demonstrate healthy practices and behaviors.

SM 7.3.5 Make a commitment to practice healthy behaviors.

Standard 8 Advocacy

Students will demonstrate the ability to advocate for personal, family, and community health.

AV 8.3.5 Demonstrate how to support self and others to make positive health choices.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- Wellness Question(s) of the Week (WQW)
- Immunity Community
- Daily Habits of Healthful Living
- Wellness Reflection in Journal
- Tick Check!

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health
Wellness
Personal Optimum Health & Wellness
Universal Precautions
Immune System
Hygiene
Communicable disease
Noncommunicable disease
Immune System
Immunity

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- Centers for Disease Control & Prevention (CDC)
- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance (CTAHPERD)
- Connecticut State Department of Education (CSDE)
- The Newtown Health District, 3 Primrose Street, Newtown, CT

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020

Immunization
 Antibiotic
 Prescription drug (Rx)
 Over the Counter (OTC) medication
 Germs

- Bacteria
- Virus
- Fungus
- Protozoan

 Lyme Disease & Prevention

- Tick check
- Deer tick
- Dog tick

Unit Plan

- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Books to read to students:

- Gelman, R.G. Body Battles. Scholastic (1992)

Nemours Kids Health:

- <https://kidshealth.org/en/kids...>

Videos (with Safe Links):

- "Your Magic Doctor" <https://video.link/w/jLqxd> [Time: 21:42 minutes]
- "How to perform a tickcheck." <https://video.link/w/n1jyd> [Time: 2:06]

Resources: :

- Failla, M. *Germs & Universal Precautions & the Immune System*. Updated 2022 [Slide show]
- Dalton, A. *Lyme Disease*. Newtown Public Schools. 2008 [Slide show]
- School nurse

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #3. Grade 5. Disease Prevention Exit Slip | Summative | Written Test

[Unit #3. Grade 5. Disease Prevention Exit Slip](#)

3 Standards Assessed

Unit #3. Grade 5. Reflection on Disease Prevention | Summative | Other written assessments

[Unit #3. Journal #3. Grade 5. Disease Prevention.pdf](#)

3 Standards Assessed

Unit #3. Grade 5. Adaptive Disease Prevention | Summative | Written Test

This is a Google form multiple choice adapted for students in Special Education in order to check for understanding.

<https://forms.gle/7GDQ1oaKbWSU24c59>

2 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Alcohol, Nicotine and other Drugs (ANOD)

Reed Intermediate School / Grade 5 / Physical Education

Week 17 - Week 24 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purposes of the Alcohol, Nicotine and Other Drugs (ANOD) unit, are to help students:

- ~ acquire functional health knowledge about the dangers of alcohol, smoking products, and a variety of other substances
- ~ acquire knowledge of law regarding substance and drug use/abuse
- ~ understand the purpose of medicine
- ~ practice skills needed to adopt and maintain healthy behaviors throughout their lifespan.

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Safety
- Personal Wellness
- Personal Influences
- Choices & Consequences
- Disease Prevention
- Analysis of influences
- Advocacy
- Self-management
- Responsible decision-making

Generalizations

*Critical conceptual relationships that students are expected to **UNDERSTAND** at the end of the unit.*

G1: Use of various substances have positive and negative consequences on personal optimal wellness.

G2: Substance use and abuse has short and long-term affects on individuals, families, and communities.

G3: Family, peers, media, culture, and technology influence substance use.

G4: Family, school, and community resources are available to support individuals.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

G5: Advocating for personal wellness is a life-skill.

G6: There are benefits to being alcohol, nicotine, and drug-free.

G7: There are policies and laws that should be followed regarding the use of certain substances.

G1: What is a drug versus medicine? (F)

G1: What is personal optimal wellness? (F)

G1: How does one know what their personal optimal wellness is? (C)

G1: How does using/abusing drugs affect each dimension of wellness? (C)

G2: What are some of the short and long-term consequences to substance use/abuse? (F)

G2: What is addiction? (F)

G2: What are the Stages of Addiction? (F)

G2: How do people progress (or not) through the stages of addiction? (C)

G3: How do family, peers, media, and technology influence substance abuse? (C)

G3: Can addiction be cured? (P)

G4: What are the community resources available to individuals struggling with substance abuse? (F)

G4: Who are the people that can help you when there is substance use/abuse? (F)

G4: How can people access support for substance abuse? (C)

G5: What would you do if someone offered you drugs? (P)

G5: What would you do if you witnessed someone using drugs or driving under the influence? (P)

G6: Which is better, prevention or cure? (P)

G6: What are the benefits to being alcohol, nicotine, and drug free?(C)

G7: The legal drinking/smoking age in the United States is 21 years. Should this be changed? (P)

G7: What would you do if you witnessed someone using drugs or driving under the influence? (P)

Content Knowledge

Critical facts and information that students are expected to **KNOW** at the end of the unit.

Students must know

- Definitions of drug versus medicine
- Differences between drug use/abuse/misuse
- Short-term and long-term effects of drug use/abuse
- Dangers/consequences of smoking/vaping anything
- Dangers/consequences of secondhand smoke
- Alcohol and nicotine are highly addictive substances
- The Stages of Addiction
- The legal smoking/vaping and alcohol drinking ages in the US.
- Trusted adults
- What can happen if they go along with a decision that they know is wrong

Students must be able to:

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

- Confidently and assertively refuse offers to engage in substance use and/or underage drinking or other activities they know are wrong
- Have the self-confidence to avoid negative peer-pressure
- Seek and find help and reliable resources to improve wellness

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 3-5

Core Concepts PK-12

Standard 1 Students will comprehend concepts related to health promotion and disease prevention to enhance health.
Alcohol, Nicotine and Other Drugs (ANOD)

- ANOD 1.1.5 Explain why household products are harmful if intentionally absorbed or inhaled.
- ANOD 1.2.5 Explain the benefits and correct use of medicines and potential risks associated with inappropriate use of medicines.
- ANOD 1.3.5 Identify short- and long-term effects of alcohol and nicotine use, including secondhand effects.
- ANOD 1.4.5 Explain the dangers of experimenting with nicotine and alcohol
- ANOD 1.6.5 Identify the social impacts of ANOD use (e.g. family, friends, peers)

OWDP 1.4.5 Describe symptoms that prevent a person from daily activities (i.e. going to school, practices, playing with friends, etc.).

- OWDP 1.6.5 Describe the importance of seeking help and treatment for diseases.

Safety and Injury Prevention (SIP)

- SIP 1.2.5 List examples of dangerous or risky behaviors that might lead to injuries.
- SIP 1.11.5 Explain why household products are harmful if ingested or inhaled.

Skills-Based PK-12

Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

- INF 2.1.5 Identify and describe influences of peers, family, school, and community on health practices and behaviors.

Standard 5 Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

- DM 5.5.5 Choose a healthy option when making a decision.

Standard 7 Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

- SM 7.1.5 Describe practices and behaviors that reduce or prevent health risks.
- SM 7.2.5 Demonstrate healthy practices and behaviors.
- SM 7.3.5 Make a commitment to practice healthy behaviors.

Standard 8 Advocacy

Students will demonstrate the ability to advocate for personal, family, and community health.

- AV 8.3.5 Demonstrate how to support self and others to make positive health choices.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- Let's Breathe! Inhale/exhale
- Class Discussion/debate
- Demonstrations
- Journal writing
- Scenarios
- Cost of Smoking/Vaping/drinking
- Reed CHZ WYZLY T-shirts

[Template] _Cost of Smoking & Vaping & drinking alcohol Grade 5 (1).pdf ANOD T-shirt Advocacy .pdf

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health
Wellness
Personal Optimum Health & Wellness
Drug
Medicine
Prescription (Rx) versus Over-the-counter (OTC)
Drug use/abuse/misuse
Short-term effects of drug use/abuse
Long-term effects of drug use/abuse
Vaping
Tobacco
Nicotine
Inhalants
Inhale/exhale
Dangers/consequences of smoking/vaping anything
Secondhand smoke
Prevention
Addiction
The 6 Stages of Addiction

- Non-use
- Experimental
- Casual/Social
- Habitual
- Harmfully Involved
- Addiction

Tolerance
Peer-pressure
Financial Wellness
Self-respect

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- Connecticut State Department of Education (CSDE)
- Society of Health and Physical Educators (SHAPE)
- The National Association for Sport and Physical Education (NASPE)
- Connecticut Association for Health, Physical Education, Recreation and Dance (CTAHPERD)
- Connecticut Association of Administrators of Health Health & Physical Education (CAAHPE)
- Connecticut School Health Survey statistics

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill, 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.
- Super, G. *What Are Drugs?* Twenty First Century Books.1990.

Nemours Kids Health:

- <https://kidshealth.org/en/kids...> [Alcohol - resource for students]
- <https://kidshealth.org/content...> [Alcohol - resources for educator/parents]
- <https://kidshealth.org/content...> [Vaping, smoking, nicotine]
- <https://kidshealth.org/content...> [Drugs-resources]

Posters:

- *SUCKED IN*. Nasco Education
- *Vaping-e-cigs*. Nasco Education
- *Tobacco Industry Poster Child*. tobaccofacts.org

- *If what happened on your inside happened on your outside, would you still smoke?* American Lung Association

District Resources:

- Failla, M.Y. "ANOD" Newtown Public Schools. Updated 2022.
- Officer Will Chapman, Newtown SRO
- Library media center
- School Nurse

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #4. Reflection #4. Grade 5. ANOD | Summative | Other written assessments

8 Standards Assessed

 Unit #4. Reflection #4. Grade 5. ANOD. (1).pdf 

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Nutrition Education & Physical Activity (NEPA)

Reed Intermediate School / Grade 5 / Physical Education

Week 25 - Week 32 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purpose of the Nutrition Education & Physical Activity (NEPA) unit is to:

- ~empower students with the knowledge, skills, and dispositions to make healthful food and beverage choices
- ~ empower students with the knowledge, skills, and dispositions to be physically active and/or improve personal fitness
- ~ introduce students to the digestive system and its purpose
- ~ introduce students to nutrition tools and how to use them
- ~ prepare students for critical life skills and life-long healthful eating and physical activity habits
- ~ help students understand different cultures eat differently than other cultures and no one should be teased for their eating habits

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Responsible decision-making
- Systems
- Safety
- Choices & Consequences
- Analyze influences
- Advocacy
- Self-care
- Goal setting

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: Knowledge of nutrition, food, nutrients, dietary guidelines, food safety and physical activity effects all eight dimensions of wellness across the lifespan.

G2: A healthy lifestyle includes proper daily food and nutrient consumption as well as adequate physical activity in each element of physical and motor fitness.

G3: Foods are fuel for growing, healing, repairing, and/or energizing the body and/or maintaining health.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

NUTRITION:

G1: What is nutrition? (F)

G1: What are the essential nutrients and their functions? (F)

G1: What are the elements of balanced nutrition and why are they important? (F)

G1: Why are the elements of balanced nutrition important? (P)

G1: How should individuals safely handle, prepare, and consume food? (C)

G4: Physical activity is any voluntary bodily movement produced by the skeletal muscles that requires energy expenditure and it affects all dimensions of wellness across the lifespan.

G5: Family, culture, peers, media and technology influence eating and activity behaviors.

G6: Positive and negative health behaviors with food impact wellness across the lifespan.

G7: Positive and negative health behaviors with physical activity impact wellness across the lifespan.

G8: Knowledge and utilization of various nutrition and fitness tools can improve wellness across the lifespan.

G9: Knowledge of the digestive system organs and their functions can help individuals understand the importance of the digestive process .

G1: Why is it important to handle, prepare, and consume food safely? (F)

G2: How can an individual ingest appropriate nutrients daily? (P)
G2: How can an individual improve their nutrient intake?

G3: What are foods? (F)

G3: What are the 6 Food Groups? (F)

G3: Why is "breakfast the most important meal of the day?"(P)

G5: How can family, culture, peers, media, and technology influence eating habits and food choices? (C)

G5: Why should we be respectful of what other people and cultures eat? (P)

G6: Why should people eat healthfully?

G6: What could happen to people if they consistently do not eat healthfully?

G8: What are some of the nutrition tools (Nutrition Facts Labels, MyPlate) and how can they be utilized to ensure proper nutrient intake? (C)

G8: Which nutrition tool is the best ? (P)

G9: What are the organs of the digestive system and their basic functions? (F)?

G9: What are the five steps in the digestive process?(F)

G9: How does food become fuel? (C)

PHYSICAL ACTIVITY:

G2: How much physical activity and exercise do people need at different stages of the lifespan? (F)

G2: What are the elements of physical and motor fitness? (F)

G2: What are the appropriate amounts of physical activity and sleep for children?(F)

G2: Why should people be physically active? (C)

G4: What is physical activity? (F)

G4: What can happen if a person does not engage in physical activity regularly? (C)

G5: How can family, culture, peers, media, and technology influence physical activity behaviors? (C)

G7: What could happen to someone if they are not physically active regularly? (F)

G7: Why should an individual perform physical activity each day? (C)

G8: How can an individual improve personal fitness levels? (P)

G8: How can an individual get motivated to exercise regularly? (P)

Content Knowledge

Critical facts and information that students are expected to KNOW at the end of the unit.

Students should KNOW:

- Nutrition is the science or study of all food

Critical Skills

Critical skills that students are expected to be able to DO at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

- Food is fuel for the body
- Importance of hydration
- Culture plays a role in meal planning and food consumption
- The elements of physical and motor fitness
- The types of exercise and activities for each element of physical fitness
- Children must be physically active at least one hour each day
- Children require 10 hours of sleep per night

Students should be able to:

- Plan balanced meals using a variety of nutrition tools
- Handle and consume food safely
- Understand the function of the digestive system and the five steps to digestion: ingest, digest, absorb, transport and eliminate
- Trace food/nutrients through the digestive system
- Respect the foods/meals consumed by people of different cultures
- Set and achieve nutrition and fitness goals in each element of fitness.
- Plan for and achieve 10 hours of sleep per night

Standards









The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 3-5

Core Concepts PK-12

Healthy Eating and Physical Activity (HEPA)

-  HEPA 1.1.5 Name the food groups and variety of nutritious food choices for each food group.
-  HEPA 1.2.5 Explain the importance of eating a variety of foods from all the food groups.
-  HEPA 1.3.5 Describe the physical, mental, social, and academic benefits of healthful eating habits and physical activity
-  HEPA 1.4.5 Identify nutritious and nonnutritious beverages.
-  HEPA 1.5.5 Describe the benefits of consuming plenty of water.
-  HEPA 1.6.5 Describe the benefits of limiting the consumption of solid fat, added sugar, and sodium.
-  HEPA 1.7.5 Explain the concept of eating in moderation.
-  HEPA 1.8.5 Explain body signals that tell a person when they are hungry and when they are full.

Skills-Based PK-12



Standard 5 Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

-  DM 5.6.5 Describe the final outcome of a health-related decision.

Standard 6 Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

-  GS 6.1.5 Set a realistic personal health goal.
-  GS 6.2.5 Track progress toward achieving a personal health goal. GS 6.3.5 Identify resources that can help achieve a personal health goal.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

What's on my plate? A food journal activity

Build a Better Breakfast

Introduction to Nutrition Facts Labels

Everyone Cooks Rice.

My favorite recipe

Apple to energy and waste: Food is Fuel -Understanding the digestive process

Ready, Set, GOall: Create a personal wellness goal and plan

Get Moving

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health

Wellness

Personal Optimum Health & Wellness

Nutrition

Food

The 6 Essential Nutrients

1. Carbohydrates
2. Proteins
3. Fats
4. Vitamins
5. Minerals
6. Water

The 6 Food Groups

1. Grains
2. Meats & Beans
3. Vegetables
4. Fruits
5. Milk/Dairy
6. Fats, sugars & Discretionary

Food Tools:

- MyPlate
- Nutrition Facts Labels
- Dietary Guidelines
- Food Safety

Elements of Physical Fitness

- Muscular strength
- Muscular endurance
- Cardiorespiratory endurance
- Flexibility
- Body composition

Elements of Motor Fitness

- Agility
- Balance
- Coordination
- Power

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- United States Department of Agriculture (USDA)
- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance (CTAHPERD)
- American Council on Exercise (ACES)
- The Connecticut Physical Fitness Assessment (CPFA) Manual (2022)
- Connecticut State Department of Education (CSDE)
- The National Association for Sport and Physical Education (NASPE)

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Books to read to students:

- Dooley, N. *Everybody Cooks Rice*. Lerner Publishing Group. 1991.

Nemour KidsHealth:

- <https://kidshealth.org/en/kids...> [Figuring Out Food Labels]
- <https://kidshealth.org/en/pare...> [Kids and Exercise]

Video:

- *Build a Better Breakfast*. <https://video.link/w/uaBxd> [Time: 3:46]











District Resources:

- Library media center
- School Nurse
- Food Service

- Reaction time
- Speed

SMART goals

- Specific
- Measurable
- Achievable
- Realistic/Relevant
- Time bound

- 🔗 MyPlate food tool  
- 🔗 The Society of Health and Physical Educators, known as SHAPE America, is an American organization th  
- 🔗 KidsHealth is the #1 most-trusted source for physician-reviewed information and advice on children's  
- 🔗 American Council on Exercise  
- 🔗 CT Physical Fitness Assessment Manual (2022)  

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #5. Nutrition & Physical Activity Reflection | Summative | Other written assessments

 Unit #5. Nutrition & Physical Activity, Reflection #5. Grade 5. .pdf

3 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Human Growth & Sexual Development (HGSD)

Reed Intermediate School / Grade 5 / Physical Education

Week 33 - Week 37 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purposes of the Human Growth & Sexual Development (HGSD) unit are to:

- teach children what puberty is and why it happens
- help children cope with the changes puberty brings to them
- to introduce children to the reproductive system, its organs and their functions
- prevent children from being frightened by unexplained changes to their physical and emotional wellnesses
- help children understand their rights and responsibilities regarding touch
- teach children hygienic practices to teeth, mouth and body

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Lifespan development
- Self-respect
- Self-management
- Self-care
- Systems
- Safety
- Choices & Consequences
- Communication
- Advocacy
- Self-awareness
- Responsible decision-making

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: At a certain age range, all individuals go through puberty.

G2: Puberty brings on many changes to an individual's dimensions of wellness. Knowledge of human growth and sexual development, provides individuals with strategies for coping with the physical, social, intellectual, and emotional changes of puberty and adolescence.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

G1: What is puberty? (F)

G1: What are the average age ranges for pubescent changes to occur in children? (F)

G2: What are some of the pubescent changes that occur in children? (Gender specific and similar changes) (F)

G3: Puberty is a period of rapid physical growth and sexual development that prepares individuals to reproduce.

G4: Knowledge of the reproductive organs and their functions and health, can help individuals understand and prepare for puberty and beyond.

G5: Hygienic habits of daily living affect overall health & wellness.

G6: Trusted adults in your home, school, and community can help individuals navigate problems and concerns.

G7: Touch is a basic human sense and need. Sometimes touch is appropriate and sometimes it is not.

G3: Why do we go through puberty (C)

G4: What are the names and functions of some of the organs of the male and female reproductive systems? (F)

G4: What are the private parts and how do we keep them safe and healthy? (C)

G5: What are hygienic practices and habits? (F)

G5: Why is body and oral hygiene important? (C)

G6: Who are five trusted adults in your life? (C)

G6: What should a female do if she begins to menstruate at school? (F)

G6: How can you cope with the various changes brought on due to puberty? (P)

G7: What are examples of appropriate touch? (F)

G7: What are examples of inappropriate touch? (F)

G7: Do you have the right to tell others not to touch you? (P)

G7: What are your responsibilities to keep others safe? (C)

G7: What should you do if someone touches you inappropriately? (P)

Content Knowledge

Critical facts and information that students are expected to **KNOW** at the end of the unit.

Students will know and be able to identify and explain:

Puberty:

- Definition
- Purpose
- The changes puberty brings to physical, social and emotional wellness
- Healthful coping and communication strategies
- Everyone of a certain age range goes through puberty but not at the exact same time

Organs of the Reproductive Systems and their functions

Female anatomy names and locations:

- Vagina/birth canal
- Vulva
- Labia
- Cervix
- Uterus/womb
- Fallopian tubes
- Ovaries
- Ova (egg)
- Breasts
- Urethra
- Anus

Male anatomy names and locations:

- Penis
- Scrotum
- Testes

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

- Sperm
- Semen
- Urethra
- Anus

Learn and demonstrate independently hygienic practices for teeth, mouth and body

Menstruation:

- Understand menstruation
- Female students should understand and track their menstrual cycle
- Seek assistance at home and school when sanitary supplies are needed
- Understand types of sanitary supplies and how to use/dispose of them

Touch

- Is a basic human need
- The difference between appropriate and inappropriate touch
- People have the right to say whether they want to be touched or not
- Students must be able to report any incidence of inappropriate touch

Five trusted adults they can communicate with when they have questions or concerns about puberty and sexuality

Standards






The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)




CT: Grades 3-5

Core Concepts PK-12

Sexual Health (SH)

-  SH 1.1.5 Describe basic reproductive body parts and their functions.
-  SH 1.2.5 Explain common human sexual development and the role of hormones (e.g., romantic and sexual feelings, masturbation, mood swings, timing of pubertal onset)
-  SH 1.3.5 Describe the range of physical, social, and emotional changes that occur during puberty.
-  SH 1.4.5 Explain how puberty and development can vary greatly and still be normal.
-  SH 1.5.5 Describe how people are similar and different (e.g. sexual identity, gender, gender identity, gender expression, etc.)

Sexual Assault and Abuse Prevention (SAAP)

-  SAAP 1.2.5 Distinguish between "appropriate" and "inappropriate" touch.
-  SAAP 1.3.5 Explain that inappropriate touches should be reported to a trusted adult.
-  SAAP 1.5.5 Explain that everyone has the right to tell others not to touch his or her body

Skills-Based PK-12

Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

-  INF 2.1.5 Identify and describe influences of peers, family, school, and community on health practices and behaviors.

Standard 3 Accessing Information

Students will demonstrate the ability to access valid information, products, and services to enhance health.

- AI 3.3.5 Describe characteristics of appropriate and trustworthy health services.

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- IC 4.1.5 Demonstrate effective verbal and nonverbal communication skills.
- IC 4.2.5 Demonstrate empathetic, compassionate, and supportive behavior toward others.
- IC 4.5.5 Demonstrate how to effectively ask for help to improve personal health.

Standard 7 Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

- SM 7.2.5 Demonstrate healthy practices and behaviors.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- Hygiene: Mouth, Teeth & Body
- What is puberty?
- Where and what are the private parts?
- I'm growing up - who and what are my influences?
- Reproductive System: Girls, Boys, Both or I don't know
- Safety: Good Touch/Bad Touch

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and/or explain the following vocabulary:

Health

Wellness

Personal Optimum Health & Wellness

Puberty

Menstruation

- Period
- Menstrual cycle
- Ovulation
- Sanitary products (Pads, panty liners, tampons, etc.)

Organs of the Reproductive System

Female anatomy names and locations:

- Vagina/birth canal
- Vulva
- Labia
- Cervix
- Uterus/womb
- Fallopian tubes
- Ovaries
- Ova (egg)
- Breasts
- Areola

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)
- Connecticut State Department of Education (CSDE)

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.
- Middleman, A.B. *Boy's Guide to Becoming a Teen*, Jossey-Bass. 2006
- Middleman, A.B. *Girl's Guide to Becoming a Teen*. Jossey-Bass. 2006

Books to read to Students:

- Urethra
- Anus

Male anatomy names and locations:

- Penis
- Scrotum
- Testes
- Sperm
- Semen
- Urethra
- Anus

Appropriate touch versus inappropriate touch

Unit Plan

- Sanders, J. *My Body! What I say Goes!* Upload Publishing Pty. 2016.
- Seskin, S, & Shamblin, A. *Don't Laugh at Me.* Random House. 2002.
- Shannon, D. *A Bad Case of Stripes.* Blue Sky Press-Scholastic. 1998.

Video:



- "Always Changing and Growing Up" Pineland Learning Center. 2020. [Time: 26:00]
 - <https://video.link/w/9t3yd>

Nemours Kids Health:

- <https://kidshealth.org/en/kids...>

District approved presentation:

- Failla, M.Y. *Human Growth & Development for Grade 5.* updated 2022 [see attachment below]
- School Nurses

Slideshow by Failla, M.Y. Human Growth & Development for Grade 5  

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #6. Human Growth & Sexual Development Reflection | Summative | Other written assessments

 Unit #6 HGSD Reflection (1).pdf

5 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Personal Safety (PS)

Reed Intermediate School / Grade 5 / Physical Education

Week 38 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purposes of the Personal Safety (PS) unit are to:

- ~ teach students how to be safe in a wide variety of situations
- ~ teach students how to prevent accidents and injuries to themselves and others
- ~ teach students how and when to seek help for injury to self and others

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Safety
- Choices & Consequences
- Communication
- Analyze influences
- Advocacy
- Self-care
- Peer-Pressure
- Self-respect
- Self-management
- Responsible decision-making

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

- G1: All safety choices have consequences on personal and community health and wellness.**
- G2: Personal safety and injury prevention require knowledge and application of rules and laws.**
- G3: Family, peers, culture, media, and community effect an individual's safety decisions.**
- G4: Trusted adults and medical professionals can help in an emergency.**

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

- G1: What are the safety habits of daily living in a variety of locations (home, school, community, transportation, public spaces, on-line)? (F)**
- G1: Why should everyone wear sunscreen? (F)**
- G1: How can individuals support themselves and community members to make healthy and safe choices? (P)**
- G2: Why is it important to not be a distracted driver or be in the vehicle of one? (C)**
- G2: What safety rules/laws do we need to practice in a variety of situations (i.e. cellphone and social media usage, using technology, etc)? (F)**

G2: Why is it important to follow safety rules and laws? (C)

G2: How do you get help during an emergency? (F)

G3: Why is it important to not give in to negative peer pressure? (P)

G3: Why is it important to not talk to strangers alone in-person or on-line? (P)

G4: Who are the trusted adults that could help in an emergency? (F)

Content Knowledge

*Critical facts and information that students are expected to **KNOW** at the end of the unit.*

Students must know:

- Safety rules and laws in a variety of situations
- They have personal rights and obligations
- It is okay to say "NO!"
- Five trusted adults they can communicate with
- How to keep safe in a variety of situations and locations (home, school, community, motor vehicle including bus, sports and other activities)
- Emergency numbers to call for help/assistance (911, 811, 211, 1-800-222-1222, etc.)

Students must be able to:

- Follow safety rules and laws
- Advocate for themselves and others safety in a variety of situations
- Communicate clearly and resist social pressure to engage in dangerous behaviors
- Seek and find help in an emergency situation or offer help when needed.
- Identify available safety resources within the home, school, and community

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)











CT: Grades 3-5

Core Concepts PK-12

Standard 1 Students will comprehend concepts related to health promotion and disease prevention to enhance health. Alcohol, Nicotine and Other Drugs (ANOD)

- ANOD 1.1.5 Explain why household products are harmful if intentionally absorbed or inhaled.



Safety and Injury Prevention (SIP)

-  SIP 1.1.5 Identify ways to reduce risk of injuries while riding in a motor vehicle.
-  SIP 1.2.5 List examples of dangerous or risky behaviors that might lead to injuries.
-  SIP 1.3.5 Describe how to ride a bike, skateboard, ride a scooter, and/or inline skate safely.
-  SIP 1.4.5 Identify ways to reduce risk of injuries in case of a fire, around water, and from falls.
-  SIP 1.7.5 Identify ways to reduce injuries as a pedestrian.
-  SIP 1.9.5 List ways to prevent injuries at home, school and community.
-  SIP 1.11.5 Explain why household products are harmful if ingested or inhaled.
-  SIP 1.12.5 Explain what to do if someone is poisoned or injured and needs help.
-  SIP 1.13.5 Identify equipment needed for protection in sports and recreational activities, such as mouthpieces, pads and helmets.
-  SIP 1.17.5 Describe ways to prevent harmful effects of the sun.

Skills-Based PK-12


Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

-  INF 2.1.5 Identify and describe influences of peers, family, school, and community on health practices and behaviors.
-  INF 2.2.5 Identify and describe influences of media and technology that affect personal health practices and behaviors.




Standard 3 Accessing Information

Students will demonstrate the ability to access valid information, products, and services to enhance health.

-  AI 3.3.5 Describe characteristics of appropriate and trustworthy health services.




Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

-  IC 4.1.5 Demonstrate effective verbal and nonverbal communication skills.
-  IC 4.3.5 Demonstrate refusal skills to avoid or reduce health risk.
-  IC 4.5.5 Demonstrate how to effectively ask for help to improve personal health.




Standard 5 Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

-  DM 5.3.5 Explain how family, culture, peers or media influence a health-related decision.
-  DM 5.4.5 Identify options and their potential outcomes when making a health-related decision.
-  DM 5.5.5 Choose a healthy option when making a decision.


Standard 7 Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

-  SM 7.1.5 Describe practices and behaviors that reduce or prevent health risks.
-  SM 7.2.5 Demonstrate healthy practices and behaviors.
-  SM 7.3.5 Make a commitment to practice healthy behaviors.

Standard 8 Advocacy

Students will demonstrate the ability to advocate for personal, family, and community health.

-  AV 8.3.5 Demonstrate how to support self and others to make positive health choices.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

Wellness Question(s) of the Week (WQW)
 My Body is MINE!
 Helmet on the head and other Personal Safety Practices
 Water Safety: *Reach, Throw (Row) & Go!*
 Sun Safety: SPF
 Food safety
 Journal Reflection

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health

Wellness

Personal Optimum Health & Wellness

Emergency services

First responders

- Police officers and other law enforcement agents
- Firefighters
- Paramedics
- Emergency Medical Technicians (EMT)
- Athletic Trainer (AT)

Laws:

- Driving age
- Helmet
- Internet/ Social media

Water Safety:

- Reach, throw, go!
- Don't swim alone
- Rip tides
- Life vests
- Flotation devices

Sun Safety:

- Sunscreen purpose
- Exposure to
- Sun Protection Factor (SPF)

Food Safety

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- United States Department of Agriculture (USDA)
- United States Coast Guard <https://www.uscgboating.org/> [Boating Safety Guide]
- Ct.gov. [Life Jackets/ Personal Flotation Devices (PDFs)]
- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)
- Connecticut State Department of Education (CSDE)
- The Connecticut Poison Control Center (CPCC)
- The Connecticut General Assembly <https://cga.ct.gov/PS94/rpt%5C...> [Helmet Laws]

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Sprenger, M. *Social Emotional Learning and the Brain*. ASCD. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Children's Books that teach Safety

Lessons: <https://www.childsafekit.com/a...>

- Geisler, D.I *Won't go with Strangers*. Sky Pony. 2018.
- Penziwol, J.E. *No Dragons for Tea: Fire Safety for Kids (and Dragons)*. Kids Can Press. 1999
- Sanders, J. *My Body! What I say Goes!* Upload Publishing Pty. 2016.
- Raymer, D. *A Smart Girl's Guide: Staying Home*. American Girl Publishing. 2009
- Willis, J & Ross, T. *Chicken Clicking*. Penquin Publishing. 2015.
- Johnsen, K. *The Trouble With Secrets*. Chicago Press Inc. 1986.

Nemours Kids Health:

- <https://kidshealth.org/content...> [Food Safety]
- <https://kidshealth.org/content...> [Fire Safety]
- <https://kidshealth.org/content...> [Pool & Water Safety]
- <https://kidshealth.org/content...> [Sports & Bike]

District Resources:

- Failla, M.Y. *Safety 101* Newtown Public Schools. 2022
- Library media center
- School Nurse

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #7. Personal Safety Reflection | Summative | Other written assessments

 Unit #7. Personal Safety Reflection (1).pdf

8 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Health Gr. 6

6 Curriculum Developers | Last Updated: Monday, Sep 25, 2023 by Failla, Michelle

Unit Calendar by Year

Unit	Lessons	Au		Sep			Oct			Nov			Dec			Jan			Feb			Mar			Apr			May			Ju																								
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38																
Draft Health & Wellness (HW)	0	█																																																					
Draft Social & Emotional Health &...	0				█																																																		
Draft Healthy Relationships (HR)	0							█																																															
Draft Alcohol, Nicotine & Other Drugs...	0										█																																												
Draft Nutrition Education & Physical...	0													█																																									
Draft Human Growth & Sexual...	0																									█																													
Draft Personal Safety (PS)	0																												█																										

7 Units found

Previous Year



Unit Plan

Health & Wellness (HW)

Reed Intermediate School / Grade 6 / Physical Education

Week 1 - Week 5 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Faglia, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purpose of the Health & Wellness unit is to

- ~ have students in grade six review the wellness vocabulary, especially the 8 Dimensions of Wellness, which is the foundation for their Health Education and Health Literacy throughout their education.
- ~ have students in grade six, review the wellness concept that all choices have consequences on health and wellness and
- ~ introduce students to the Health & Wellness Continuum
- ~ have students in the sixth grade, review the difference between Growth and Fixed Mindsets and that using a Growth Mindset can improve personal wellness
- ~ teach students the 6 Steps to Behavior Change
- ~ give students the opportunity to set and achieve health & wellness SMART Goals

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Self Management
- Self awareness
- Self-respect
- Strengths/challenges
- Growth Mindset
- Goal setting & achieving
- Choices & Consequences
- Dimensions of Wellness
- Behavior Change
- Lifespan development

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: Applying knowledge about health and the eight dimensions of wellness (physical, social, intellectual, emotional, spiritual, environmental, occupational and financial) enables individuals to make informed choices about or improvements to their health now and in the future.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

- G1: What is Health? (F)
- G1: What is Wellness? (F)
- G1: What are the 8 Dimensions of Wellness? (F)
- G1: What is your greatest strength and your biggest weakness/challenge in each dimension of

G2: All choices have consequences on health and wellness - Decision making enables individuals to understand positive and negative consequences of wellness choices.

G3: Health habits of daily living affect wellness each day.

G4: Having a Growth Mindset instead of a Fixed Mindset is the first step to improving/achieving wellness.

G5: Achievement of SMART goals requires a growth mindset, discipline, and motivation.

G6: Applying knowledge of the Health & Wellness Continuum can improve wellness across the lifespan.

G7: Creating and following a Behavior Change Plan using SMART goals will improve wellness.

wellness? (P)

G2: How can you improve your area of challenge ?(P)

G2: Why should you try to improve an area of wellness weakness? (C)

G3: What are the health habits of daily living for a child? (C)

G3: When you envision someone who is "healthy and well" what comes to mind? (C)

G4: What is a Growth Mindset? (F)

G4: What is one way to achieve optimal personal wellness? (C)

G4: What is a Fixed Mindset?

G4: What are the differences between having a growth mindset and a fixed mindset? (C)

G5: What does SMART goals mean? (F)

G5: Why is it important to set (and achieve) SMART goals? (P)

G5: How can a growth mindset and healthful habits contribute to goal achievement? (C)

G6: What is the Health and Wellness Continuum? (F)

G6: How do you explain the Health & Wellness Continuum and your place on it? (P)

G6: Can you explain the controllable factors that contribute to personal optimal health and wellness? (P)

G7: What are the steps to Behavior Change? (F)

G7: How long should a Behavior Change Plan take?

Content Knowledge

Critical facts and information that students are expected to **KNOW** at the end of the unit.

Students must know:

- The 8 Dimensions of Wellness (physical, intellectual, emotional, social, spiritual, environmental, occupational and financial).
- The 8 Dimensions of Wellness are interconnected - a choice in one effect the others.
- The universal wellness concept: "All choices have consequences on all dimensions of wellness across the lifespan."
- The difference between Growth and Fixed Mindsets
- The controllable factors that contribute to or take away health and wellness
- The Health & Wellness Continuum
- The Six Steps to Behavior Change
- How to set SMART goals

Students must be able to:

- Advocate for personal health
- Demonstrate healthful habits and routines for each dimension of wellness
- Create and follow a personal Behavior Change Plan.
- Set and achieve realistic, personal, short and long-term health and wellness goals
- Track progress of personal health and wellness goals
- Reflect on and adjust their goal progress

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

- Explain the Health & Wellness Continuum
- Explain the difference between Growth and Fixed Mindsets

Standards




The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)





CT: Grades 6-8

Core Concepts PK-12

Optimal Wellness and Disease Prevention (OWDP)

-  OWDP 1.1.8 Describe the benefits of good hygiene practices
-  OWDP 1.2.8 Explain the difference between infectious, noninfectious, acute and chronic diseases and the importance of seeking treatment
-  OWDP 1.3.8 Describe the controllable factors that contribute to optimal wellness and chronic diseases (i.e. heart disease, cancer, diabetes, hypertension and osteoporosis).
 - Intake (food, air, water, substances)
 - Output (physical activity and movement; elimination of waste)
 - Sleep
 - Stress Management





Mental and Emotional Health (MEH)

-  MEH 1.1.8 Recognize factors that lower self-worth (comparisons, perception vs. reality, social media, technology, internalizing negative external messages from media and peers)
-  MEH 1.2.8 Recognize factors that increase self-worth (recognizing strengths, growth mindset, confidence, competence)
-  MEH 1.8.8 Describe characteristics of positive mental and emotional health.
-  MEH 1.16.8 Examine the risks of impulsive behaviors.

Skills-Based PK-12



Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

-  INF 2.1.8 Explain how perceptions of norms influence healthy and unhealthy practices and behaviors.
-  INF 2.2.8 Explain how personal values and beliefs influence personal health practices and behaviors.
-  INF 2.3.8 Describe how some health risk behaviors influence the likelihood of engaging in other unhealthy behaviors (e.g., how alcohol use influences sexual risk behavior).
-  INF 2.4.8 Analyze how relevant influences of family, peers, culture, school, community, along with media and technology, affect personal health practices and behaviors.

Standard 3 Accessing Information

Students will demonstrate the ability to access valid information, products, and services to enhance health.

-  AI 3.2.8 Describe situations that call for professional health services.
-  AI 3.4.8 Access valid and reliable health information from home, school or community.







Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

-  IC 4.5.8 Demonstrate how to effectively ask for assistance to improve personal health.




Standard 5 Decision Making

Students will demonstrate the ability to use decisionmaking skills to enhance health.

-  DM 5.1.8 Determine when situations require a health-related decision.
-  DM 5.2.8 Distinguish when health-related decisions should be made individually or with the help of others.
-  DM 5.3.8 Explain how family, culture, media, peers, and personal beliefs affect a health-related decision.
-  DM 5.5.8 Predict the potential outcomes of healthy and unhealthy alternatives to a health-related decision.
-  DM 5.6.8 Choose a healthy alternative when making a health-related decision.
-  DM 5.7.8 Analyze the effectiveness of a final outcome of a health-related decision.




Standard 6 Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

-  GS 6.1.8 Assess the impact and power of embracing a growth mindset in order to determine and reach one's goals
-  GS 6.2.8 Assess personal health practices.
-  GS 6.3.8 Set a **realistic** personal health goal. GS 6.4.8 **Assess the** barriers to achieving a personal health goal. GS6.5.8 Apply strategies to **overcome barriers** to achieving a **personal health goal**.

Standard 7 Self Management







Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.







-  SM 7.1.8 Explain the importance of being responsible for one's personal health behaviors.
-  SM 7.2.8 Analyze personal practices and behaviors that reduce or prevent health risks. SM 7.3.8 Demonstrate healthy practices and behaviors to improve the health of oneself and others.
-  SM 7.4.8 Make a commitment to practice healthy behaviors.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- Review the 8 Dimensions of Wellness
- Wellness Wheel
- Health & Wellness Continuum: Where am I?
- Behavior Change Plan
- Yeti's name is Betty - understanding Growth Mindset and the Power of "Yet"
- Ready, Set, GOOOOOOOOOOOOAL!

[8 Dimensions of Wellness](#)   [8 Dimensions of Wellness DOW: A Study Guide.pdf](#)   [Health & Wellness Continuum.pdf](#)  

[6 Steps to Behavior Change: A Study Guide.pdf](#)   [Growth versus Fixed Mindset.pdf](#)   [Entrance slip Dimensions of Wellness](#)  

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health

Wellness

Personal Optimum Health & Wellness

The 8 Dimensions of Wellness

- Physical
- Intellectual

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)
- Center for Disease Control and Prevention
<https://www.cdc.gov/>
- World Health Organization <https://www.who.int/>

- Emotional
- Social
- Spiritual
- Environmental
- Occupational
- Financial

Wellness Wheel**Consequence****Growth vs Fixed Mindset****Health Habits of Daily Living****SMART goals****Health & Wellness Continuum****Behavior Change Plan****Books:**

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Sprenger, M. *Social Emotional Learning and the Brain*. ASCD. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Nemours Kidshealth:

- <https://kidshealth.org/en/teen...> [Total Well-being]

Videos:

- 8 Dimensions of Wellness defined <https://video.link/w/QQNxd> [Time: 3:40]
- Growth Mindset <https://video.link/w/7VNxd> [Time: 2:28]

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #1. HW. Journal & Reflection | Summative | Other written assessments**Self Assessment**

 Unit #1_ Behavior Change_ Journal & Reflection.pdf

10 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Social & Emotional Health & Wellness (SEHW)

Reed Intermediate School / Grade 6 / Physical Education

Week 6 - Week 10 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

- The purpose of the Social and Emotional unit is to help students
- ~better understand their own emotions
 - ~become more self-aware of their thoughts and feelings
 - ~understand that social and emotional wellness affects total personal health & wellness
 - ~understand their personal stress and anger styles
 - ~learn and practice a variety of stress and anger management techniques
 - ~development empathy for the peers, their community and the world around them
 - ~practice social skills in order to meet new people and make friends

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Self-Management
- Responsible decision-making
- Choices & Consequences
- Managing emotions
- Stress & Anger management
- Communication
- Friendship
- Empathy

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

- G1:** Stress is a natural and normal emotion that occurs due to stimulating one, some or all five senses.
- G2:** A healthy lifestyle includes emotional awareness and regulation as well as stress and anger management.
- G3:** Emotionally resilient individuals can cope appropriately with a variety of stressful situations they encounter with self and others.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

- G1:** What are the five human senses? (F)
- G1:** What is stress and what causes it?(C)
- G1:** What are the dimensions of stress? (F)
- G1:** What is the stress response? (C)
- G1:** Do you think stress is ever a good thing? (P)
- G2:** What are healthful ways to manage stress? (C)
- G2:** How can you control your anger? (C)
- G2:** Should you manage your stress and anger? (P)

G3: Positive self-management strategies minimize potentially negative influences on social and emotional health of self and others.

G4: Emotional stress and anger effect all dimensions of wellness.

G5: There are a vast variety of human and material resources to help individuals process stress and other negative emotions.

G6: Social wellness includes both verbal and nonverbal communication with others and the ability to be empathetic.

G7: Having friends and being a friend is critical for social wellness.

G8: There are 6 styles of Anger Management (AM). Understanding your AM style is a life skill.

G3: Why should you be an "upstander" instead of a bystander? (P)

G3: How can you avoid putting someone down when you are stressed or angry? (P)

G3: How can you make amends when you have physically or emotionally

G4: How can physical stress effect emotional stress and vice versa? (P)

G4: How does stress or anger affect all dimensions of wellness? (C)

G4: What can happen when someone is teased or bullied? (C)

G5: Who are trusted adults in your life that can provide emotional support? (F)

G5: What should you do if you are feeling stressed, angry or depressed? (P)

G5: What are some healthful tools and techniques for managing stress and negative emotions? (P)

G6: What can/should you do to build social skills? (C)

G6: What does it mean to be empathetic? (C)

G7: Who is a friend? (C)

G7: How do you make friends? (P)

G8: What are the 6 Styles of Anger Management? (F)

G8: Which is the best anger management style? (P)

Content Knowledge

Critical facts and information that students are expected to KNOW at the end of the unit.

Students must know:

- All choices have consequences on wellness
- Stress is a natural emotion
- Their individual stress response
- A variety of stress management tools
- Healthful Stress Management strategies
- Mindfulness
- Emotional Wellness affects other dimensions of wellness
- Trusted adults that can help them manage stress
- Positive and negative consequences of using social media platforms
- How to manage time
- Style of Anger Management
- Zones of Regulation
- The 4 categories of the Mood Meter,

Students must be able to:

- Identify and verbalize their emotions/feelings
- Know where to locate healthful resources to aid in stress/anger management
- Seek and find assistance with negative feelings
- Practice/demonstrate a variety of healthful Stress/Anger Management Skills and Strategies
- Utilize the Zones of Regulation, Mood Meter, and human resources to identify and regulate negative feelings
- Practice time management
- Make friends and be a friend

Critical Skills

Critical skills that students are expected to be able to DO at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

- Be an up-stander instead of a by-stander

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 6-8

Core Concepts PK-12

Mental and Emotional Health (MEH)

- MEH 1.1.8 Recognize factors that lower self-worth (comparisons, perception vs. reality, social media, technology, internalizing negative external messages from media and peers)
- MEH 1.2.8 Recognize factors that increase self-worth (recognizing strengths, growth mindset, confidence, competence)
- MEH 1.4.8 Explain the importance of telling an adult if there are people who are in danger of hurting themselves or others
- MEH 1.5.8 Recognizing stressors, their impact on mind and body, and effective coping strategies
- MEH 1.6.8 Describe characteristics of a mentally and emotionally healthy person.
- MEH 1.7.8 Discuss how emotions change during adolescence.
- MEH 1.8.8 Describe characteristics of positive mental and emotional health.
- MEH 1.9.8 Summarize the benefits of talking with parents and other trusted adults about feelings.
- MEH 1.10.8 Describe a variety of appropriate ways to respond to stress when angry or upset.
- MEH 1.11.8 Summarize feelings and emotions associated with loss and grief.
- MEH 1.13.8 Describe how mental and emotional health can affect health-related behaviors.
- MEH 1.14.8 Explain the causes, symptoms, and effects of depression, stress and anxiety.
- MEH 1.15.8 Describe personal stressors at home, in school, and with friends.
- MEH 1.16.8 Examine the risks of impulsive behaviors.
- MEH 1.17.8 Identify trusted adults and resources for assistance.

Skills-Based PK-12

Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

- INF 2.4.8 Analyze how relevant influences of family, peers, culture, school, community, along with media and technology, affect personal health practices and behaviors.

Standard 3 Accessing Information

Students will demonstrate the ability to access valid information, products, and services to enhance health.

- AI 3.2.8 Describe situations that call for professional health services.

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- IC 4.1.8 Demonstrate the use of effective verbal and nonverbal communication skills to enhance health.
- IC 4.2.8 Demonstrate how to manage personal information in electronic communications and when using social media to protect the personal health and safety of oneself and others.

Standard 5 Decision Making

Students will demonstrate the ability to use decisionmaking skills to enhance health.

- DM 5.1.8 Determine when situations require a health-related decision.
- DM 5.4.8 Distinguish between healthy and unhealthy alternatives of a health-related decision.
- DM 5.5.8 Predict the potential outcomes of healthy and unhealthy alternatives to a health-related decision.
- DM 5.6.8 Choose a healthy alternative when making a health-related decision.

Standard 6 Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

- GS 6.2.8 Assess personal health practices.

Standard 7 Self Management

Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.

- SM 7.2.8 Analyze personal practices and behaviors that reduce or prevent health risks. SM 7.3.8 Demonstrate healthy practices and behaviors to improve the health of oneself and others.
- SM 7.4.8 Make a commitment to practice healthy behaviors.

Standard 8 Advocacy

Students will demonstrate the ability to advocate for personal, family, and community health.

- AV 8.2.8 Persuade others to make positive health choices.
- AV 8.3.8 Collaborate with others to advocate for healthy individuals, families and schools.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

Stress 101: How do I feel and who can help?**Healthful Stress Management Techniques & Reflection:**

- Mindfulness
- Rainbow Breathing
- Virtual vacation
- Fitness & other hobbies

Everything I ever needed to know I learned in Kindergarten:

- Reflection
- Friendship

Chill out! Stress & Anger Management

- Watch videos & Reflect in journal

Be an Outstanding Upstander!

[Stress Study Guide X.pdf](#) [All I Really Need To Know I Learned In Kindergarten.pdf](#)

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Health**Wellness****The 8 Dimensions of Wellness**

- Physical
- Intellectual
- Emotional

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)

- Social
- Spiritual
- Environmental
- Occupational
- Financial

Stress

- Stressors
- Five senses
- Stress Response

Stress Management Techniques

- Journal writing and reflection
- Mindfulness
- Rainbow Breathing
- Progressive Muscle Relaxation
- Tapping
- Yoga

Mood Meter**Zones of Regulation****Friend****Empathy****Up-stander versus bystander****Verbal versus non-verbal communication****6 Styles of Anger Management**

- Avoidance
- Explosive
- Passive-aggressive
- Sarcasm
- Self-abuse
- Problem solvers

Unit Plan

- The Connecticut State Department of Education (CSDE) Social-Emotional-Learning Documents

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Sprenger, M. *Social Emotional Learning and the Brain*. ASCD. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.
- Rizzo Toner, P. *Stress Management and Self-Esteem Activities*. The Center for Applied Research in Education. 1993.

Nemours KidsHealth:

- <https://kidshealth.org/en/kids...> [Stress]
- <https://kidshealth.org/en/kids...> [On-line Safety & Social Media]
- <https://kidshealth.org/en/kids...> [Friendship & Peer Pressure]

District Resources:

- School nurse
- Guidance Counselors
- School Social worker
- School Psychologist

Videos (with Safe Links)

- "Stressed Out: Coping Skills for Kids & Teens" <https://video.link/w/MBKxd> [Time: 7:15]
- "Underwater Wonders" <https://video.link/w/69Kxd> [Time: 3:00.00]
- "Social Skills for Kids" <https://video.link/w/8Cqxd> [Time: 5:56 minutes]
- "Picnic on the Beach Ambience, Oceanwave Sounds" <https://video.link/w/vAKxd> [Time: 2:00.04]
- "Be an Upstander" <https://video.link/w/fqTxd> [Time:4:00]

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #5. Social and Emotional Journal & Reflection | Summative | Other written assessments

Self Assessment

 Unit #2 SE Journal & Reflection, Grade 6.pdf

11 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Healthy Relationships (HR)

Reed Intermediate School / Grade 6 / Physical Education

Week 11 - Week 15 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purposes of the Healthy Relationships (HR) unit are to help students in grade six:

- ~ explain and demonstrate the characteristics of a healthy relationship
- ~ use communication skills to meet people and make friends
- ~ start a conversation with an adult or peer
- ~ know where to locate healthful resources to aid in conflict resolution
- ~ practice conflict resolution and restitution
- ~ explain and demonstrate empathy
- ~ learn why they should be an up-stander instead of a bystander
- ~ avoid being discriminatory towards others
- ~ describe strategies to avoid physical violence
- ~ politely understand others' points-of-view/perspectives

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Communication
- Self-respect
- Self-management
- Responsible decision-making
- Analyze influences
- Advocacy
- Peer-pressure
- Friendship

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: Healthy relationships and friendships have several characteristics.

G2: Friendship and healthy relationships improve social and spiritual wellness practices.

G3: Empathy, sympathy and understanding different points-of-view are important life skills.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

G1: What are the characteristics of healthy relationships? (F)

G1: What is the definition of friendship? (F)

G2: What are the health benefits of having friends? (C)

G2: How do you make friends? (C)

G2: What does it mean to be a friend? (C)

G4: Prejudice, racism, discrimination and bias are wrong. Kind and respectful individuals can respond and cope appropriately with a variety of situations they encounter with self and others.

G5: Communication and conflict resolution strategies can help individuals avoid violence, and build or improve relationships.

G6: Advocating for self and others' social and emotional well-being is a life skill. Up-standers can prevent or stop violence and correct mean behaviors in others.

G3: What is the difference between empathy and sympathy? (C)

G3: Is it important to be empathetic and sympathetic towards others? (P)

G3: Why is it important to understand differing points-of-view (POV)?

G3: What should you do if you do not see/understand someone else's POV? (C)

G4: What are the definitions of prejudice, racism, discrimination and bias? (F)

G4: How can you avoid being discriminatory towards others? (C)

G4: Why is it wrong to tease/harass others based upon personal characteristics? (P)

G5: What are the styles of Conflict Resolution? (F)

G5: How can social media positively and negatively effect relationships and friendships? (C)

G5: Which is the best Conflict Resolution style? (P)

G6: What is the role of an up-stander? (C)

G6: Is being an upstander tattling? (C)

G6: Should you be an up-stander instead of a bystander? (P)

Content Knowledge

Critical facts and information that students are expected to KNOW at the end of the unit.

Critical Skills

Critical skills that students are expected to be able to DO at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Students must know:

- All choices have consequences on wellness
- How to make a friend
- How to be a friend
- Emotional Wellness affects other dimensions of wellness
- Trusted adults that can help them manage conflict and practice restitution
- Positive and negative consequences of using social media platforms on friendship
- How to manage time
- Conflict Resolution Style
- Characteristics of healthy relationships
- No means No!
- There is a proper time and place for displays of affection

Students must be able to:

- Use communication skills to make a friend
- Know where to locate healthful resources to aid in conflict resolution
- Seek and find assistance with negative feelings
- Practice/demonstrate a variety of healthful Stress/Anger Management Skills and Strategies
- Practice conflict resolution techniques
- Start a conversation with an adult or peer
- Be an up-stander
- Avoid being discriminatory towards others
- Describe strategies to avoid physical violence
- Explain and demonstrate empathy
- Politely understand others' points-of-view/perspectives

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 6-8

Core Concepts PK-12

Healthy Relationships (HR)

- HR 1.3.8 Describe characteristics of healthy relationships (communication, respect, trust, and boundaries)
- HR 1.4.8 Differentiate between healthy and unhealthy relationships.
- HR 1.5.8 Explain why it is wrong to tease others based on personal characteristics (such as body type, gender, appearance, mannerisms, and the way one dresses or acts).
- HR 1.12.8 Explain how the use of social media can positively and negatively impact relationships

Violence Prevention (VP)

- VP 1.1.8 Explain the role of bystanders in escalating, preventing or stopping bullying, fighting, and violence.
- VP 1.3.8 Describe strategies to avoid physical fighting and violence.
- VP 1.7.8 Define prejudice, discrimination and bias.

Sexual Assault and Abuse Prevention (SAAP)

- SAAP 1.8.8 Explain the role of bystanders in escalating, preventing, or stopping violence, or supporting the victim.

Safety and Injury Prevention (SIP)

- SIP 1.2.8 Define Digital Wellness and its impact on overall health.

Skills-Based PK-12

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- IC 4.4.8 Demonstrate healthy ways to manage or resolve conflict.
- IC 4.6.8 Demonstrate how to effectively communicate empathy and support for others.

Standard 7 Self Management

Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.

- SM 7.1.8 Explain the importance of being responsible for one's personal health behaviors.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- Getting to Know You #1
- Getting to Know You #2
- Creating Friendships
- Conflict Resolution

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Mean behavior

Bully
Bullying
Up-stander
Bystander

Empathy
Sympathy
Friend
Friendship

Racism
Prejudice
Discrimination
Bias
Equity
Equality
Digital Wellness

Restitution
"Let go and move on"

Conflict Resolution Styles:

- Accommodate
- Avoid
- Agree to disagree

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Sprenger, M. *Social Emotional Learning and the Brain*. ASCD. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Nemours KidsHealth:

- <https://kidshealth.org/en/kids...> [Friendship & Peer Pressure]

Videos (with Safe Links):

- "How to Create Friendships" <https://video.link/w/WyTxd> [Time: 4:22]
- "Be an Upstander" <https://video.link/w/fqTxd> [Time:4:00]

- Compromise
- Collaboration
- Competing (it is my way or the highway)

- "Anger Management for Kids" <https://video.link/w/wwTxd> [Time: 6:00]

District Resources:

- Guidance Counselors
- School Social worker
- School Psychologist
- School nurses

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #3. Healthy Relationships Reflection. | Summative | Other written assessments

Self Assessment

 Unit #3_ Healthy Relationships Reflection.pdf

6 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Alcohol, Nicotine & Other Drugs (ANOD)

Reed Intermediate School / Grade 6 / Physical Education

Week 16 - Week 21 | 6 Curriculum Developers | Last Updated: Today by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purposes of the Alcohol, Nicotine and Other Drugs (ANOD) unit, are to help students:

- ~ acquire functional health knowledge about the dangers of alcohol, smoking products, and a variety of other substances
- ~ understand the laws in regard to smoking, drinking and substance use
- ~ understand there are healthful ways to manage stress
- ~ practice skills needed to adopt and maintain healthy behaviors throughout their lives.

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Safety
- Personal Wellness
- Personal Influences
- Choices & Consequences
- Disease Prevention
- Analysis of influences
- Advocacy
- Self-management
- Responsible decision-making

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: Use of various substances, drugs and medicines have positive and negative consequences on personal optimal wellness.

G2: Substance use and abuse has short and long-term affects on individuals, families, and communities.

G3: Family, peers, media and technology influence substance use.

G4: Family, school, and community resources are available to support individuals.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

G1: What is a drug versus medicine? (F)

G1: What is personal optimal wellness? (F)

G1: How does one know what their personal optimal wellness is? (C)

G2: What are some of the short and long-term consequences to substance use/abuse? (F)

G2: What is addiction? (F)

G2: What are the Stages of Addiction? (F)

G5: Advocating for personal wellness is a life-skill.

G6: There are benefits to being alcohol, nicotine, and drug-free.

G7: There are policies and laws that should be followed regarding the use of certain substances.

G8: There are a variety of healthful alternatives to coping with stress, depression, disappointments and anxiety.

G2: How do people progress (or not) through the stages of addiction? (C)

G2: How does using/abusing drugs affect each dimension of wellness? (C)

G3: How do family, peers, media, and technology influence substance use/abuse? (C)

G3: Can addiction be cured? (P)

G4: What are the community resources available to individuals struggling with substance abuse? (F)

G4: Who are the people that can help you when there is substance use/abuse? (F)

G4: How can people access support for substance abuse? (C)

G5: What would you do if someone offered you drugs? (P)

G5: What would you do if you witnessed someone using drugs or driving under the influence? (P)

G6: Which is better, prevention or cure? (P)

G6: What are the benefits to being alcohol, nicotine, and drug free? (C)

G7: The legal drinking/smoking age in the United States is 21 years. Should this be changed? (P)

G7: Why is it dangerous to intentionally inhale or absorb household products and other substances? (P)

G8: How could you healthfully cope with life stressors instead of using/abusing substances? (P)

Content Knowledge

Critical facts and information that students are expected to KNOW at the end of the unit.

Students must know:

- Definitions of drug versus medicine
- Differences between drug use/abuse/misuse
- Short-term and long-term effects of drug use/abuse
- Dangers/consequences of smoking/vaping anything
- Dangers/consequences of secondhand smoke
- Dangers/consequences of using inhalants
- Alcohol and nicotine are highly addictive substances
- The Stages of Addiction
- The legal smoking/vaping and alcohol drinking ages in the US.
- Trusted adults that can provide assistance

Students must be able to:

- Confidently and assertively refuse offers to engage in substance use and/or underage drinking
- Have the self-confidence to avoid negative peer-pressure
- Seek and find help and reliable resources to improve wellness
- Advocate for healthful choices
- Create health-related messages for different audiences
- Perform healthful stress management techniques

Critical Skills

Critical skills that students are expected to be able to DO at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 6-8

Core Concepts PK-12

Standard 1 Students will comprehend concepts related to health promotion and disease prevention to enhance health.
Alcohol, Nicotine and Other Drugs (ANOD)

- ANOD 1.1.5 Explain why household products are harmful if intentionally absorbed or inhaled.
- ANOD 1.1.8 Identify healthy coping mechanisms and alternatives to substance use
- ANOD 1.2.8 Distinguish between proper use and abuse of over-the-counter and prescription medicines.
- ANOD 1.3.8 Summarize the negative consequences of using alcohol and other drugs.
- ANOD 1.4.8 Describe situations that could lead to the first time use of alcohol and other drugs.
- ANOD 1.5.8 Explain why using alcohol or other drugs is an unhealthy way to manage stress.
- ANOD 1.6.8 Explain school policies and community laws about alcohol, nicotine and other drugs.
- ANOD 1.7.8 Determine the benefits of being alcohol, nicotine and other drug-free.
- ANOD 1.8.8 Explain the risks associated with riding in a motor vehicle with someone who is under the influence of alcohol and other drugs and explore safe options.
- ANOD 1.9.8 Describe short- and long- term physical, social and emotional effects of using ANOD's (e.g. effects on organs, including brain, peer relationships, family relationships, self- esteem)

Optimal Wellness and Disease Prevention (OWDP)

- OWDP 1.2.8 Explain the difference between infectious, noninfectious, acute and chronic diseases and the importance of seeking treatment
- OWDP 1.3.8 Describe the controllable factors that contribute to optimal wellness and chronic diseases (i.e. heart disease, cancer, diabetes, hypertension and osteoporosis).
 - Intake (food, air, water, substances)
 - Output (physical activity and movement: elimination of waste)
 - Sleep
 - Stress Management

Mental and Emotional Health (MEH)

- MEH 1.5.8 Recognizing stressors, their impact on mind and body, and effective coping strategies

Skills-Based PK-12

Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

- INF 2.3.8 Describe how some health risk behaviors influence the likelihood of engaging in other unhealthy behaviors (e.g., how alcohol use influences sexual risk behavior).
- INF 2.4.8 Analyze how relevant influences of family, peers, culture, school, community, along with media and technology, affect personal health practices and behaviors.

Standard 3 Accessing Information

Students will demonstrate the ability to access valid information, products, and services to enhance health.

- AI 3.2.8 Describe situations that call for professional health services.

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- IC 4.3.8 Demonstrate effective peer resistance and negotiation skills to avoid or reduce health risks.

Standard 5 Decision Making

Students will demonstrate the ability to use decisionmaking skills to enhance health.

- DM 5.4.8 Distinguish between healthy and unhealthy alternatives of a health-related decision.
- DM 5.6.8 Choose a healthy alternative when making a health-related decision.

Standard 7 Self Management

Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.

- SM 7.1.8 Explain the importance of being responsible for one's personal health behaviors.
- SM 7.2.8 Analyze personal practices and behaviors that reduce or prevent health risks. SM 7.3.8 Demonstrate healthy practices and behaviors to improve the health of oneself and others.
- SM 7.4.8 Make a commitment to practice healthy behaviors.

Standard 8 Advocacy

Students will demonstrate the ability to advocate for personal, family, and community health.

- AV 8.4.8 Demonstrate how to adapt positive health-related messages for different audiences.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- Inhale/exhale: Escape the Vape!
- Recipe for disaster! Demonstration
- Cost of Smoking/Vaping
- Class Discussion/debate
- CHZYLY! Advocate for personal & community wellness

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

- Health
- Wellness
- Personal Optimum Health & Wellness
- Drug
- Medicine
- Prescription (Rx) versus Over-the-counter (OTC)
- Drug use/abuse/misuse
- Short-term effects of drug use/abuse
- Long-term effects of drug use/abuse
- Vaping
- Tobacco
- Nicotine
- Inhalants
- Inhale/exhale
- Dangers/consequences of smoking/vaping anything
- Secondhand smoke
- Prevention
- Addiction
- The 6 Stages of Addiction
 - Non-use
 - Experimental
 - Casual/Social

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- Connecticut State Department of Education (CSDE)
- Society of Health and Physical Educators (SHAPE)
- The National Association for Sport and Physical Education (NASPE)
- Connecticut Association for Health, Physical Education, Recreation and Dance (CTAHPERD)
- Connecticut School Health Survey statistics

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinnel Media. 2020
- Sprenger, M. *Social Emotional Learning and the Brain*. ASCD. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.

- Habitual
- Harmfully Involved
- Addiction

Tolerance

Peer-pressure

Financial Wellness

Self-respect

Unit Plan

- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course* 1. Glencoe McGraw-Hill. 2003.

Nemours Kids Health:

- <https://kidshealth.org/en/kids...> [Alcohol - resource for students]
- <https://kidshealth.org/content...> [Alcohol - resources for educator/parents]
- <https://kidshealth.org/content...> [Vaping, smoking, nicotine]
- <https://kidshealth.org/content...> [Drugs-resources]

District Resources:

- Failla, M.Y. *ANOD Addiction Newtown Public Schools*. Updated 2022.
- Library media center
- School Nurse

Posters:

- *SUCKED IN*. Nasco Education
- *Vaping-e-cigs*. Nasco Education
- *Tobacco Industry Poster Child*. [tobaccofacts.org]
- *If what happened on your inside happened on your outside, would you still smoke?* American Lung Association

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

ANOD Reflection Cost of Smoking, Vaping, | Summative | Other written assessments

Self Assessment

📄 2022 Cost of smoking .pdf

7 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Nutrition Education & Physical Activity (NEPA)

Reed Intermediate School / Grade 6 / Physical Education

Week 22 - Week 29 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purpose of the Nutrition Education & Physical Activity (NEPA) unit is to:

- ~empower students with the knowledge, skills, and dispositions to make healthful food and beverage choices
- ~ empower students with the knowledge, skills, and dispositions to be physically active and/or improve personal fitness
- ~ review the digestive system and its purpose
- ~ review nutrition tools and how to use them
- ~ prepare students for critical life skills and life-long healthful eating and physical activity habits

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Systems
- Choices & Consequences
- Analyze influences
- Advocacy
- Self-care
- Goal setting

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

G1: Knowledge of nutrition, food, nutrients, and exercise effects all eight dimensions of wellness across the lifespan.

G2: A healthy lifestyle includes proper daily food and nutrient consumption and should be consumed at breakfast, lunch, dinner and in nutritious snacks.

G3: A healthy lifestyle includes adequate daily physical activity.

G4: Foods are fuel for growing, healing, repairing, and/or energizing the body and/or maintaining health.

G5: Family, culture, peers, media and technology influence eating and activity behaviors.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

NUTRITION:

G1: What is nutrition? (F)

G1: What is food? (F)

G1: What are the essential nutrients and their functions? (F)

G1: What are the elements of balanced nutrition and why are they important? (F)

G1: Why are the elements of balanced nutrition important? (P)

G1: How should individuals safely handle, prepare, and consume food? (C)

G1: Why is it important to handle, prepare, and consume food safely? (F)

G2: How can an individual ingest appropriate nutrients daily? (C)

G2: How can an individual improve their nutrient intake? (C)

G2: Which is a better choice, supplements or real food? (P)

G6: Positive and negative health behaviors with food impact wellness across the lifespan.

G7: Positive and negative health behaviors with physical activity impact wellness across the lifespan.

G8: Knowledge and utilization of various nutrition tools can improve wellness across the lifespan.

G9: Knowledge of the digestive system organs and their functions can help individuals understand the importance of the digestive process.

G10: Knowledge and application of the three parts of a workout can prevent injury and improve personal fitness.

G2: Why is breakfast considered the most important meal of the day? (P)

G4: What are the 6 Food Groups? (F)

G4: What are foods for? (C)

G5: How can family, culture, peers, media, and technology influence eating habits and food choices? (C)

G5: Why should we be respectful of what other people and cultures eat? (P)

G6: Why should people eat healthfully?

G6: What could happen to people if they consistently do not eat healthfully?

G8: What are some of the nutrition tools (Nutrition Facts Labels, MyPlate, Dietary Guidelines) and how can they be utilized to ensure proper nutrient intake? (C)

G8: Which nutrition tool is the best? (P)

G9: What are the organs of the digestive system and their basic functions? (F)?

G9: What are the five steps in the digestive process?(F)

G9: How does food become fuel? (C)

PHYSICAL ACTIVITY:

G3: How much physical activity and exercise do people need at different stages of the lifespan? (F)

G3: What are the elements of physical and motor fitness? (F)

G3: What are the appropriate amounts of physical activity and sleep for children?(F)

G3: Why should people be physically active? (C)

G3: What is physical activity? (F)

G5: How can family, culture, peers, media, and technology influence physical activity behaviors? (C)

G7: What could happen to someone if they are not physically active on a regular basis? (F)

G7: Why should an individual perform physical activity each day? (C)

G10: What are the three parts of a workout? (F)

G10: Why is it important to include all three parts of exercise in daily fitness activities? (C)

G10: How can an individual improve personal fitness levels? (P)

Content Knowledge

*Critical facts and information that students are expected to **KNOW** at the end of the unit.*

Students should KNOW:

- Nutrition is the science or study of all food and the essential nutrients
- The six essential nutrients and their basic functions
- Food is fuel for the body
- Importance of hydration
- Culture plays a role in meal planning and food consumption

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

- The Elements of Physical Fitness
- The Elements of Motor Fitness
- The types of exercise and activities for each element of physical fitness
- Children must be physically active *at least* one hour each day
- Children require 10 hours of sleep per night

Students should be able to:

- Plan balanced meals using a variety of foods and nutrients
- Read and interpret a variety of nutrition tools
- Handle and consume food safely
- Understand the function of the digestive system and the five steps to digestion: ingest, digest, absorb, transport and eliminate
- Trace food/nutrients through the digestive system
- Respect the foods/meals consumed by people of different cultures
- Set and achieve nutrition and fitness goals in each element of fitness
- Plan for and achieve 10 hours of sleep per night

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 6-8

Core Concepts PK-12

Healthy Eating and Physical Activity (HEPA)

- 1. HEPA 1.1.8 Identify the importance of each macronutrient (fats, proteins, carbohydrates) and eating a variety of foods from each category
- 1. HEPA 1.2.8 Summarize the physical, mental, social, and academic benefits of healthful eating habits and physical activity.
- 1. HEPA 1.3.8 Describe how to make healthy food choices when given options
- 1. HEPA 1.4.8 Summarize the benefits of consuming adequate amounts of water
- 1. HEPA 1.5.8 Describe the relationship and impact of what we eat and our physical activity levels to maintaining a healthy weight
- 1. HEPA 1.6.8 Explain the importance of a healthy relationship with food (i.e. intuitive eating, moderation, food as fuel)
- 1. HEPA 1.9.8 Understand how to read food labels for the purpose of limiting the consumption of fats, added sugar, and sodium.
- 1. HEPA 1.10.8 Explain the relationship between access to healthy foods and personal food choices.

Skills-Based PK-12

Standard 5 Decision Making

Students will demonstrate the ability to use decisionmaking skills to enhance health.

- 1. DM 5.2.8 Distinguish when health-related decisions should be made individually or with the help of others.

Standard 6 Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

- 1. GS 6.1.8 Assess the impact and power of embracing a growth mindset in order to determine and reach one's goals
- 1. GS 6.2.8 Assess personal health practices.
- 1. GS 6.3.8 Set a realistic personal health goal. GS 6.4.8 Assess the barriers to achieving a personal health goal. GS6.5.8 Apply strategies to overcome barriers to achieving a personal health goal.

Standard 7 Self Management

Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.

- SM 7.2.8 Analyze personal practices and behaviors that reduce or prevent health risks, SM 7.3.8 Demonstrate healthy practices and behaviors to improve the health of oneself and others.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

- **Nutrition 101**
- **Digestion: Let's review**
- **Food Around the World: A look at other cultures**
- **Bread, Bread, Bread: A look at other cultures through food**
- **Nutrition Facts Labels**
- **MOVE IT! What are the elements of Physical Fitness? (Physical Activity Breaks & Fitness Goals)**

Elements of Physical & Motor Fitness

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health

Wellness

Personal Optimum Health & Wellness

Nutrition

Food

The 6 Essential Nutrients

1. Carbohydrates
2. Proteins
3. Fats
4. Vitamins
5. Minerals
6. Water

The 6 Food Groups

1. Grains
2. Meats & Beans
3. Vegetables
4. Fruits
5. Milk/Dairy
6. Fats, sugars & Discretionary

Food Tools:

- MyPlate
- Food Pyramids
- Nutrition Facts Labels
- Dietary Guidelines
- Food Safety

Activity Pyramid

Elements of Physical Fitness

- Muscular strength

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional Organizations:

- United States Department of Agriculture (USDA)
- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance (CTAHPERD)
- American Council on Exercise (ACES)
- The Connecticut Physical Fitness Assessment (CPFA) Manual (2022)
- Connecticut State Department of Education (CSDE)
- The National Association for Sport and Physical Education (NASPE)

Books:

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Hopper, C. Fisher, B. & Munoz, K.D. *Physical Activity and Nutrition for Health*. Human Kinetics .2008.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.

Book to read to students:

- Morris, A. *Bread, Bread, Bread*. Harper Collins. 1993.

Nemours Kids Health:

- <https://kidshealth.org/en/kids...> [Figuring Out Food Labels]
- <https://kidshealth.org/en/teen...> [Exercise Log]

- Muscular endurance
- Cardiorespiratory endurance
- Flexibility
- Body composition

Elements of Motor Fitness

- Agility
- Balance
- Coordination
- Power
- Reaction time
- Speed

SMART goals

- Specific
- Measurable
- Achievable
- Realistic/Relevant
- Time bound

Video:

- Would You Rather? Workout! (Fun Fitness)
<https://video.link/w/lpfyd> [Time: 7:15]
- Would You Rather? Workout! (Animal edition):
<https://video.link/w/Zofyd> [Time 6:00]

District Resources:

- Failla, M.Y.
- Library media center
- School Nurse
- Food Service

 CT Physical Fitness Assessment Manual (2022)  

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #5. NEPA. Journal & Reflection | Formative | Other written assessments

Self Assessment

 Ready, Set, GOOOOAL!.pdf

7 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan

Human Growth & Sexual Development (HGSD)

Reed Intermediate School / Grade 6 / Physical Education

Week 30 - Week 35 | 6 Curriculum Developers | Last Updated: Sep 24, 2023 by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purposes of the Human Growth & Sexual Development (HGSD) unit are to:

- ~ review what puberty is and why it happens
- ~ help children cope with the changes puberty brings to them
- ~ to review the reproductive system, its organs and their functions
- ~ prevent children from being frightened by unexplained changes to their physical and emotional wellnesses
- ~ review hygienic practices to teeth, mouth and body
- ~ explain how humans reproduce
- ~ explain pregnancy and child birth

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Lifespan development
- Self-respect
- Self-management
- Self-awareness
- Self-care
- Systems
- Safety
- Choices & Consequences
- Communication
- Advocacy

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

- G1: At a certain age range, all individuals go through puberty.
- G2: Puberty brings on many changes in an individual.
- G3: Knowledge of the purpose human growth and sexual development, provides individuals with strategies for coping with the physical, social, intellectual, and emotional changes of puberty and adolescence.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

- G1: What is puberty? (F)
- G1: What are the average age ranges for pubescent changes to occur in children? (F)
- G2: What are some of the pubescent changes that occur in children? (Gender specific and similar changes) (F)
- G3: Why do people go through puberty? (C)

G4: Knowledge of the reproductive organs and their functions can help individuals understand and prepare for puberty and beyond.

G5: Hygienic habits of daily living affect overall health & wellness.

G6: Trusted adults in your home, school and community can help individuals navigate problems and concerns associated with puberty.

G4: What are the names and functions of some of the organs of the male and female reproductive systems? (F)

G4: What are the private parts and how do we keep them safe and healthy? (C)

G4: Why are some body parts deemed private? (C)

G4: How do humans reproduce? (F)

G4: How do human women get pregnant through sexual intercourse? (F)

G5: What are hygienic practices and habits? (F)

G5: Why is body and oral hygiene important? (C)

G6: Who are five trusted adults in your life? (C)

G6: What should a female do if she begins to menstruate at school? (F)

G6: How can you cope with the various changes brought on due to puberty? (P)

Content Knowledge

Critical facts and information that students are expected to KNOW at the end of the unit.

Students will know and be able to identify and explain the following vocabulary:

Puberty:

- Definition
- Purpose
- The changes puberty brings to physical, social and emotional wellnesses
- Healthful coping and communication strategies
- Everyone of a certain age range goes through puberty but not at the exact same time

Organs of the Reproductive Systems and their functions

Female anatomy names and locations:

- Vagina/birth canal
- Vulva
- Labia
- Cervix
- Uterus/womb
- Fallopian tubes
- Ovaries
- Ova (egg)
- Breasts
- Urethra
- Anus

Male anatomy names and locations:

- Penis
- Scrotum
- Testes
- Sperm
- Semen
- Urethra
- Anus

Critical Skills

Critical skills that students are expected to be able to DO at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Learn and demonstrate independently hygienic practices for teeth, mouth and body

Menstruation:

- Understand menstruation
- Female students should understand and track their menstrual cycle
- Seek assistance at home and school when sanitary supplies are needed
- Understand types of sanitary supplies and how to use/dispose of them

Touch

- Is a basic human need
- The difference between appropriate and inappropriate touch
- People have the right to say whether they want to be touched or not
- Students must be able to report any incidence of inappropriate touch

Five trusted adults they can communicate with when they have questions or concerns about puberty and sexuality

Other vocabulary:

- Erection
- Ejaculation
- Nocturnal emissions
- Sexual intercourse for reproduction
- Pregnancy
- Sexual Harassment versus Flirting

Students must be able to:

- correctly brush and floss teeth
- practice daily hygiene routines
- understand the reproductive system
- seek and find trusted adults to answer questions about human growth and sexual development
- report any incidence of inappropriate touch

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health Education (2021)

CT: Grades 6-8

Core Concepts PK-12

Sexual Health (SH)

- SH 1.3.8 Describe reproductive body parts and their functions.
- SH 1.4.8 Describe the menstrual cycle, the process of sperm production and the relationship to conception

Optimal Wellness and Disease Prevention (OWDP)

- OWDP 1.1.8 Describe the benefits of good hygiene practices

Sexual Assault and Abuse Prevention (SAAP)

- SAAP 1.6.8 Explain that no one has the right to touch anyone else in a sexual manner if they do not want to be touched.
- SAAP 1.9.8 Demonstrate how to ask for help and to report sexual mistreatment, grooming, harassment, abuse, assault, exploitation & trafficking.
- SAAP 1.10.8 Describe the positive and negative ways in which technology and social media can impact physical and emotional safety.

Mental and Emotional Health (MEH)

- MEH 1.7.8 Discuss how emotions change during adolescence.
- MEH 1.9.8 Summarize the benefits of talking with parents and other trusted adults about feelings.
- MEH 1.12.8 Explain the importance of a positive body image.
- MEH 1.17.8 Identify trusted adults and resources for assistance.

Skills-Based PK-12

Standard 6 Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

- GS 6.2.8 Assess personal health practices.

Standard 7 Self Management

Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.

- SM 7.1.8 Explain the importance of being responsible for one's personal health behaviors.
- SM 7.4.8 Make a commitment to practice healthy behaviors.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

Reproductive System: Girls, Boys, Both or I don't know?

Where do babies come from?

What is Sexual Harassment?

 Sexual Harassment in School.docx.pdf 

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Students will know and be able to identify and explain the following vocabulary:

Health

Wellness

Personal Optimum Health & Wellness

Puberty

Menstruation

- Period
- Menstrual cycle
- Ovulation
- Sanitary products (Pads, panty liners, tampons, etc.)

Organs of the Reproductive System

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters, DVDs and equipment) are located in the Health Education classroom.

Professional Organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)
- Connecticut State Department of Education (CSDE)

Nemours Kids Health:

- <https://kidshealth.org/en/kids...>

Books:

Female anatomy names and locations:

- Vagina
- Vulva
- Labia
- Cervix
- Uterus/womb
- Fallopian tubes
- Ovaries
- Ova (egg)
- Breasts
- Areola
- Urethra
- Anus

Male anatomy names and locations:

- Penis
- Scrotum
- Testes
- Sperm
- Semen
- Urethra
- Anus

Other vocabulary:

- Erection
- Ejaculation
- Nocturnal emissions
- Sexual intercourse for reproduction
- Pregnancy
- Sexual Harassment versus Flirting
- Universal Precautions
- Immune System
- Reproductive System
- Hygiene
- Communicable disease
- Noncommunicable disease
- Human immunodeficiency Virus (HIV)
- Acquired immunodeficiency Syndrome (A.I.D.S.)

- Harris, B. & Raatz, S. *The Mindfulness Journal*. Centinell Media. 2020
- Benes, S. & Alperin, H. *Lesson Planning for Skills-Based Health*. Human Kinetics. 2019
- Benes, S. & Alperin H. *The Essentials of Teaching Health Education- Curriculum, Instruction and Assessment*. Human Kinetics. 2016.
- Whalen, S. Splendorio, D., & Chiariello. *Tools for Teaching Health*. John Wiley & Sons, Inc. 2007.
- Meeks, L. & Heit, P. *Health & Wellness*. Macmillan/McGraw-Hill. 2005.
- Merki, M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course 1*. Glencoe McGraw-Hill. 2003.
- Middleman, A.B. *Boy's Guide to Becoming a Teen*. Jossey-Bass. 2006
- Middleman, A.B. *Girl's Guide to Becoming a Teen*. Jossey-Bass. 2006

Video:

- "You, Your Body and Puberty" [Time: 24:17]

District Resources:

- Failla, M.Y. *Human Growth & Sexual Development - grade 6*. Newtown Public Schools. (2022). [Slide show] <https://docs.google.com/presen...>
- School Nurse

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #6. Human Growth & Sexual Development Reflection | Summative | Other written assessments

Self Assessment

 Unit #6 HGSD Reflection (4).pdf

4 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.



Unit Plan Personal Safety (PS)

Reed Intermediate School / Grade 6 / Physical Education

Week 36 - Week 38 | 6 Curriculum Developers | Last Updated: Today by Failla, Michelle

Concept-Based Curriculum Unit Template

Purpose of the Unit

The overarching goal(s) of the unit.

The purpose of the Personal Safety unit is to teach the students in grade six:

- ~ what sexual harassment is and isn't
- ~ their rights and responsibilities when it comes to sexual harassment
- ~the law regarding sexual activity and consent
- ~how to get help for self or others that are victims of harassment

Conceptual Lens/Concepts

Concepts are the "big ideas" of the unit. The conceptual lens is a particular concept that focuses the thinking of the unit.

Lens:

- Personal Optimal Health & Wellness
- Choices

Concepts:

- Self-respect
- Communication
- Self-care
- Peer-Pressure
- Self-respect
- Self-management
- Responsible decision-making
- Safety

Generalizations

Critical conceptual relationships that students are expected to UNDERSTAND at the end of the unit.

- G1: Sexual harassment is different than flirting and it is illegal.
- G2: Personal safety and injury prevention require knowledge and application of rules and laws.
- G3: Knowledge of an individuals' rights and responsibilities regarding sexual harassment can help individuals make healthful decisions for self and others.
- G4: Family, peers, culture, media, and technology effect an individual's personal safety decisions.

Guiding Questions

A combination of Factual (F), Conceptual (C) and Provocative/Debatable (P) questions that lead to the generalizations. Label each questions (F), (C) or (P).

- G1: What is sexual harassment (F)
- G1: Why is sexual harassment illegal? (C)
- G1: What is the difference between flirting and sexual harassment? (C)
- G2: What safety rules/laws do we need to know and practice in a variety of situations (i.e. in person, on-line, using technology) to keep yourself and others safe? (C)
- G2: What should you do if you are sexually harassed? (F)
- G2: Why is it important to not talk to strangers alone in-person or on-line? (P)

G5: Trusted adults, first responders and medical professionals can help an individual that has been sexually harassed or assaulted.

G6: Touch is a basic human sense and need. Sometimes touch is appropriate and sometimes it is not.

G3: What are your rights and responsibilities in regard to sexual harassment? (F)

G3: What should you do if someone touches you inappropriately? (P)

G3: What should you do if you have information that someone is being sexually harassed? (F)

G4: Who and what can influence an individual's personal safety decisions? (F)

G4: Who and what influence a person's attitudes and beliefs about sexuality? (C)

G4: Why is it important to not give in to negative peer pressure? (P)

G5: Who are trusted adults that could help you in any emergency? (F)

G5: How do you get help during an emergency? (C)

G6: What are examples of appropriate touch? (F)

G6: What are examples of inappropriate touch? (F)

G6: Do you have the right to tell others not to touch you? (P)

G6: What should you do if someone touches you inappropriately? (P)

Content Knowledge

*Critical facts and information that students are expected to **KNOW** at the end of the unit.*

Students must know:

- Rules and laws regarding sexual harassment
- The difference between flirting and sexual harassment
- They have personal rights and obligations
- What sexting is
- It is okay to say "NO!"
- Five trusted adults they can communicate with
- How to keep safe in a variety of situations and locations
- Legal age for social media accounts
- Legal age of sexual consent

Students must be able to:

- Follow safety rules and laws
- Advocate for themselves and others in a variety of situations
- Communicate clearly and resist social pressure to engage in dangerous behaviors
- Seek and find help in an emergency situation or offer help when needed.
- Identify available safety resources within the home, school, and community

Critical Skills

Critical skills that students are expected to be able to **DO** at the end of the unit.

- 6. Value and demonstrate personal responsibility, character, cultural understanding, and ethical behavior.

Standards

The content standards that are taught and/or assessed in this unit.

CT: Health (2022)

CT: Grades 6-8

Standard 1: Core Content

Students will comprehend concepts related to health promotion and disease prevention to enhance health. Healthy Relationships (HR)

- HR 1.7.8 Describe healthy ways to express affection, love, and friendship.
- HR 1.8.8 Describe how consent is a foundational principle in healthy relationships and in preventing sexual violence.
- HR 1.9.8 Discuss how affirmative consent mitigates confusion within a relationship.
- HR 1.10.8 Identify factors (e.g., body image self-esteem, alcohol, and other substances) that can affect the ability to give or perceive consent to sexual activity.
- HR 1.11.8 Explain the importance of talking with parents and other trusted adults about issues related to relationships, growth and development and sexual health.
- HR 1.13.8 Identify the legal and social consequences of viewing and/or sending sexually explicit pictures or messages by email or cell phone or posting sexually explicit pictures on social media sites (e.g., chat groups, email, texting, websites, phone and tablet applications).

Students will comprehend concepts related to health promotion and disease prevention to enhance health. Sexual Assault and Abuse Prevention (SAAP)

- SAAP 1.2.8 Describe how power and control differences in relationships can contribute to aggression and violence.
- SAAP 1.5.8 Describe situations and behaviors that constitute sexual mistreatment, grooming, harassment, abuse, assault, and exploitation.
- SAAP 1.6.8 Explain that no one has the right to touch anyone else in a sexual manner if they do not want to be touched.
- SAAP 1.8.8 Explain the role of bystanders in escalating, preventing, or stopping violence, or supporting the victim.
- SAAP 1.9.8 Demonstrate how to ask for help and to report sexual mistreatment, grooming, harassment, abuse, assault, exploitation, and trafficking.
- SAAP 1.10.8 Describe the positive and negative ways in which technology and social media can impact physical and emotional safety.
- SAAP 1.11.8 Identify the process for reporting incidents of sexual mistreatment, grooming, harassment, abuse, assault, and exploitation.

CT: Health Education (2021)

CT: Grades 6-8

Core Concepts PK-12

Violence Prevention (VP)

- VP 1.1.8 Explain the role of bystanders in escalating, preventing or stopping bullying, fighting, and violence.
- VP 1.3.8 Describe strategies to avoid physical fighting and violence.

Safety and Injury Prevention (SIP)

- SIP 1.10.8 Describe actions to change unsafe situations at home, in school and in the community.

Skills-Based PK-12

Standard 2 Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

- INF 2.4.8 Analyze how relevant influences of family, peers, culture, school, community, along with media and technology, affect personal health practices and behaviors.

Standard 4 Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

- IC 4.1.8 Demonstrate the use of effective verbal and nonverbal communication skills to enhance health.
- IC 4.6.8 Demonstrate how to effectively communicate empathy and support for others.

Standard 5 Decision Making

Students will demonstrate the ability to use decisionmaking skills to enhance health.

- DM 5.6.8 Choose a healthy alternative when making a health-related decision.

Standard 7 Self Management

Students will demonstrate the ability to practice health enhancing behaviors and avoid or reduce health risks.

-  SM 7.4.8 Make a commitment to practice healthy behaviors.

Core Learning Activities

The learning activities that support the acquisition of content knowledge, attainment of critical skills and lead to the generalizations of the unit. Activities should be clearly articulated, include teacher instructions and identify optional vs. assured experiences.

Sexual Harassment and Flirting, What is the difference?

 Sexual Harassment in School.docx.pdf  

Vocabulary

Academic and content-specific vocabulary needed to support knowledge, understanding and/or skills.

Sexual Harassment

Flirting

Social media:

- Sexting
- Legal age of use
- public versus private accounts

Bystander

Up-stander

Negative peer pressure

First responders:

- Police officers and other law enforcement agents
- Firefighters
- Paramedics
- Emergency Medical Technicians (EMT)
- Athletic Trainer (AT)

Laws:

- Sexual harassment rights and responsibilities
- Age of consent

Resources

Teacher and student resources used to support the learning.

All resources that are District owned (i.e. books, posters and equipment) are located in the Health Education classroom.

Professional organizations:

- The Society of Health and Physical Educators (SHAPE)
- The Connecticut Association for Health, Physical Education, Recreation and Dance(CTAHPERD)
- Connecticut State Department of Education (CSDE)

Children's Books that teach Safety

Lessons: <https://www.childsafekit.com/a...>

- Sanders, J. *My Body! What I say Goes!* Upload Publishing Pty. 2016.
- Raymer, D. *A Smart Girl's Guide: Staying Home.* American Girl Publishing. 2009
- Willis, J & Ross, T. *Chicken Clicking.* Penquin Publishing. 2015.
- Johnsen, K. *The Trouble With Secrets.* Chicago Press Inc. 1986.
- M.B., Cleary, M.J., & Hubbard, B.M. *Teen Health Course* 1. Glencoe McGraw-Hill, 2003.

Nemours Kids Health:

- <https://kidshealth.org/en/teens/harassment.prt-en.html?ref=search> [Sexual Harassment]

District Resources:

- Library media center
- School Nurse
- Failla, M.Y. *Personal Safety* Newtown Public Schools. (2022).

Assessments

The means by which students will demonstrate what they know (content knowledge), what they can do (critical skills), and what they understand (generalizations) as a result of their learning from the unit.

Unit #7: Personal Safety Reflection | Summative | Other written assessments

Self Assessment

 Unit #7_ Personal Safety Reflection.pdf

9 Standards Assessed

Differentiation

Core learning activities, resources and assessments that meet the needs of all learners.

Test Prep Connections

As appropriate, include activities that build skills for standardized testing, such as IABs.

Bylaws of the Board Officers / Organization Meeting of the Board

Organization

The officers of the Board of Education shall consist of a Chairperson, Vice-Chairperson, and Secretary.

The Board shall organize biennially at the first regular meeting in December following the town election. The meeting shall be called to order by the Town Clerk who will serve as temporary Chairperson and shall preside until a chairperson has been elected.

Election of all officers shall be by nomination from the floor and shall require a majority public vote of the members of the Board. A written ballot shall not be used.

A majority of the total membership of the Board shall be required to constitute election. If there are more than two nominees and on the first vote no nominee receives a majority vote of the full membership, the nominee receiving the lowest number of the votes shall be removed from the list of candidates before balloting again.

The new Chairperson of the Board will take office upon election and conduct the election of the Vice-Chairperson and Secretary.

Officers shall remain in office until new officers are elected at the next organizational meeting, unless such officers resign from their position or cease to be members of the Board of Education. If there is a vacancy among the officers for any reason during the course of the year, the Board membership shall act promptly to elect a new officer to fill the vacancy. If a vacancy exists on the Board as a whole, such election will occur once a full Board has been seated.

Upon motion duly made and seconded, an officer of the Board may be removed from office by a two-thirds vote of the total Board membership.

Chairperson

The Chairperson shall preside at all meetings of the Newtown Board of Education and shall perform other duties as directed by law, State Department of Education regulations, and by this Board. In carrying out these responsibilities, the Chairperson shall:

1. Sign the instruments, acts, and orders necessary to carry out state requirements and the will of the Board.
2. Consult with the Superintendent in the planning of the Board's agendas.
3. Confer with the Superintendent on crucial matters which may occur between Board meetings.
4. Appoint Board committees, subject to Board approval.
5. Call special meetings of the Board as necessary.

6. Be public spokesperson for the Board at all times except as this responsibility is specifically delegated to others.
7. Be responsible for the orderly conduct of all Board meetings.
8. Assume such other duties as may be authorized by the Board.
9. Appoint a Clerk of the Board.
10. The Chairperson's signature shall be an alternative signature on all legal documents requiring the signature of the Secretary.

As presiding officer at all meetings of the Board, the Chairperson shall:

1. Call the meeting to order at the appointed time.
2. Announce the business to come before the Board in its proper order.
3. Enforce the Board's policies relating to the order of business and the conduct of the meetings.
4. Recognize persons who desire to speak, and protect the speaker who has the floor from disturbance or interference.
5. Explain what the effect of a motion would be if it is not clear to every member.
6. Restrict discussion to the question when a motion is before the Board.
7. Answer all parliamentary inquiries, referring questions of legality to the Board attorney.
8. Put motions to a vote, stating definitely and clearly the vote and result thereof.

The Chairperson shall have the right, as other Board members have, to offer resolutions, discuss questions, and to vote.

The Vice-Chairperson

The Vice- Chairperson will:

1. Act in place of the Chairperson, when necessary, and preside at meetings when the Chairperson is temporarily absent. The Vice-Chairperson cannot fill vacancies required to be filled by the Chairperson and does not serve as an ex-officio member of committees.
2. Work with the Chairperson and Superintendent to become generally informed of Board business.
3. In the absence of the Chairperson, act as a resource to the Superintendent on decisions which may require further input between board meetings.

4. In case of illness, resignation, or death of the Chairperson, the Vice-Chairperson, as deemed by the Board, becomes Chairperson until the Board membership acts promptly to elect a new officer to fill the vacancy.
5. The Vice-Chairperson's signature shall be an alternative signature on all legal documents requiring the signature of the Secretary.

Secretary

1. A member of the Newtown Board of Education shall be elected Secretary by the members of the Board and shall perform the duties assigned by law and the Board.
2. The Secretary shall be responsible for accurate records of the proceedings of the Board; and for the preservation of reports of committees and communications addressed to the Board, reports of the Chairperson of the Board and reports of the Superintendent. The Board shall authorize the employment of a person to assist in fulfilling the responsibilities for this position.
3. The Secretary shall cause written notices of regular Board meetings and suitable notices of special meetings to be sent to Board members through the office of the Superintendent.
4. The Secretary will write an annual report on the activities of the Board for the Town Annual Meeting Report.
5. The Secretary shall serve as Acting Chairperson when the Chairperson and Vice-Chairperson are not able to preside at meetings.

(cf. 9020- Public Statements)

(cf. 9325 – Meeting Conduct)

(cf. 9222 – Resignation/Removal from Office/Censure)

Legal Reference: Connecticut General Statutes

10-218 Officers. Meetings

Charter, Town of Newtown, Revised April 22, 2008

Section 2-70 Board of Education

Adopted: 4/10/12

Revised: 11/6/19

Bylaws of the Board

Method of Filling Vacancies

Pursuant to 2-31(c) of the Charter of the Town of Newtown:

If a vacancy occurs in the office of any member of the local Board of Education, then the successor shall be determined by:

1. A majority vote of the remaining members of the same political party of the former member provided said vote occurs within 45 days of vacancy;
2. A majority vote of the remaining members regardless of party affiliation after 45 days.
3. Should the vacancy still not be filled after 90 days, then the current Chair of the Board of Education shall appoint the successor
4. Should all seats on the Board of Education become simultaneously vacant, then a special election shall be called to fill all seats
5. Any successor(s) so appointed shall serve until the next regular town election for Board of Education positions, at which election a successor shall be elected for the unexpired portion of the term, the official ballot specifying the vacancy to be filled.

In the event of a discrepancy between the Charter and this Policy, the Charter shall take precedence.

During the first 45 days of the vacancy, the remaining members of the same political party as the former member may choose to hold formal interviews. If they choose to do so, the decision to include Board of Education members of other political affiliations will be left to their discretion.

Board Officer Vacancies

Whenever there is a vacancy in the Office of Chairperson, Vice-Chairperson, or Secretary, the Board shall elect a new officer to fill the vacancy for the unexpired term of office once a full Board is seated.

Prior to the seating of the full Board, meetings will be chaired as set forth in policy 9100. If all three Board officer positions are vacant but a quorum of the Board still exists, regularly scheduled meetings will proceed at the beginning of which the remaining members will elect a temporary chair by majority vote.

Once the full Board has been seated, the Town Clerk will serve as temporary chairperson to elect a chairperson, as outlined in Policy 9100 – Officers/Organization Meeting of the Board. Any other vacant Board Officer positions will then be filled as outlined in the same policy.

Legal Reference: Connecticut General Statutes
7-107 Vacancy appointments by selectmen.
9-204 Minority representation on boards of education.
10-219 Procedure for filling vacancy on board of education.
10-156e Employees of boards of education permitted to serve as elected officials; exception.
10-232 Restriction on employment of members of the board of education.
Town Charter, 2-40(c)

Adopted: 6/5/12
Revised: 10/15/19

Instruction

Instruction shall be regarded as the primary function of the Newtown Public Schools. The philosophy guiding this instruction emphasizes the individual students and ~~his/her~~ their development to ~~his/her~~ their fullest potential for participation in life and for the betterment of society in a democracy. Such instruction entails the use of a wide variety of appropriate techniques and experiences that will help each student toward total personal development, excellence in the skills of learning, and the attainment of an inquiring mind ~~and appreciation of our heritage~~ for the purpose of becoming a responsible citizen. All such educational experiences shall be organized into a curriculum based on purposeful ideas, shall be subject to continuous study and evaluation, and shall be revised as improvement is indicated.

Adopted 3/12/96

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Adopted 3/12/96

Instruction

School Calendar

The school calendar shall show the beginning and ending dates of school, legal and local holidays, meeting days, number of teaching days, vacation periods, and other pertinent dates.

The Board of Education may operate schools on state holidays providing a suitable nonsectarian educational program is held to observe the holiday, except for those holidays that occur in December and January.

The Superintendent shall recommend to the Board of Education a school calendar that will meet the requirements of the law as well as the needs of the community, students, and personnel.

The Board of Education may declare a holiday in the schools under its jurisdiction when good reason exists.

Note: *A Board of Education for a school that has been designated as a low achieving school pursuant to subdivision (1) of subsection (c) of C.G.S. 10-223e may increase the number of actual school sessions during each year, and may increase the number of hours of actual school work per session in order to improve student performance and remove the school from the list of schools designated as a low achieving school maintained by the State Board of Education.*

The Board of Education may use the RESC developed and approved uniform regional school calendar, for the school year commencing July 1, 2017 and each school year thereafter.

The Board of Education may establish for any school year a firm high school graduation date which is no earlier than the one hundred eightieth day noted in the school calendar originally adopted by the Board for that school year.

~~Beginning with the 2019-2020 school year,~~ The Board of Education may develop and adopt its own school calendar to begin school on any day before or after Labor Day.

Legal Reference: Connecticut General Statutes
 1-4 Days designated as legal holidays.
 10-15 Towns to maintain schools
 10-29a Certain days to be proclaimed by governor. Distribution and
 number of proclamations.
 10-261 Definitions.
 10-16l Establishment of graduation date.
 10-66q Development and adoption of uniform regional school calendar.
 Report.
 PA 22-47 An Act Concerning Children's Mental Health
 PA 22-128 An Act Establishing Juneteenth Independence Day as a Legal
 Holiday

Instruction

Requirements for Graduation

~~Beginning with the Class of 2021, in order to graduate from the Newtown Public Schools, students must earn a minimum of twenty-four (24) credits in (9) areas of the curriculum and demonstrate competency in spoken communication, written communication, critical thinking, and information literacy.~~

~~Beginning with the classes graduating in 2023, In order to graduate from Newtown Public Schools, students must earn a minimum of twenty-five (25) credits in seven (7) areas of the curriculum including a one credit mastery-based assessment, Capstone Project.~~

~~For classes graduating in 2023 and 2024, and for each graduating class thereafter, no local or regional The Newtown Board of Education shall not permit any student to graduate from high school or grant a diploma to any student who has not satisfactorily completed a minimum of twenty-five credits, including not fewer than: (1) Nine credits in the humanities, including civics and the arts; (2) nine credits in science, technology, engineering and mathematics; (3) one credit in physical education and wellness; (4) one credit in health and safety education, as described in section 10-16b; (5) one credit in world languages, subject to the provisions of subsection [(g)] of this section; and (6) a one credit mastery-based diploma assessment.~~

~~Commencing with classes graduating in 2025, and for each graduating class thereafter, no local or regional The Newtown Board of Education shall not board of education shall permit any student to graduate from high school or grant a diploma to any student who has not satisfactorily completed a minimum of twenty five credits, including not fewer than: (1) Nine credits in the humanities, including civics and the arts; (2) nine credits in science, technology, engineering and mathematics, including computer science; (3) one credit in physical education and wellness; (4) one credit in health and safety education, as described in section 10-16b; (5) one credit in world languages, subject to the provisions of subsection (h) of this section; and (6) a one-credit mastery-based diploma assessment. At least one credit, which may count toward the requirement described in subdivision (2) of this subsection, shall be in personal financial management.~~

The Board of Education shall award a high school diploma to any World War II veteran, veteran of the Korean Hostilities, or a Vietnam-era veteran requesting such diploma who left high school for military service as defined in the statutes.

All courses to satisfy local and statutory requirements in Areas I-VI must be earned between the beginning of grade 9 and end of grade 12.

Students classified as ninth, tenth, and eleventh grade must enroll in a minimum of six courses each semester. Twelfth-grade students must enroll in a minimum of five courses each semester. Only students with a minimum of 15 credits will be designated as a Senior.

Students who earn high school credits in the middle school cannot apply them to required units in Areas I-VI.

Students must attend a minimum of six (6) semesters of high school (grades 9-12) to qualify for graduation.

Exception for Transfer Students

If a student transfers into the Newtown Public Schools after completing at least three years in a high school out of state, he/she may be exempted from Newtown's twenty-four (24) credit requirement for graduation.

Legal Reference: Connecticut General Statutes

10-5c Board examination series pilot program. Issuance of certificate (as amended by P.A. 13-247)

10-14n State-wide mastery examination. Conditions for reexamination. Limitation on use of test results. (as amended by Section 115 of PA 14-217) 10-16(l) Graduation exercises. (As amended by P.A. 96-108, An Act

Concerning Student Use of Telecommunication Devices and the Establishment of Graduation Dates

10-221a High school graduation requirements. (As amended by P.A. 00-124, An Act Concerning High School Diplomas and Veterans of World War II,

P.A. 00-156, An Act Requiring A Civics Course for High School

Graduation, P.A. 08-138, An Act Concerning High School Credit for Private World Language Courses and Other Subject Areas, P.A. 10-111, An Act

Concerning Education Reform in Connecticut, P.A. 11-135, An Act

Concerning Implementation Dates for Secondary School Reform, P.A. 13-57, An Act Concerning Honorary Diplomas for Vietnam Veterans, P.A. 13-122, An Act Concerning Minor Revisions to the Education Statutes, P.A. 13-247, Budget Implementer Bill and P.A. 15-237, An Act Concerning High

School Graduation and P.A. 16-4(SS), section 310.), PA 17-42, An Act Concerning Revisions to the High School Graduation Requirements and PA 17-29, An Act Concerning Connecticut's Seal of Biliteracy)

10-233(a) Promotion and graduation policies. (as amended by P.A. 01-166)

P.A. 13-108 An Act Unleashing Innovation in Connecticut Schools.

P.A. 13-247 An Act Implementing Provisions of the State Budget.

P.A. 15-237 An Act Concerning High School Graduation.

P.A. 17-42 An Act Concerning Revisions to the High School Graduation Requirements

Instruction

Requirements for Graduation

Credit Distribution Requirements

Beginning with the Class of 2021, in order to graduate from the Newtown Public Schools, the following credits must be earned:

Area I English – 4 credits including English I, English II, and a course that includes American literature

Area II Social Studies – 3 credits including 1 in American Studies or American History, ½ in American Government, ½ in Economics, ½ in Western Studies and ½ in an Area Studies course

Area III Math – 3 credits

Area IV Science – 3 credits

Area V Physical Education – 1 ½ credits

Area VI Fine and Applied Arts – 1 ½ credits, including ½ credit in Personal Financial Literacy

Area VII Electives – 6 credits

Area VIII World Language – 1 credit

Area IX Senior Year Experience²¹ – 1 credit

Beginning with the classes graduating in 2023, the following credits must be earned:

Area I Humanities- 9 credits including civics and the arts

Area II STEM- 9 credits in Science, Technology, Engineering and Mathematics

Area III Physical Education and Wellness- 1 credit

Area IV Health and Safety Education- 1 credit

Area V World Language- 1 credit

Area VI Senior Capstone Project – 1 credit

Area VII Electives – 3 credits

Students

Administration of Student Medications in the Schools

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

Before or after school program means any child care program operated and administered by the [Newtown](#) Board of Education (the “Board”) and exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs do not include public or private entities licensed by the Office of Early Childhood or Board enhancement programs and extracurricular activities.

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.

Coach means any person holding a coaching permit who is hired by the Board to coach for a sport season.

Controlled drugs means those drugs as defined in Conn. Gen. Stat. Section 21a-240.

Cumulative health record means the cumulative health record of a pupil mandated by Conn. Gen. Stat. Section 10-206.

Director means the person responsible for the day-to-day operations of any school readiness program or before or after school program.

Eligible student means a student who has reached the age of eighteen or is an emancipated minor.

Students

Administration of Student Medications in the Schools

Error means:

- (1) the failure to do any of the following as ordered:
 - (a) administer a medication to a student;
 - (b) administer medication within 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;
 - (f) administer the medication according to generally accepted standards of practice; or
- (2) the administration of medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student, except for the administration of epinephrine or naloxone for the purpose of emergency first aid as set forth in Sections D and E below.

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 that 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),

Students

Administration of Student Medications in the Schools

which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects and which has not yet received FDA approval.

Licensed athletic trainer means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.

Medication means any medicinal preparation, both prescription and non-prescription, including controlled drugs, as defined in Conn. Gen. Stat. Section 21a-240. This definition includes Aspirin, Ibuprofen or Aspirin substitutes containing Acetaminophen.

Medication emergency means a life-threatening reaction of a student to a medication.

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 authorization by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the 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.

Nurse means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut in accordance with Chapter 378, Conn. Gen. Stat.

Occupational therapist means an occupational therapist employed full time by the Board and licensed in Connecticut pursuant to Chapter 376a of the Connecticut General Statutes.

Optometrist means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes.

Students

Administration of Student Medications in the Schools

Paraprofessional means a health care aide or assistant or an instructional aide or assistant employed by the Board who meets the requirements of the 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 Board 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 Chapter 370 of the Connecticut General Statutes, or licensed to practice medicine in another state.

Podiatrist means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes.

Principal means the administrator in the school.

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 Conn. Gen. Stat. Section 10-212.

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

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 Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.

Students

Administration of Student Medications in the Schools

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 the Board who has met the minimum standards as established by the 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.

B. General Policies on Administration of Medications

- (1) Except as provided below in Sections D and E, no medication, including non-prescription drugs, may be administered by any school personnel without:
 - (a) the written medication order of an authorized prescriber;
 - (b) the written authorization of the student's parent or guardian or eligible student; and
 - (c) the written permission of a parent for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of such medication.
- (2) Prescribed medications shall be administered to and taken by only the person for whom the prescription has been written.
- (3) Except as provided in Sections D and E, medications may be administered only by a licensed nurse or, in the absence of a licensed nurse, by:
 - (a) a full-time principal, a full-time teacher, or a full-time licensed physical or occupational therapist employed by the school district. A full-time principal, teacher, licensed physical or occupational therapist employed by the school district may administer oral, topical, intranasal or inhalant medications. Such individuals may administer injectable medications only to a student with a medically diagnosed allergic condition that may require prompt treatment to protect the student against serious harm or death.

Students

Administration of Student Medications in the Schools

- (b) students with chronic medical conditions who are able to possess, self-administer, or possess and self-administer medication, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written medication order, including the recommendation for possession, self-administration, or possession and self-administration;
 - (ii) there is a written authorization for possession, self-administration, or possession and self-administration from the student's parent or guardian or eligible student;
 - (iii) the school nurse has developed a plan for possession, self-administration, or possession and self-administration, and general supervision, and has documented the plan in the student's cumulative health record;
 - (iv) the school nurse has assessed the student's competency for self-administration and deemed it safe and appropriate, including that the student: is capable of identifying and selecting the appropriate medication by size, color, amount or other label identification; knows the frequency and time of day for which the medication is ordered; can identify the presenting symptoms that require medication; administers the medication appropriately; maintains safe control of the medication at all times; seeks adult supervision whenever warranted; and cooperates with the established medication plan;
 - (v) the principal, appropriate teachers, coaches and other appropriate school personnel are informed the student is possessing, self-administering, or possessing and self-administering prescribed medication;
 - (vi) such medication is transported to school and maintained under the student's control in accordance with this policy; and
 - (vii) controlled drugs, as defined in this policy, may not be possessed or self-administered by students, except in

Students

Administration of Student Medications in the Schools

extraordinary situations, such as international field trips, with approval of the school nurse supervisor and the school medical advisor in advance and development of an appropriate plan.

- (c) a student diagnosed with asthma who is able to self-administer medication shall be permitted to retain possession of an asthmatic inhaler at all times while attending school, in order to provide for prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written order requiring the possession of an inhaler by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written order is provided to the school nurse;
 - (ii) there is a written authorization from the student's parent or guardian regarding the possession of an inhaler by the student at all times in order to protect the child against serious harm or death and authorizing the student's self-administration of medication, and such written authorization is provided to the school nurse;
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer an inhaler for asthma in the school setting shall not be used to prevent a student from retaining and self-administering an inhaler for asthma. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student; and
 - (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.

Students

Administration of Student Medications in the Schools

- (d) a student diagnosed with an allergic condition who is able to self-administer medication shall be permitted to retain possession of a cartridge injector at all times while attending school, in order to provide for prompt treatment to protect such child against serious harm or death, provided all of the following conditions are met:
 - (i) an authorized prescriber provides a written order requiring the possession of a cartridge injector by the student at all times in order to provide for prompt treatment in order to protect the child against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written order is provided to the school nurse;
 - (ii) there is a written authorization from the student's parent or guardian regarding the possession of a cartridge injector by the student at all times in order to protect the child against serious harm or death and authorizing the student's possession, self-administration, or possession and self-administration of medication, and such written authorization is provided to the school nurse;
 - (iii) the conditions set forth in subsection (b) above have been met, except that the school nurse's review of a student's competency to self-administer cartridge injectors for medically-diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self-administering a cartridge injector for medically-diagnosed allergies. Students may self-administer medication with only the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student; and
 - (iv) the conditions for self-administration meet any regulations as may be imposed by the State Board of Education in consultation with the Commissioner of Public Health.
- (e) a student with a medically diagnosed life-threatening allergic condition may possess, self-administer, or possess and self-

Students

Administration of Student Medications in the Schools

administer medication, including but not limited to medication administered with a cartridge injector, to protect the student against serious harm or death, provided the following conditions are met:

- (i) the parent or guardian of the student has provided written authorization for the student to possess, self-administer, or possess and self-administer such medication; and
 - (ii) a qualified medical professional has provided a written order for the possession, self-administration, or possession and self-administration.
- (f) a coach of intramural or interscholastic athletic events or licensed athletic trainer who has been trained in the administration of medication, during intramural or interscholastic athletic events, may administer inhalant medications prescribed to treat respiratory conditions and/or medication administered with a cartridge injector for students with medically diagnosed allergic conditions which may require prompt treatment to protect the student against serious harm or death, provided all of the following conditions are met:
- (i) the school nurse has determined that a self-administration plan is not viable;
 - (ii) the school nurse has provided to the coach a copy of the authorized prescriber's order and parental permission form;
 - (iii) the parent/guardian has provided the coach or licensed athletic trainer with the medication in accordance with Section K of this policy, and such medication is separate from the medication stored in the school health office for use during the school day; and
 - (iv) the coach or licensed athletic trainer agrees to the administration of emergency medication and implements the emergency care plan, identified in Section H of this policy, when appropriate.

Students

Administration of Student Medications in the Schools

- (g) an identified school paraprofessional who has been trained in the administration of medication, provided medication is administered only to a specific student in order to protect that student from harm or death due to a medically diagnosed allergic condition, and the following additional conditions are met:
 - (i) there is written authorization from the student's parents/guardian to administer the medication in school;
 - (ii) medication is administered pursuant to the written order of (A) a physician licensed under chapter 370 of the Connecticut General Statutes, (B) an optometrist licensed to practice optometry under chapter 380 of the Connecticut General Statutes, (C) an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a of the Connecticut General Statutes, or (D) a physician assistant licensed to prescribe in accordance with section 20-12d of the Connecticut General Statutes;
 - (iii) medication is administered only with approval by the school nurse and school medical advisor, if any, in conjunction with the school nurse supervisor and under the supervision of the school nurse;
 - (iv) the medication to be administered is limited to medications necessary for prompt treatment of an allergic reaction, including, but not limited to, a cartridge injector; and
 - (v) the paraprofessional shall have received proper training and supervision from the school nurse in accordance with this policy and state regulations.

- (h) a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional, provided medication is antiepileptic medication, including by rectal syringe, administered only to a specific student with a medically diagnosed epileptic condition that requires prompt treatment in accordance with the student's

Students

Administration of Student Medications in the Schools

individual seizure action plan, and the following additional conditions are met:

- (i) there is written authorization from the student's parents/guardians to administer the medication;
 - (ii) a written order for such administration has been received from the student's physician licensed under Chapter 370 of the Connecticut General Statutes;
 - (iii) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional is selected by the school nurse and school medical advisor, if any, and voluntarily agrees to administer the medication;
 - (iv) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional annually completes the training program established by the Connecticut State Department of Education and the Association of School Nurses of Connecticut, and the school nurse and medical advisor, if any, have attested, in writing, that such training has been completed; and
 - (v) the principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the Board, coach or school paraprofessional receives monthly reviews by the school nurse to confirm competency to administer antiepileptic medication.
- (i) a director of a school readiness program or a before or after school program, or the director's designee, provided that the medication is administered:
- (i) only to a child enrolled in such program; and
 - (ii) in accordance with Section L of this policy.

Students

Administration of Student Medications in the Schools

- (j) a licensed practical nurse, after the school nurse has established the medication plan, provided that the licensed practical nurse may not train or delegate the administration of medication to another individual, and provided that the licensed practical nurse can demonstrate one of the following:
 - (i) training in administration of medications as part of their basic nursing program;
 - (ii) successful completion of a pharmacology course and subsequent supervised experience; or
 - (iii) supervised experience in the administration of medication while employed in a healthcare facility.
- (4) Medications may also be administered by a parent or guardian to the parent or guardian's own child on school grounds and on field trips, provided that no parent or guardian will be required to attend a field trip for this purpose.
- (5) Investigational drugs or research or study medications may be administered only by a licensed nurse. For FDA-approved medications being administered according to a 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.

C. Diabetic Students

- (1) The Board permits blood glucose testing by students who have a written order from a physician or an advanced practice registered nurse stating the need and capability of such student to conduct self-testing, or the use of continuous blood glucose monitors (CGM) by children diagnosed with Type 1 diabetes, who have a written order from a physician or an advanced practice registered nurse.
- (2) The Board will not restrict the time or location of blood glucose testing by a student with diabetes on school grounds who has written authorization from a parent or guardian and a written order from a

Students

Administration of Student Medications in the Schools

physician or an advanced practice registered nurse stating that such child is capable of conducting self-testing on school grounds.

- (3) The Board will not require a student using a continuous glucose monitor approved by the Food and Drug Administration for use without finger stick verification to undergo finger stick verification of blood glucose readings from a continuous glucose monitor on a routine basis. Finger stick testing of a child using a continuous glucose monitor so approved by the Food and Drug Administration shall only be conducted: (1) as ordered by the student's physician or advanced practice provider; (2) if it appears that the continuous glucose monitor is malfunctioning; or (3) in an urgent medical situation.
- (4) The Board shall purchase or use existing equipment owned by the Board to monitor blood glucose alerts transmitted from continuous glucose monitors of students with Type 1 diabetes to dedicated receivers, smartphone/tablet applications, or other appropriate technology on such equipment.
- (5) In the absence or unavailability of the school nurse, select school employees may administer medication with injectable equipment or nasal delivery device used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death, under the following conditions:
 - (a) The student's parent or guardian has provided written authorization;
 - (b) A written order for such administration has been received from the student's physician licensed under Chapter 370 of the Connecticut General Statutes;
 - (c) The school employee is selected by either the school nurse or principal and is a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional;
 - (d) The school nurse shall provide general supervision to the selected school employee;

Students

Administration of Student Medications in the Schools

- (e) The selected school employee annually completes any training required by the school nurse and school medical advisor in the administration of medication with injectable equipment or nasal delivery device used to administer glucagon;
- (f) The school nurse and school medical advisor have attested in writing that the selected school employee completed the required training; and
- (g) The selected school employee voluntarily agrees to serve as one who may administer medication with injectable equipment or nasal delivery device used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death.

D. Epinephrine for Purposes of Emergency First Aid Without Prior Authorization

- (1) For purposes of this Section D, “regular school hours” means the posted hours during which students are required to be in attendance at the individual school on any given day.
- (2) The school nurse shall maintain epinephrine in cartridge injectors for the purpose of emergency first aid to students who experience allergic reactions and do not have prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine.
 - (a) The school nurse, in consultation with the school nurse supervisor, shall determine the supply of epinephrine in cartridge injectors that shall be available in the individual school.
 - (b) In determining the appropriate supply of epinephrine in cartridge injectors, 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.
- (3) The school nurse or school principal shall select principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school paraprofessional(s) to maintain and administer the epinephrine in cartridge injectors for the

Students

Administration of Student Medications in the Schools

purpose of emergency first aid as described in Paragraph (2) 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 conducting such administration, must annually complete the training made available by the Department of Education for the administration of epinephrine in cartridge injectors for the purpose of emergency first aid.
 - (c) The selected personnel must voluntarily agree to complete the training and administer epinephrine in cartridge injectors for the purpose of emergency first aid.
- (4) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (3) 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 in Paragraph (3) above shall be responsible for the emergency administration of epinephrine.
- (5) The administration of epinephrine pursuant to this section must be done in accordance with this policy, including but not limited to the requirements for documentation and record keeping, errors in medication, emergency medical procedures, and the handling, storage

Students

Administration of Student Medications in the Schools

and disposal of medication, and the Regulations adopted by the Department of Education.

- (6) The parent or guardian of any student may submit, in writing, to the school nurse or ~~school medical advisor, if any,~~ Nursing Supervisor that epinephrine shall not be administered to such student pursuant to this section. The school medical advisor will be made aware of any students that parent or guardian has opted not to allow administration of emergency Epinephrine.
 - (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.
- (7) Following the emergency administration of epinephrine by selected and trained personnel as identified in this section:
 - (a) Such emergency administration shall be reported immediately to:
 - (i) The school nurse and Nursing Supervisor or school medical advisor, if any, by the personnel who administered the epinephrine; and
 - (ii) The student's parent or guardian, by the school nurse or personnel who administered the epinephrine.
 - (b) A medication administration record shall be:
 - (i) Submitted to the school nurse by the personnel who administered the epinephrine 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 the Document and Record Keeping section of this policy.

Students

Administration of Student Medications in the Schools

- E. Opioid Antagonists for Purposes of Emergency First Aid Without Prior Authorization
- (1) For purposes of this Section E, “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.
 - (2) 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.
 - (3) 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.

Students

Administration of Student Medications in the Schools

- (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.
- (4) The school nurse, in consultation with the Superintendent and the building principal, shall provide notice to parents and guardians of the Board's policies and procedures regarding the emergency administration of opioid antagonists in the event of a known or suspected opioid overdose.
- (5) A school nurse shall be approved to administer opioid antagonists for the purpose of emergency first aid, as described in Paragraph (3) 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 (1) developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.
- (6) The school nurse or school principal shall select principal(s), teacher(s), licensed athletic trainer(s), coach(es), school paraprofessional(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 in Paragraph (3) 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 (1) developed by the State Department of Education, Department of

Students

Administration of Student Medications in the Schools

- Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.
- (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.
- (7) Either the school nurse or, in the absence of the school nurse, at least one of the selected and trained personnel as described in Paragraph (6) 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 in Paragraph (6) 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 opioid antagonists 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.
- (8) The administration of opioid antagonists pursuant to this policy must be effected in accordance with this policy and procedures regarding the

Students

Administration of Student Medications in the Schools

acquisition, maintenance, and administration established by the Superintendent in consultation with the Board's medical advisor.

- (9) 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.
- (10) Following the emergency administration of an opioid antagonist by a school nurse or selected and trained personnel as identified in this section:
 - (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 and Nursing Supervisor, 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:

Students

Administration of Student Medications in the Schools

- (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.
- (11) In the event that any provisions of this Section E 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.]

F. Documentation and Record Keeping

- (1) Each school ~~or before or after school program and school readiness program~~ where medications are administered shall maintain an individual medication administration record for each student who receives medication during school or program hours. This record shall include the following information:
 - (a) the name of the student;
 - (b) the student's state-assigned student identifier (SASID);
 - (c) the name of the medication;
 - (d) the dosage of the medication;
 - (e) the route of the administration, (e.g., oral, topical, inhalant, etc.);
 - (f) the frequency of administration;
 - (g) the name of the authorized prescriber;
 - (h) the dates for initiating and terminating the administration of medication, including extended-year programs;
 - (i) the quantity received at school and verification by the adult delivering the medication of the quantity received;
 - (j) the date the medication is to be reordered (if any);
 - (k) any student allergies to food and/or medication(s);
 - (l) the date and time of each administration or omission, including the reason for any omission;
 - (m) the dose or amount of each medication administered;
 - (n) the full written or electronic legal signature of the nurse or other authorized school personnel administering the medication; and

Students

Administration of Student Medications in the Schools

- (o) for controlled medications, a medication count which should be conducted and documented at least once a week and co-signed by the assigned nurse and a witness.
- (2) All records are either to be made in ink and shall not be altered, or recorded electronically in a record that cannot be altered.
- (3) Written orders of authorized prescribers, written authorizations of a parent or guardian, the written parental permission for the exchange of information by the prescriber and school nurse to ensure safe administration of such medication, and the completed medication administration record for each student shall be filed in the student's cumulative health record or, for before or after school programs and school readiness programs, in the child's program record.
- (4) Authorized prescribers may make verbal orders, including telephone orders, for a *change* in medication order. Such verbal orders may be received only by a school nurse and must be followed by a written order, which may be faxed, and must be received within three (3) school days.
- (5) Medication administration records will be made available to the Department of Education for review until destroyed pursuant to Section 11-8a and Section 10-212a(b) of the Connecticut General Statutes.
 - (a) The completed medication administration record for non-controlled medications may, at the discretion of the school district, be destroyed in accordance with Section M8 of the Connecticut Record Retention Schedules for Municipalities upon receipt of a signed approval form (RC-075) from the Office of the Public Records Administrator, so long as such record is superseded by a summary on the student health record.
 - (b) 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 (3) years pursuant to Section 10-212a(b) of the Connecticut General Statutes.

Students

Administration of Student Medications in the Schools

- (6) Documentation of any administration of medication by a coach or licensed athletic trainer shall be completed on forms provided by the school and the following procedures shall be followed:
 - (a) a medication administration record for each student shall be maintained in the athletic offices;
 - (b) administration of a cartridge injector medication shall be reported to the school nurse at the earliest possible time, but no later than the next school day;
 - (c) all instances of medication administration, except for the administration of cartridge injector medication, shall be reported to the school nurse at least monthly, or as frequently as required by the individual student plan; and
 - (d) the administration of medication record must be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

G. Errors in Medication Administration

- (1) 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 policy if necessary;
 - (b) the person making the error in medication administration shall in all cases immediately notify the school nurse, principal, school nurse supervisor, and authorized prescriber. The person making the error, in conjunction with the principal, shall also immediately notify the parent or guardian, 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); and
 - (c) the principal shall notify the Superintendent or the Superintendent's designee.

Students

Administration of Student Medications in the Schools

- (2) The school nurse, along with the person making the error, shall complete a report using the authorized medication error report form. The report shall include any corrective action taken.
- (3) Any error in the administration of medication shall be documented in the student's cumulative health record or, for before or after school programs and school readiness programs, in the child's program record.
- (4) These same procedures shall apply to coaches and licensed athletic trainers during intramural and interscholastic events, except that if the school nurse is not available, a report must be submitted by the coach or licensed athletic trainer to the school nurse the next school day.

H. Medication Emergency Procedures

- (1) Whenever a student has a life-threatening 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.
- (2) Emergency medical care to resolve a medication emergency includes but is not limited to the following, as appropriate under the circumstances:
 - (a) use of the 911 emergency response system;
 - (b) application by properly trained and/or certified personnel of appropriate emergency medical care techniques, such as cardio-pulmonary resuscitation;
 - (c) administration of emergency medication in accordance with this policy;
 - (d) contact with a poison control center; and
 - (e) transporting the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.
- (3) 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, who shall thereafter notify the parent or guardian, advising of the existence and nature of the medication emergency and all steps taken or

Students

Administration of Student Medications in the Schools

- (4) 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.

I. Supervision

- (1) The school nurse is responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned.
- (2) The school nurse's duty of general supervision includes, but is not limited to, the following:
 - (a) availability on a regularly scheduled basis to:
 - (i) review orders or changes in orders and communicate these to personnel designated to give medication for appropriate follow-up;
 - (ii) set up a plan and schedule to ensure medications are given properly;
 - (iii) provide training to licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and interscholastic athletics, licensed athletic trainers and identified paraprofessionals designated in accordance with Section B(3)(g), above, which training shall pertain to the administration of medications to students, and assess the competency of these individuals to administer medication;
 - (iii)** support and assist other licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics, licensed athletic trainers and identified paraprofessionals designated in accordance with Section B(3)(g), above, to prepare for and implement their responsibilities related to the administration of specific medications during school hours and during intramural and interscholastic athletics as provided by this policy;

Students

Administration of Student Medications in the Schools

- (v) provide appropriate follow-up to ensure the administration of medication plan results in desired student outcomes, including providing proper notification to appropriate employees or contractors regarding the contents of such medical plans; and
 - (vi) provide consultation by telephone or other means of telecommunications, which consultation may be provided by an authorized prescriber or other nurse in the absence of the school nurse.
- (b) In addition, the school nurse shall be responsible for:
- (i) implementing policies and procedures regarding the receipt, storage, and administration of medications;
 - (ii) reviewing, on a periodic basis, all documentation pertaining to the administration of medications for students;
 - (iii) performing observations of the competency of medication administration by full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, who have been newly trained to administer medications; and,
 - (iv) conducting periodic reviews, as needed, with licensed nursing personnel, full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, regarding the needs of any student receiving medication.

Students

Administration of Student Medications in the Schools

J. Training of School Personnel

- (1) Full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, who are designated to administer medications shall at least annually receive training in their safe administration, and only trained full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, shall be allowed to administer medications.
- (2) Training for full-time principals, full-time teachers, full-time licensed physical or occupational therapists employed by the school district, coaches of intramural and/or interscholastic athletics and licensed athletic trainers in accordance with Section B(3)(f), above, and identified paraprofessionals designated in accordance with Section B(3)(g), above, shall include, but is not necessarily limited to, the following:
 - (a) the general principles of safe administration of medication;
 - (b) the procedures for administration of medications, including the safe handling and storage of medications, and the required record-keeping; and
 - (c) specific information related to each student's medication plan, including the 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 doses of the medication, and when to implement emergency interventions.
- (5) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s) employed by the Board, coach(es) and/or school paraprofessional(s) who administer epinephrine as emergency first aid, pursuant to Section D above, shall annually complete the training

Students

Administration of Student Medications in the Schools

program developed by the Departments of Education and Public Health and training in cardiopulmonary resuscitation and first aid

- (6) The principal(s), teacher(s), licensed athletic trainer(s), licensed physical or occupational therapist(s), coach(es) and/or school paraprofessional(s) who administer opioid antagonists as emergency first aid, pursuant to Section E above, shall annually complete a training program in the distribution and administration of an opioid antagonist (1) developed by the State Department of Education, Department of Consumer Protection, and Department of Public Health, or (2) under a local agreement, entered into by the Board on July 1, 2022 or thereafter, with a prescriber or pharmacist for the administration of opioid antagonists for the purpose of emergency first aid, which training shall also address the Board's opioid antagonist storage, handling, labeling, recalls, and record keeping.]
- (7) The Board shall maintain documentation of medication administration training as follows:
 - (a) dates of general and student-specific trainings;
 - (b) content of the trainings;
 - (c) individuals who have successfully completed general and student-specific administration of medication training for the current school year; and
 - (d) names and credentials of the nurse or school medical advisor, if any, trainer or trainers.
- (6) Licensed practical nurses may not conduct training in the administration of medication to another individual.

K. Handling, Storage and Disposal of Medications

- (1) All medications except those approved for transporting by students for self-medication, those administered by coaches of intramural or interscholastic athletics or licensed athletic trainers in accordance with Section B(3)(f) above, and epinephrine ~~if applicable: or naloxone~~ to be used for emergency first aid in accordance with Sections D ~~if~~

Students

Administration of Student Medications in the Schools

- ~~applicable: and E]~~ above, must be delivered by the parent, guardian, or other responsible adult to the nurse assigned to the student's school or, in the absence of such nurse, the school principal who has been trained in the appropriate administration of medication. Medications administered by coaches of intramural or interscholastic athletics or licensed athletic trainers must be delivered by the parent or guardian directly to the coach or licensed athletic trainer in accordance with Section B(3)(f) above.
- (2) The nurse shall examine on-site any new medication, medication order and the required authorization to administer form, and, except for epinephrine and naloxone to be used as emergency first aid in accordance with Sections D ~~if applicable: and E]~~ above, shall develop a medication administration plan for the student before any medication is given to the student by any school personnel. No medication shall be stored at a school without a current written order from an authorized prescriber.
 - (3) The school nurse shall review all medication refills with the medication order and parent authorization prior to the administration of medication, except for epinephrine ~~if applicable: and naloxone]~~ intended for emergency first aid in accordance with Sections D ~~if applicable: and E]~~ above.
 - (4) Emergency Medications
 - (a) Except as otherwise determined by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse or, in the absence of the school nurse, the principal or the principal's designee who has been trained in the administration of medication.
 - (b) Emergency medication shall be locked beyond the regular school day or program hours, except as otherwise determined by a student's emergency care plan.
 - (6) All medications, except those approved for keeping by students for self-medication, shall be kept in a designated and locked location used exclusively for the storage of medication. Controlled substances shall be

Students

Administration of Student Medications in the Schools

stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet.

- (6) Access to stored medications shall be limited to persons authorized to administer medications. Each school or before or after school program and school readiness program shall maintain a current list of such authorized persons.
- (7) All medications, prescription and non-prescription, shall be delivered and stored in their original containers and in such a manner that renders them safe and effective.
- (8) At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before or after school program and school readiness program. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be under the direct control of the principal and, if necessary, the program director or lead teacher who has been trained in the general principles of the administration of medication shall also have a set of keys.
- (9) Medications that must be refrigerated shall be stored in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator must be located in the health office that is maintained for health services with limited access. Non-controlled medications may be stored directly on the refrigerator shelf with no further protection needed. Controlled medication shall be stored in a locked box that is affixed to the refrigerator shelf.
- (10) All unused, discontinued or obsolete medications shall be removed from storage areas and either returned to the parent or guardian or, if the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse:
 - (a) non-controlled drugs shall be destroyed in the presence of at least one witness;
 - (b) controlled drugs shall be destroyed in pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies; and

Students

Administration of Student Medications in the Schools

- (c) 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 Section 10-212a(b) of the Connecticut General Statutes. If no residue is present, notification must be made to the Department of Consumer Protection pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies.
- (11) Medications to be administered by coaches of intramural or interscholastic athletic events or licensed athletic trainers shall be stored:
 - (a) in containers for the exclusive use of holding medications;
 - (b) in locations that preserve the integrity of the medication;
 - (c) under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and
 - (d) in a locked secured cabinet when not under the general supervision of the coach or licensed athletic trainer during intramural or interscholastic athletic events.
- (12) In no event shall a school store more than a three (3) month supply of a medication for a student.

L. Review and Revision of Policy

In accordance with the provisions of Conn. Gen. Stat. Section 10-212a(a)(2) and Section 10-212a-2 of the Regulations of Connecticut State Agencies, the Board shall review this policy periodically, and at least biennially, with the advice and approval of the school medical advisor, if any, or other qualified licensed physician, and the school nurse supervisor. Any proposed revisions to the policy must be made with the advice and approval of the school medical advisor, school nurse supervisor or other qualified licensed physician.

Students

Administration of Student Medications in the Schools

Legal References:

Connecticut General Statutes:

Public Act No. 22-80, “An Act Concerning Childhood Mental and Physical Health Services in Schools”

Section 10-206

Section 10-212

Section 10-212a

Section 10-212c

Section 10-220j

Section 14-276b

Section 19a-900

Section 21a-240

Section 21a-286

Section 52-557b

Regulations of Conn. State Agencies:

Sections 10-212a-1 through 10-212a-10, inclusive

Memorandum of Decision, In Re: Declaratory Ruling/Delegation by Licensed Nurses to Unlicensed Assistive Personnel, Connecticut State Board of Examiners for Nursing (April 5, 1995)

Storage and Administration of Opioid Antagonists in Schools: Guidelines for Local and Regional Boards of Education, Connecticut State Department of Education (October 1, 2022)

ADOPTED: _____

REVISED: _____

10/20/2022



Newtown Public Schools

3 Primrose Street
Newtown, CT 06470

REFUSAL TO PERMIT ADMINISTRATION OF EPINEPHRINE FOR EMERGENCY FIRST AID

Name of Child: _____ Date of Birth: _____

Address of Child: _____

Name of Parent(s): _____

Address of Parent(s): _____
(if different from child)

Connecticut law requires the school nurse and other qualified school personnel in all public schools to maintain epinephrine in cartridge injectors (EpiPens) for the purpose of administering emergency first aid to students who experience allergic reactions 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 epinephrine. State law permits the parent or guardian of a student to submit a written directive to the **school nurse or school medical advisor** that epinephrine shall not be administered to such student in emergency situations. **This form is provided for those parents who refuse to have epinephrine administered to their child.** The refusal is valid for only for the 20__-20__ school year.

I, _____, the parent/guardian of _____,
Print name of parent/guardian Print name of student

refuse to permit the administration of epinephrine to the above named student for purposes of emergency first aid in the case of an allergic reaction.

Signature of Parent/Guardian

Date

Please return the completed original form to your child's school nurse or school medical advisor,
_____ *[Insert name of medical advisor]* at

_____ *[Insert address of medical advisor].*

10/2017



Newtown Public Schools

3 Primrose Street
Newtown, CT 06470

REFUSAL TO PERMIT ADMINISTRATION OF OPIOID ANTAGONISTS FOR EMERGENCY FIRST AID

Name of Child: _____ Date of Birth: _____

Address of Child: _____

Name of Parent(s): _____

Address of Parent(s): _____
(if different from child)

Connecticut law authorizes the school nurse and other qualified school personnel in all public schools to maintain opioid antagonists (Narcan) for the purpose of administering emergency first aid to students who experience an opioid-related drug 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 opioid antagonists. State law permits the parent or guardian of a student to submit a written directive to the **school nurse or school medical advisor** that opioid antagonists shall not be administered to such student in emergency situations. **This form is provided for those parents who refuse to have opioid antagonists administered to their child.** The refusal is valid for only for the 20__-20__ school year.

I, _____, the parent/guardian of _____,
Print name of parent/guardian Print name of student
refuse to permit the administration of opioid antagonists to the above named student for purposes of emergency first aid in the case of an opioid-related drug overdose.

Signature of Parent/Guardian

Date

Please return the completed original form to your child's school nurse or school medical advisor,
_____ *[Insert name of medical advisor]* at

_____ *[Insert address of medical advisor].*

6/2022

ADMINISTRATIVE PROCEDURES FOR ADMINISTRATION OF MEDICATIONS BY SCHOOL PERSONNEL

Administration of Medications

1. Licensed physician, physician's assistant (with M.D.'s stamp), advanced practice registered nurse, dentist, licensed optometrist, or licensed podiatrist orders for medicinal preparations to be administered shall specify in writing the name of the drug, reason for administering, dosage, side effects, and duration, and shall be renewed each school year.
2. Since prescriptions for controlled substances have time limitations and because individual patients vary in their response to medications, the school nurse will seek to maintain regular contact when necessary with the prescribing physician, physician's assistant, advanced practice registered nurse, dentist, licensed optometrist or licensed podiatrist for confirmation or change of the order.
3. Upon admission to school each year, an inquiry should be made by the school nurse or building principal as to medications and allergies and the required procedures to be observed for those students requiring medicinal preparations as prescribed by a licensed physician, physician's assistant (with M.D.'s stamp), advanced practice registered nurse, dentist, licensed optometrist, or licensed podiatrist. In support of such required procedures there shall be on file:
 - a. The written order with a plan of care from the physician for the student
 - b. The written authorization of the student's parent or guardian, which shall be included in the student's cumulative health record and kept for a minimum of three years, and
 - c. Written permission of the parent for the exchange of information between the prescriber and the school nurse necessary to ensure the safe administration of such medication.
4. In absence of a licensed nurse only principals, designated teachers, licensed physical or occupational therapists employed by the district, coaches or licensed trainers of intramural and interscholastic athletics of the school who have been properly trained as determined by the school supervising nurse and are under the general supervision of a school nurse may administer specific medications to students. Injectable medications may be administered by a principal, teacher, coach, licensed athletic trainer or paraprofessional only to a student with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.
5. A specific paraprofessional, through a plan approved by the Nurse Supervisor and School Medical Advisor, may be designated to administer medication with a cartridge injector, to a particular student diagnosed with an allergy that may require prompt treatment to avoid serious harm or death. For the purposes 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. The nurse Supervisor and School Medical Advisor along with the school nurse may jointly approve a plan and provide general supervision and training to an identified school paraprofessional to administer the cartridge injector. The plan may only be approved with the written authorization of the student's parents/guardians and pursuant to a written order from the student's licensed physician, and APRN or a PA authorized by law to prescribe medication. Investigational drugs may not be administered by principals, teachers, occupational or physical therapists, coaches, licensed athletic trainers or paraprofessionals (CGS 10-212a, 8 to 10 – 212a – 10 inclusive).

6. In some instances the self-administration of medication by a student may be authorized in a written statement by both a licensed physician, physician's assistant (with M.D.'s stamp), advanced practice registered nurse, dentist, licensed optometrist, or licensed podiatrist and the parent or guardian. The school nurse shall evaluate the situation to determine if it is safe and appropriate and develop a plan for general supervision of the self-medication. The statement to be kept in the student's cumulative health record should include information on diagnosis, drug, dosage, and frequency to be taken. The school nurse and teacher, when appropriate, should counsel the student on the importance of taking medications as prescribed. The medication, when appropriate, should be kept in the school nurse's office or with the teacher.
7. A student with diabetes may test his/her blood glucose level per written order of a physician or an advanced practice registered nurse stating the need for and that the student is able to self-test. CGS 10-220j
8. Acetaminophen/Tylenol, Ibuprofen, Tums (according to age) may be administered by the school nurse or designated school personnel with the written permission of the parent/guardian under the orders of the school medical advisor.
9. Students shall not be denied access to transportation solely due to such student's need to carry a cartridge injector. CGS 10-220i
10. During intramural and interscholastic events, a coach or licensed athletic trainer may administer specific medications for select students. The coach and licensed athletic trainer must follow all of the administration of medications regulations, record keeping and documentation. The medications shall be kept separate from the medications stored in the nurse's office.

Medication Administration in Before and After School Programs

1. Administration of medication in school readiness programs and before and after school programs shall be in keeping with Connecticut Regulations section Sec. 10-212a-10. On an annual basis, the Health Services Supervisor, in collaboration with the Superintendent or the Superintendent's designee(s), will review the policy and procedures as pertinent to medication administration in before and after school programs and will determine what programs, if any, meet the definition of before and after school programs as defined in Connecticut

2. Regulations section Sec. 10-212a-10 for that specific year. For those programs that meet the definition, the Health Services Supervisor or his/her designee shall determine:
 - a. If administration of medications is medically necessary for any participant(s) to access the program and maintain their health status while attending the program;
 - b. the level of nursing services needed to ensure the safe administration of medication within each program, e.g., medication and emergency care plan development, pre-program training of delegates, and periodic supervision; availability of telecommunications with school nurse during the program; or on-site availability of a nurse;
 - c. who may administer medication in the given program;
 - d. whether students with self-administration plans in place during the school day require any adaptation of those plans for use in before and after-school programs;
 - e. whether students with emergency and individualized health care plans in place during the school day require adaptation of those plans for use in before and after school programs;
 - f. the procedure to be followed in the event of a medication emergency or error and the individuals or facilities to be contacted in such event; and
 - g. the person responsible for decision making in the absence of the nurse.

In addition:

- a. Local poison control center information shall be readily available in each program.
- b. No medication shall be administered in these programs without:
 - (1) then written order of an authorized prescriber, and
 - (2) the written authorization of a parent or guardian or an eligible student
- c. In the absence of a licensed nurse, only directors or directors' designees, 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 hired by the district to provide services to the before and after school or school readiness programs.
- d. Training for directors or directors' designees, lead teachers or school administrators in the administration of medications will be provided according to subsections (a) to (c), inclusive, of Section 10-212a-3 of the Regulations of Connecticut State Agencies and #12 of this procedure.

- e. Directors or director's designee, lead teachers and school administrators may administer oral, topical intranasal or inhalant medications, and may administer cartridge injector medications only to a student with a medically-diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death.
- f. Investigational drugs or research or study medications may not be administered by director's designee, lead teachers, or school administrators; and
- g. Controlled drugs currently listed in schedules II through V of the Regulations of Connecticut State Agencies, Sections 21a-243-8 to 21a-243-11, inclusive, of the Regulations of Connecticut State Agencies may be administered in school readiness programs and before-and-after-school programs if necessary in order for the student to attend the program and determined appropriate by the Health Services Supervisor or designee.
- h. Self medication, when determined appropriate by the Health Services Supervisor or designee, shall follow the procedures in Section 10-212a-4 of the Regulations of Connecticut State Agencies and #7 of these procedures.
- i. All medications in before and after school and school readiness programs shall be handled, stored and disposed of in accordance with the provisions of subsection (a) to (k), inclusive, of the Regulations of Connecticut State Agencies and #20 in these procedures.
- j. A separate supply of medication shall be stored at the site of the before or after school program. In the event that it is not possible for the parent or guardian to provide a separate supply of medication, then a plan shall be developed to ensure the timely transfer of the medication from the school to the program and back on a daily basis.
- k. Documentation shall be completed and maintained on form provided by the school nurse supervisor or designee, as follows:
 - (1) a separate administration of medication record for each student shall be maintained in the program;
 - (2) the administration of medication record shall be submitted to the school nurse at the end of each school year and filed in or summarized on the student's cumulative health record according to local or regional board of education policy.
- l. Communication with the school nurse:
 - (1) administration of a medication with a cartridge injector shall be reported to the school nurse at the earliest possible time but not later than the next school day.

- (2) In all other instances of the administration of medication shall be reported to the school nurse according to the student's individual plan or at least on a monthly basis.
- m. Supervision of the administration of medication in before and after school programs shall be the responsibility of the Health Services Supervisor or designee who has been assigned responsibility for delegating to, training and supervising appropriate personnel in the administration of medication for before and after school programs and will be conducted in accordance with the provisions of subdivision (1) to (6), inclusive, of Section 10-212a-7 of the regulations of Connecticut State Agencies.

Administration of Herbal Medications/Preparations

Licensed physician's orders for herbal medications/preparations to be administered shall adhere to all of the school's medication standards/regulations and shall specify in writing:

1. Name of medication/preparations
2. Name and quantity of ingredients
3. Dosage
4. Expected results
5. Side effects
6. Contraindication
7. Name and dosage of any drugs taken concurrently
8. Potential interactions with drugs taken concurrently
9. Reason why drug requires administration during school hours
10. Reference with source of drug safety

Medication Emergencies

The school nurse will administer appropriate emergency care, record first aid treatment administered, notify the parents or guardian and if necessary contact the EMS.

When the nurse is not readily available or when emergencies occur after school hours, appropriate emergency care may be administered by a building principal or designated teacher. Parents and administrators shall be notified immediately.

Each school shall ensure the following information is readily available.

1. The local poison information center telephone number
2. The physician, clinic or emergency room to be contacted in the event of medication emergencies
3. The name of the person responsible for decision-making in the absence of the school nurse.

Training of School Personnel

Only principals, designated teachers, occupational or physical therapists, coaches, licensed athletic trainers or paraprofessionals who have received appropriate training from the school nurse or school physician shall be allowed to administer medications to students. If a school chooses to train administrators and teachers for this purpose, it is recommended that the number of trained people be in the range of 2-4 per building.

This training shall include but not be limited to:

1. The procedural aspects of safe medication administration, the safe handling and storage of medications, and recording.
2. The medication needs of specified students, medication idiosyncracies, and desired effects, potential side effect or untoward reactions. (CGS Section 10-212a-3)

The training program and procedures shall be written and specific, describing the training and the frequency with which it is done.

Annually each principal shall provide in writing to the office of the Assistant Superintendent documentation that such training has been provided and names of staff members in the building who have received such training. Annually the Nurse Supervisor shall provide an informational update to principals and teachers trained in the administration of medications.

Handling, Storage and Disposal of Medications

1. All medications, except those approved for transporting by students for self-medication, shall be delivered by the parent or other responsible adult and shall be received by the nurse assigned to the school. The nurse must examine on site any new medication, medication order and permission form and develop a medication administration plan for the student before any medication is given by any school personnel.
2. All medications, except those approved for student self-medication, shall be kept by the nurse in a designated locked container, cabinet or closet used exclusively for the storage of medication. 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. In case of emergency medications, they shall be stored in a cabinet which will be unlocked during school hours and will be locked beyond the regular school day. At least two sets of keys for the medication cabinets shall be maintained for each building. One set of keys shall be maintained under the direct control of the school nurse and the additional set shall be under the direct control of the principal.
3. Access to all stored medications shall be limited to persons authorized to administer medications. Each school shall maintain a current list of those persons authorized to administer medications.

4. All medications, prescription and nonprescription, shall be stored in their original containers and in such a manner as to render them safe and effective.
5. Medications requiring refrigeration shall be stored in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit.
6. All unused, discontinued or obsolete medications shall be removed from storage areas and returned to the parent or guardian. If the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse:
 - a. Noncontrolled drugs shall be destroyed in the presence of at least one (1) witness;
 - b. Controlled drugs shall be destroyed pursuant to Section 21a-262-3 of the Regulations of the Connecticut State Agencies.
7. No more than a 3-month school day supply of a medication for a student shall be stored at the school.
8. No medication for a student shall be stored at a school without a current written order from an authorized prescriber.

Recordkeeping/Documentation

Each school or before school and after school program and school readiness programs where medications are administered shall maintain a medication administration record for each student who receives medication during school hours. Such record shall include:

1. The name of the student
2. The name of the medication
3. The dosage of medication
4. The route of administration
5. The frequency of the administration
6. The name of the prescribing physician, physician's assistant (with M.D.'s stamp), advanced practice registered nurse, or dentist and the name of the parent or guardian requesting that the medication be given
7. The date the medication was ordered
8. The quantity received
9. The date the medication is to be reordered
10. Any student allergies to food or medicine
11. The date and time of administration or omission including the reason for the omission
12. The dose or amount of drug administered
13. The full legal signature, written or electronic, of the nurse, principal, teacher or paraprofessional administering the medication
14. For controlled medications, a medication count which should 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 non-controlled medications, at the discretion of the school district, may be destroyed in accordance with Section M8 of the Connecticut Municipality Record retention Schedule so long as it is superseded by a summary on the student record.

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 record needs to be maintained in the school for three years pursuant to Section 10-212a(b) of the Connecticut General Statutes.

Transactions shall be recorded in ink and shall not be altered. The written order of the physician, physician's assistant (with M.D.'s stamp), advanced practice registered nurse, dentist, licensed optometrist, or licensed podiatrist, the written authorization of the parent or guardian, and the completed medication administration record for each student shall be filed in the student's cumulative health record. A physician's verbal order, including a telephone order, for a change in any medication can be received only by a school nurse. Any such verbal order must be followed by a written order within three school days. If errors occur in the administration of medication to students, it shall be reported immediately to the school nurse, the prescribing physician and the parent or guardian. The school nurse shall determine if additional medical treatment is required as a result of the error.

A report shall be completed using an accident/incident report describing the error. Any error in the administration of medication shall be documented in the student's cumulative health record.

Supervision

The school nurse is responsible for general supervision of the administration of medications in the schools to which that nurse is assigned. This shall include, but not be limited to:

1. Availability on a regularly scheduled basis to:
 - a. Review the orders or changes in orders and communicate those to personnel designated to give medication for appropriate follow-up.
 - b. Set up a plan and schedule to ensure medications are given.
 - c. Provide training to principals, teachers, other licensed nursing personnel, occupational or physical therapists, coaches, licensed athletic trainers and paraprofessionals in the administration of medications.
 - d. Support and assist other licensed nursing personnel, principals, teachers, occupational or physical therapists, coaches, licensed athletic trainers and paraprofessionals to prepare for and implement their responsibilities related to the administration of specific medications during school hours.

- e. Provide consultation by telephone or other means of telecommunication. In the absence of the school nurse, a licensed physician or nurse may provide this consultation.
2. Implementation of policies and procedures regarding receipt, storage and administration of medications.
3. Monthly review of all documentation pertaining to the administration of medications for students.
4. Work-site observation of medication administration by teachers, principals, occupational or physical therapists, coaches and paraprofessionals who have been newly trained.
5. Periodic review, as needed, with licensed nursing personnel, principals, teachers, occupational or physical therapists, coaches, licensed athletic trainers and paraprofessionals regarding the needs of any student receiving medication.

Liability

Nurses and trained personnel are protected from liability claims by the Connecticut General Statute 10-235 and the Board of Education liability insurance coverage.

The Medication Administration Policy must be in accordance with Connecticut State Law CGS Section 10-212a as well as Regulations of the Connecticut State Agencies Section 10-212a-1 to 10-212a-7, inclusive and must be approved by the Board of Education and School Medical Advisor or other qualified license physician every two years.

Reference 10-235, 10-212a, 10-212a-1, 10-212a to 10-212d

Revised 11/13/01, 1/20/04, 8/28/06, 12/16/08, 9/18/12

**Please Note: These minutes are pending Board approval.
Board of Education
Newtown, Connecticut**

Minutes of the Board of Education meeting held on October 3, 2023 at 7:00 p.m. in the Council Chambers, 3 Primrose Street.

D. Zukowski, Chair	C. Melillo
J. Vouros, Vice Chair	A. Uberti
D. Ramsey, Secretary	T. Vadas
D. Cruson	7 Staff
A. Plante	3 Public
T. Higgins	1 Press
S. Tomai	
I. Khazadian	
G. Peteronjes (absent)	

Ms. Zukowski called the meeting to order at 7:00 p.m.

Item 1 – Pledge of Allegiance

Item 2 – Celebration of Excellence

Chris invited Matt Memoli and his team to speak about the Michael's Jewelers Cup Award we've won the past three years..

Mr. Memoli spoke about this award that tat the high school's group of athletes are the best he could ask for which also includes his staff, the coaching staff and the students.

Ms. Zukowski appreciated our involvement in these programs.

Item 3 – Consent Agenda

MOTION: Mr. Cruson moved that the Board of Education approve the consent agenda which includes the donations to Reed Intermediate School and Newtown High School, the Newtown Middle School 8th grade field trip, and the correspondence report. Mrs. Plante seconded.

Mr. Vouros thanked all or the middle school staff for this field trip consideration.

Motion passes unanimously.

Item 4 – Public Participation

Bruce Walzak, Glover Avenue, gave his opinion on the library book policy.

Item 5 – Reports

Chair Report: Ms. Zukowski had no report from the last two weeks.

Superintendent's Report: Mr. Melillo attended Newtown prevention council meeting where they discussed event promoting a healthy lifestyle. November 13 they are having a community program on vaping, November 8 one on administering narkan, and October 27 one on substance abuse. There will also be a health fair on October 28 at the Reed School. The Joseph P. Grasso Marching Band Festival will be on October 14 in the Blue and Gold Stadium. The Newtown High School varsity football team began the season beating three playoff teams from the previous year which is a great achievement.

Committee Reports:

Mr. Cruson said the Policy Committee met last Wednesday and went over the book policy on the agenda tonight.

Mr. Ramsey reported that Curriculum and Instruction met last Tuesday regarding updates to the health curriculum and ELA programs K-8.

Student Representative Report:

Ms. Khazadian reported that today 11 seniors traveled to the Aqua Turf to represent Newtown High School with Mr. Memoli and Dr. Longobucco to receive the Michael Jewelers Cup Award. Juniors and seniors continue to attend college rep visits. It was announced that the play this year will be student directed. There has been an increase in student participation and fan spirit at sporting events. Student Government has begun preparing for Spirit Week, the Pep Rally and Homecoming.

Item 6 – Presentations**Grades 5 and 6 Health Curriculum:**

Michelle Failla, Reed health teacher presented the Grades 5 and 6 health curriculum.

Mr. Vouros noted that the talk among students at the middle school is that the health class is a favorite and the transition to middle school is stellar.

Ms. Zukowski said that personal safety includes technology and social media but she didn't see it in the fifth grade curriculum.

Ms. Failla said it was not but understands personal safety and students on line and she is looking at it as a universal precaution. Fifth grade is a follow-up in a general safety unit.

Ms. Zukowski noted that the State allows parents to opt out of sex education and asked if that impacted grades.

Ms. Failla said we had some students who were sent to the library and doing health related work during the time that subject is being taught. The fifth graders continue with a separate unit. There are alternative health projects and assessments.

Mr. Higgins congratulated Mrs. Failla on her work and belief in the importance of what she does. He asked what changes she's seen over the years with students being ready for certain things and if your students are ready sooner to be exposed to this material. How has your experiences shaped your judgement calls?

Mrs. Failla said, in her 20 years teaching, times have changed. Before she teaches the human growth unit she speaks to parents about how she teaches their children. The last 10 years more and more students have cell phones. 30% of the students have said they had a talk with their parents but 75% of parents said they did. 80% of students know where babies come from but many learned from the internet. The 6th graders know a lot more than we might have known in 9th grade.

2022-23 Athletics Program Year in Review:

Mr. Memoli gave his report which included slides.

Mrs. Plante thanked him and stated this goes far beyond sports and addresses mental health and community service.

Mr. Higgins said this was the best version of what student sports has to offer and shows how athletics contributes to how students are. He referred to the leadership program and how he opened that up to students. He asked if we should be teaching leadership if we are not. He also referred to the mental aspects of sports and it being important in sports. He asked if there are plans in place or is there a pathway to do more of that like the volleyball team.

Mr. Memoli said students want to fit in but you have some who don't know they have leadership skills and come in for the meetings on leadership. Students like to attend the Captains Council as it drives the culture in the school. The mental training part has been going on a few years. Multiple teams listened to presenters and we have a coach who is doing this with the girls.

Mr. Ramsey said regarding the leadership meetings with captains he asked if he met with all of them at the same time.

Mr. Memoli said he meets with the season sports and overlaps. He tries to gear it to those captains during their season.

Mr. Vouros said that eight years ago his hiring was one of the finest days we had in this district. He is proud of him. He has excellent leadership. He questioned how Mr. Memoli found freshman future leaders.

Mr. Memoli responded that he emails each freshman.

Mr. Vouros had concerns about those who may want to attend but don't have the courage. Former eighth grade staff could possibly help with that.

Ms. Zukowski said this is about building character and teamwork and cross groups support.

2022-23 Fine Arts Year in Review:

Michelle Hiscavich gave her presentation.

Mr. Cruson said it was an excellent point to teach students who don't think they can do anything in the arts. Parent involvement is very important with their children especially in middle school.

Mr. Ramsey felt that the heart and soul of learning can be transferable to other subject areas. Children learn with all their senses and this is a tremendous model of this. It's important to have programs that help to gain confidence.

Mr. Higgins appreciated tying points into the strategic plan and how we approach student learning. How are we doing with fine arts and the continuation of career development and how are we supporting teachers so they are continuing to grow.

Ms. Hiscavich said we have a professional development plan to send teachers to workshops specific to their area. Her teachers are going to Wesconn and the Brookfield Craft Center and will have other supports during the PD days getting together cross levels.

Mr. Higgins asked if there was anything she needed.

Ms. Hiscavich said the need is for more time for students to take these courses.

Ms. Zukowski said it was wonderful to have this level of art in the community.

Item 7 - Old Business

MOTION: Mr. Cruson moved that the Board of Education approve Policy 6163.1 Selection of Library Media Resources. Mr. Higgins seconded.

Mr. Cruson said the policy committee addressed concerns from the last meeting. There is a new bullet in the selection criteria. There was a long discussion on the scope of reconsideration request and on whether employees should have a say in some way. They also addressed the time period for how long a reconsideration would stand. The option was left open to be reconsidered again. Also discussed was the distribution of the list of books making it available for parents to see what has been reconsidered.

Mrs. Uberti stated she was concerned about exposing our district if we put it on the website. Mr. Higgins was proud of the work the Board has done to reach conclusions for this policy.

Mr. Cruson added that the regulation was part of this policy which is not what the Board votes on. It's there and ready for use when policy goes into effect. The forms are for reference.

Mr. Ramsey said this is a comprehensive policy but it was a difficult road for the community. A good thing that happened is there is an opportunity for parents to communicate with library media specialists who have the best interest in the students. He encourages the parents to communicate with them.

Mr. Vouros stated that the work the subcommittee has done is a true definition of trust.

Ms. Zukowski said as a Board we aim to support all members of our community. This book policy changes the way we think about what a reconsideration is. As long as everyone agrees with the selection criteria then that's an important thing to be able to do.

Motion passes unanimously.

Below is a statement from Mrs. Uberti.

*"It was on May 2, just about 5 months ago to the day, that I urged our community to come together to find a path forward, a path that would require hard but respectful conversations and, of course, compromise. It has been a long journey but I believe that the policy, as it is presented this evening, is a symbol of what can be accomplished when people set aside their differences and focus on achieving a mutually agreeable end. I believe that this policy, which is grounded in common sense protocols and acknowledges both professionalism of our library media specialists as well as the rights of our parents, will serve as a model to other districts that are grappling with the same issues we have over the past 6 months. I want to thank those who have greatly contributed to the policy's development. First and foremost I want to thank our library media specialists who have proven themselves to be staunch defenders of the freedom to read, and dutifully read and provided feedback on multiple iterations. It hasn't always been easy but I have truly valued our discourse. I'd also like to acknowledge Mr. Higgins, who supported me in getting the work started - a daunting task - and challenged my thinking along the way. Your contributions helped make the policy what it is. I'd also like to thank the many parents who trusted in me enough to have frank discussions about their perspectives and motivations and ultimately, so that they, too, could be comfortable with the policy as it is presented tonight. I'd also like to thank Mr. Cruson, chair of the policy committee, for listening and allowing me to shape the timeline for the review of this policy. And, of course, I'd like to thank every member of the Board for listening and balancing the concerns of our staff and members of the public with care and respect. Your comments and suggestions along the way all contributed to where we are this evening. And most importantly, thank you Board members, for working together to do what I always believe we could do, demonstrate for our students that adults can disagree but through the sharing of differing opinions and respectful listening, we can find common ground.
Thank you."*

Item 8 – New Business

Replacement Truck Purchase:

Mrs. Vadas spoke about needing a replacement truck which has been in our budget for two years. This is an emergency purchase due to the condition of the truck. The money should be

taken from the Non-lapsing Fund. We received another bid today for \$1,000 less. That truck would be available in November and the first two would be available probably in January.

Mrs. Plante added that this request was reviewed in CFF and everyone was in support of this purchase.

Mr. Higgins supports this purchase and asked if we have anything in terms of how we think about procurement and attempting to source locally.

Mrs. Vadas said we have a purchasing agent who canvasses everything and we also look at the State bid. We will also look locally like at Ingersoll but we have to put it out to bid if we go through the State contract because it is a new vehicle.

MOTION: Mr. Cruson moved that the Board of Education approve the purchase of a replacement truck from Gengras Ford in an amount up to \$71,313.40. Mr. Ramsey seconded. Motion passes unanimously.

BOE Building Committee Appointment:

MOTION: Mr. Cruson moved that the Newtown Board of Education is hereby authorized John Barlow as the building committee with regard to the HVAC IAQ Grant at the Head O'Meadow School for the replacing of air conditioning condensers. Mrs. Plante seconded.

Mr. Melillo said last year when we applied for Hawley HVAC grant we were denied funds from the State of Connecticut because we don't have a building committee. To bypass this, Mr. Barlow will just sign off on the projects to be in line with the grant recommendations to satisfy the grant.

Mr. Higgins questioned having one person on a committee.

Mrs. Vadas suggested that she also be on the committee as well as Mrs. DeStefano.

MOTION: Mr. Cruson moved to amend the motion to add Tanja Vadas and Judit DeStefano to the committee. Mrs. Plante seconded. Motion passes unanimously.

Vote on amended motion: Passes unanimously.

MOTION: Mr. Cruson moved that the Newtown Board of Education is hereby authorized John Barlow, Tanja Vadas and Judit DeStefano as the building committee with regard to the HVAC IAQ Grant at the Newtown High School for the replacing of 5 Rooftop air handling units. Mrs. Plante seconded. Motion passes unanimously.

First Read of Policies:

Mr. Cruson spoke about the policies.

Policy 9100 Organization Meeting of the Board. This policy needed a minor adjustment because of changes to the Charter and the vacancy policy to specify that new officers will be elected once a new board is seated.

Mrs. Plante said it doesn't address what we do if an officer of the Board resigned their position but they remain on the Board.

Mr. Cruson said the subcommittee would look at that.

Policy 9221 Method of Filling Vacancies. They made sure it references the Charter and clarifies some of what caused confusion regarding formal interviews and who would participate in the interview but it is the party filling the seat that gets the say and handles the board officer vacancies.

Policy 6000 Instruction is an introduction to the entire 6000 series.

Policy 6111 School Calendar is a basic policy on setting the calendar and follows the general statutes.

Policy 6146 Requirements for Graduation is being revised because State law changed this year and we wanted to be sure we didn't conflict with that.

Minutes of September 19, 2023:

MOTION: Mr. Cruson moved that the Board of Education approve the minutes of September 19, 2023. Mr. Ramsey seconded. Motion passes unanimously.

Minutes of September 20, 2023:

MOTION: Mr. Cruson moved that the Board of Education approve the minutes of September 20, 2023. Mrs. Tomai seconded. Motion passes unanimously.

Item 9 – Public Participation

MOTION: Mr. Vouros moved to adjourn. Mr. Cruson seconded. Motion passes unanimously.

Item 10 – Adjournment

The meeting adjourned at 9:33 p.m.

Respectfully submitted:

Donald Ramsey
Secretary