



SD School for the Blind and Visually Impaired

DORMITORIES AND INFIRMARY HANDBOOK

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RESIDENTIAL LIVING PROGRAM

The purpose of the Residential Living Program is to provide an environment which assists the students' physical, social, mental and emotional development. It is an essential component to learning the independent living skills which are necessary to achieve a satisfying, productive and optimally independent adult life, commensurate with individual capabilities.

The Residential Program works in conjunction with the Daily Living Skills Program. Students have goals set annually in the Individual Education Plan and implemented through a cooperative effort between the Case Managers and teachers. A quarterly Dormitory Report is completed by the Case Manager and sent home with the report cards.

In addition, students' behavior is influenced and molded by individual Behavior Management Programs which are created and supervised by a team involving parents, Case Manager and Case Teacher.

The SDSBVI students also have frequent opportunities to be involved in community activities. Outside groups and individuals have contributed time and funding to provide programs and activities. The SDSBVI is part of the local Special Needs Consortium which provides ongoing recreational programs.

CASE MANAGEMENT SYSTEM

PHILOSOPHY - The Case Management System is a method that dormitory and teaching staff can use to help meet the needs of students in a more efficient personal way. The students benefit from the one-to-one contact they receive from the Case Managers and communication is increased.

Dorm Case Managers will work with faculty Case Teachers on student programs during IEP meetings and prestaffings. There will also be informal meetings between the students' "case people" weekly. This arrangement will promote a better working relationship between dorm staff and faculty members and increase the service provided to the students.

CASE MANAGERS - The Case Managers are assigned by the Dormitories Supervisor and have the following responsibilities:

1. In conjunction with Daily Living Skills Instructor and other faculty, participate in implementing IEP goals for students in the dorm in the areas of daily living skills, social/emotional and recreation/leisure skills.
2. Consult with Case Teacher at least weekly. This can be done informally but record of it must be kept in the student's binder.
3. Attend meetings on case students making necessary arrangements with Dormitories Supervisor.
4. Request team meetings when necessary.
5. Communicate with parents on a regular basis either by telephone or correspondence. Frequency of contact can be mutually determined.

PROCEDURE - Each dorm employee will be given a list of students for whom s/he will be assigned as Case Manager. This person will be responsible for meeting with each student both individually and in a group on an informal basis. The Dormitory Supervisor will be the Case Manager while students are involved in the 45 day placement for evaluation process.

Weekly sessions need not be long and should be used to build rapport with the students and aid in meeting their needs.

Case Managers will maintain student binders for each of their case students. Information includes student schedules, activities, behavior programs, parental contacts and record of their weekly meeting. Case Managers should keep all reports and records confidential and use discretion when sharing information with other staff members and persons outside of school. This will greatly help in building credibility with the students. The files and daily log book must be locked in an area where they will not be accessible to students or unauthorized individuals.

If the Case Manager feels uncomfortable in handling a specific problem, s/he is encouraged to seek help from the Dormitories Supervisor and/or Student Services Director but decision making is an essential part of the job. Problems of a serious nature should be referred to the Student Services Director by the Dormitories Supervisor.

RESIDENTIAL STAFF RESPONSIBILITIES - Residential staff bear the responsibility for the well-being and safety of the children in his/her charge. All children are to be treated fairly and favoritism is not to be shown. An efficient means of communication and discipline encourages the development of respect from the children for the staff members. **ABUSIVE LANGUAGE AND CORPORAL PUNISHMENT ARE NOT PERMITTED.** Established Non-Violent Crisis Intervention procedures are to be implemented and behavior programs implemented.

The Case Managers and Houseparents need to have positive contacts with parents. Frequently, parents may need to be referred to the proper authority, including the academic administration. Any pertinent information, provided by parents, also needs to be shared with the appropriate teachers, administrators or dormitories supervisor. Always be honest and TACTFUL when answering parents' questions and don't discuss other students with parents.

REPORT, REQUIRED

1. Always complete the BEHAVIOR REPORT Form when student behavior involves self-injury, injury to others or intentional destruction of property. This form is available on the "H" drive in the SDSBVI folder under "Forms".
2. To qualify as "injury," the results of student behavior must require attention at the Infirmary. Superficial scratches that stop bleeding after washing with soap and water and blotting are not injuries, except in the case of specific students with special medical needs as directed by the Nurses. Scratches or cuts that require a bandage are considered injuries.
3. Write simply, clearly and concisely about direct observations only.
4. The form is to be completed and distributed or e-mailed before leaving the present work shift. Copies are to be given to the Case Teacher, Case Manager, Principal, Student Services Director and Dorm Supervisor. The Nurses and Superintendent receive a copy only if there was an injury.
5. If an ACCIDENT, INCIDENT OR UNSAFE CONDITION occurs, the standard state form should be completed with copies distributed or e-mailed to the Risk Manager, Student Services Director and Superintendent. This form is also available on the "H" drive in the SDSBVI folder under "Forms".
6. Only the ACCIDENT, INCIDENT OR UNSAFE CONDITION Form is used when the accident, incident or unsafe condition is not related to a student's behavior.

SUPERVISORY STRUCTURE

All problems in the dorms and/or Infirmary must be directed to the Student Services Director by the Nurses or through the Dormitories Supervisor. If an issue is presented to the department supervisors and not handled to the satisfaction of the employee, contact the administration. A meeting will be arranged with the department supervisor, employee, Superintendent and Student Services Director to deal with it. The responsibility will go directly to the department head.

Anecdotal records will be kept by supervisors noting accomplishments, as well as problems, for each employee. Any noteworthy situation needs to be written up and signed by the employee and supervisor with a copy being given to the Director of Human Resources. At the end of each year the records are destroyed.

Evaluations will be done, as required by the South Dakota Bureau of Personnel, reflecting the employee's work performance. Before an evaluation is shared with an employee, the Student Services Director and the Superintendent will review the ratings and comments.

SCHOOL DAY

Students will be released from the dormitory at 7:55 a.m. and teachers are to be in their assigned rooms. Classes will begin at 8:00 a.m. In the normal schedule, the class day will end at 3:00 p.m.

IN-SERVICE AND STAFFING

New employees will participate in all required in-service training.

The Dormitory and Infirmary staff meet on the final day of school prior to each homegoing to discuss various topics dealing with the students and situations at the SDSBVI.

In addition, each year a longer in-service may be provided for Residential Child Care Staff on a needed topic.

Residential Child Care Staff and Nurses are also encouraged to take additional outside training in accordance with the South Dakota Bureau of Personnel guidelines.

VISITATION GUIDELINES

Parents, relatives and friends are welcome in the dormitories, but there are a few guidelines to protect students' privacy. Please make arrangements with staff on duty. No visitors of the opposite gender, other than parents, should go past the "exit" signs in the dorm. Visiting hours are posted by each dorm.

DORMITORY VISITING HOURS:

Monday -- Friday: 3:00 PM – 5:00 PM and 7:00 PM – 9:00 PM

Saturday: 12:00 PM – 4:00 PM and 6:00 PM – 10:00 PM

Sunday: 12:00 PM – 4:00 PM and 6:00 PM – 9:00 PM

TELEPHONE

Students, along with their Case Managers, will make weekly phone calls home. Family members are also encouraged to call their children. Personal phone calls will not be allowed during meal times and after 10:00 PM (except for emergencies).

CELL PHONE POLICY (STUDENTS)

Students may only use their cell phone before school, during the noon hour, after school, and in the residential / dorm setting. Students may choose to leave their cell phones in the dorm office during the school day.

Student use of cell phones during the school day during scheduled class time (8:00 AM - 3:00 PM) is not permitted during class, study hall, or other activities in the classroom setting. Student phones are to be in either "vibrate" or "off" mode.

Students may choose to have their cell phones with them during independent travel in the community, including at work / off campus work experiences, but do so at their responsibility, including for proper use, and in recognition of work place / usage policies.

Should improper use occur, when requested to do so, the students will give their phone to the teacher in class for pick up at the end of the school day. A second violation for improper use in this setting will result in the student picking up their cell phone from the Principal at the end of the school day. A third violation for improper use will result in loss of cell phone privileges.

Student use of cell phones in the dorm setting is subject to their earned Level System privileges, and any other individual student programs or guidelines in place.

To prevent loss or theft of their phones, as well as keeping the focus on the activity at hand, students are requested to leave their personal cell phones at the SDSBVI while traveling on an extracurricular activity or event (forensics, goalball, swimming, track, Special Olympics) off campus. Student access to phone or other modes of communication may be arranged for with their coach or activity supervisor.

OFF-CAMPUS ACTIVITIES, GUIDELINES FOR STUDENTS ATTENDING

Parental permission (either in writing or on the telephone with two witnesses) must be obtained before a child can attend any activity not sponsored by SDSBVI, including church. Specific parental notation should address worship services and organized youth groups. This permission can be provided for routine attendance, at the beginning of the year, but permission must be gotten for each situation that is not routine; i.e. swimming, skiing, etc. Any requests must be discussed with Dormitory Supervisor or Student Services Director prior to contact being made with parents.

Guidelines for youth-group attendance:

- Age appropriate activities are necessary – younger students may attend with older ones only if the activities are so designed.
- If an activity is planned somewhere other than in the church, the dorm staff need to be notified the week prior to the planned activity so parental permission may be obtained.

Involvement in activities must follow established SDSBVI safety policies, including:

- Students must always wear seatbelts in vehicles.
- Students need to come back to school immediately following the activity, unless prior arrangements have been made with staff.
- If the student travels with a cane, s/he must always use it when off-campus.

INDEPENDENT LIVING EXPERIENCES -- THE APARTMENT

During the school year, selected SDSBVI students will be provided the opportunity for experience in independent living. This experience will be designed to meet the needs of the individual student. The student will live in the apartment in either Herseth Hall or Spicer Hall, and will be responsible for his/her own meals, laundry, housekeeping, etc. based on his/her abilities. This will allow the student to gain firsthand knowledge of the skills they will need in maintaining their own homes after leaving SDSBVI.

APARTMENT RULES - Students will abide by the rules of the apartment when they are having their independent living experience or the stipulations of their specific behavior programs. The dormitory Supervisor is designated as the staff member that will provide supervision and support to each student in the apartment.

GENERAL RULES FOR APARTMENT LIVING -- These are the general rules and will be amended as the need arises. Students whose abilities and maturity levels prohibit full-time residence in the apartment will have restrictions specifically designed to meet their needs.

1. Outside visitors and SDSBVI students must be out of the apartment by 9:00 PM Sunday thru Thursday and 10:00 PM on Friday and Saturday.
2. Students too young to be going off-campus without supervision will not be allowed to go into the apartment as it is considered an off-campus area, unless approved by the Dorm Supervisor.
3. The student living in the apartment will set his/her own bedtime and rising time. The student will be responsible for allowing time to study and must see that he/she is to school on time.
4. The student living in the apartment may stay out until 10:00 PM on school nights and as late as 12:00 Midnight on Friday and Saturday nights. The student must inform the Case Manager on duty when he/she will be back so that provisions can be made to let them back into the building.
5. The apartment student may "visit in the dorm until 9:00 PM Sunday thru Thursday and until 10:00 PM Friday and Saturday.
6. The Dorm Supervisor will set-up designated observation periods to determine the student's progress, strengths and weaknesses.
7. Students will prepare a shopping list in accordance with their budget and will be accompanied by the Dorm Supervisor and will purchase grocery items needed to prepare their weekly meals. They will receive a \$35 weekly allotment.
8. Students living in the apartment will move in with everything needed for their stay, as they are not to return to their dorm room until the end of the evaluation period.
9. SDSBVI staff will not provide transportation to the apartment student unless it is for a school function or in the case of an unusual circumstance.
10. The apartment student may have an overnight visitor providing they inform the Dorm Supervisor one day in advance of their intention to have an overnight guest.
11. Whenever leaving the apartment, the student will close and lock the door. Treat the apartment as if it is your home.

12. The apartment student will schedule use of the laundry facilities in the dorm with the Case Manager on-duty.
13. Dormitory rules in regard to lighted candles, smoking, drug or alcohol use on campus DO apply to the apartment student.
14. The apartment student may have guests for meals providing they inform the Dorm Supervisor of their plans.
15. Male/female visitors will be permitted in the Herse and Spicer apartment providing the door in the apartment is left open during the visit. The bedroom and bathroom areas are off-limits to guests of the opposite sex.
16. Apartment living students will eat their lunch meals in the school dining room. One meal "out" per week is allowed.
17. There will be no visiting in the apartment by dorm students before school hours. The same goes for the apartment student in the dorm.

**All of the above mentioned rules will be adapted to fit the individual student in regard to his/her maximum independent functioning level.

DINING ROOM GUIDELINES (revised May 2009)

- Each child will be served the federally mandated portions (3 oz.) of three basic foods.
- When possible, there will be choices available within the food groups (i.e. raw or cooked vegetables). If the person helping the student gets his/her plate knows the preference, please tell the kitchen staff. Also, the adults should try not to "bias" the kid's choices based on personal likes/dislikes.
- The students should be encouraged to try (at least one bite) of each item on the plate.
- In order to receive a sweet dessert (cake, cookies, bars, pudding, ice cream) the student needs to eat $\frac{3}{4}$ of what's on the plate. Fresh fruit, canned fruit, Jell-O and applesauce can be provided any time; even if the main course wasn't finished.
- No "seconds" on sweet desserts will be provided.
- Liquid intake should be monitored to make sure the student is not going to drink so much that s/he will not "have room" for the meal.
- The evening snack guidelines are the same as those for dessert. If supper isn't eaten, the student will still be offered an evening snack of fruits or vegetables.
- Access to both the candy/snack and pop machines is available to the students after school until 4:00 PM and from 7:00 – 9:00 PM. On weekends, the hours run from 1:00 p.m. – 4:00 p.m. and 7:00 p.m. — 9:00 p.m.
- Whole or skim milk will be on the table for those students identified in eating programs; otherwise, all milk is 1 percent.
- If not on the tables, bread is available at the serving counter.
- No pop is allowed in the dining room.
- Students should be encouraged to drink water with each meal and frequently throughout the day, particularly in warm weather or when exercising.

FEEDING PROGRAMS

All SDSBVI students will have a feeding skills evaluation completed at the time of their placement. This evaluation will be done by the Dormitories Supervisor when the student is an independent eater and who is using no adaptive equipment. When there are chewing/swallowing concerns or issues related to positioning or adaptive equipment, the evaluation will be conducted by the Speech/Language Pathologist with consultation from the Dormitories Supervisor and the Occupational Therapist as needed. Any modifications to diet textures, adaptive equipment, assistance and set-up at meals will be determined as a result of the evaluation.

All permanent and temporary dorm staff, teaching staff and instructional assistants will be trained on general dining skills related to visual impairment at the time of hire. All permanent and temporary dorm staff, teaching staff and instructional assistants will be trained on specific feeding procedures for individual students who need them by the Speech/Language Pathologist on an ongoing basis. No staff will assist in feeding students without training. The Director of Human Resources has the list of employees who have gone through the training.

The feeding procedures for students who require assistance and adaptive equipment will be posted in the dining room. Any concerns related to feeding procedures will be referred to the Dormitories Supervisor or Speech/Language Pathologist for reevaluation. Any concerns related to nutrition and hydration or weight will be referred to nursing.

Any recommended changes in either feeding procedure and adaptive equipment or hydration and nutritional intake make by parents or health professionals should be reported to the Nurses and the Speech Language Pathologist and documented in writing.

CRISIS INTERVENTION POLICY

THE GOAL DURING A CRISIS SITUATION IS TO INSURE THE CARE, WELFARE, SAFETY, AND SECURITY FOR ALL INVOLVED.

To minimize the probability of a crisis resulting from student behavior, always be aware of the apparent anxiety and stress level. If a child appears anxious or agitated, be supportive. Remember to be aware of your body space and communicative responses (both verbal and nonverbal). Empathic, nonjudgmental listening is very important. Remember – this is a shared experience and how one person acts/reacts affects how the other person acts!

If the anxiety continues to increase and the child becomes defensive, calmly be directive and set limits that are clear, reasonable, and enforceable. Offer the student two behavior choices -one the desired action and the other the consequence of noncompliance. Discipline is always the most effective when the responses/consequence are given directly by the adult involved rather than bringing in a third party, such as the Principal or Dorm Supervisor.

If the agitation continues, allow the student to “release steam” so the tension can be reduced, even if this means swearing or yelling. Do not try to move an upset student! If you think the student is not going to calm down and there is a risk of danger, remove all other students from the area – either to the hallway or a nearby room. If a personal threat is made to you or others, take it seriously.

If the student's agitation continues to escalate and there is a clear danger to people, get help immediately with either the intercom system or by yelling down the hall. Any physical intervention is potentially dangerous and should be considered as an emergency response procedure.

The only acceptable form of physical restraint is the techniques taught through the Nonviolent Crisis Intervention Training Program. If other techniques are used, there is the possibility of disciplinary action against the employee.

After the student and staff members have calmed down and the tension has been reduced, it is important that all people involved re-establish rapport and communication. As much as possible, the situation and possible other actions should be discussed. Any consequences from the limit setting should also be implemented during postvention. The staff member's immediate supervisor and the school counselor will also be involved, as needed.

Before leaving work, the Behavior Report form needs to be completed and if there was an injury, so does the Injury, Accident, or Unsafe Condition form.

Remember, using common sense and remaining emotionally detached may keep an incident from turning into a crisis!

BEHAVIOR INTERVENTION POLICY

The SDSBVI's Behavior Intervention Policy is based on the educational principles required to help children become civically responsible and socially competent. Positive behavioral techniques will be utilized as much as possible, with the emphasis being on natural and logical consequences that are aimed at developing personal responsibility.

If maladaptive or harmful behaviors do not decrease through the use of positive intervention techniques, the use of more restrictive methods may become necessary. At all times, however, the student's personal rights will be protected, as outlined in the American School Counselors Association (ASCA) Standards and South Dakota Codified Laws #27B-8-50 through #27B-8-55.

- I. GENERAL GUIDELINES** - When staff members attempt to manage maladaptive behaviors, they will:
- A. Utilize techniques outlined in the Non-violent Crisis Intervention training to provide the best care, welfare, safety, and security for the students and staff members.
 - B. Use techniques which represent the least restrictive but most effective alternatives.
 - C. Assure the protection of the rights of the student(s) involved.
 - D. Include proactive rather than reactive reinforcement techniques.
 - E. Under **no** circumstances, use corporal punishment, i.e. striking or spanking a child.
 - F. Avoid name-calling, yelling, or swearing at students.
 - G. Discontinue any behavior intervention program if the child is ill or has sustained a physical injury.
 - H. Not deny a child a meal.

II. CONDITIONS FOR USE OF BEHAVIOR INTERVENTION TECHNIQUES - Behavior management techniques will be used when a child's behaviors affect his/her ability to deal with daily life. Therefore, when restrictive programming is implemented, there must be documentation to show:

- A. There was danger to the child or others. **or**
- B. The behavior was interfering with the child's learning. **or**
- C. Immediate action was necessary to avoid a crisis situation.

III. BEHAVIOR INTERVENTION TECHNIQUES - All staff members who deal directly with students will be trained in Non-Violent Crisis Intervention. Note: The Director of Human Resources has the list of trained staff; supervisors are responsible for monitoring their department.

- A. Communication - Use both verbal intervention and para-verbal communication techniques
- B. Analysis of function of child's behavior - Utilize documentation and observations to determine the purpose of student's actions
 - 1. Case teachers & case manager complete Functional Analysis Screening
 - 2. Baseline done to identify Antecedent-Behavior-Consequences to identify behavior reinforcers:
 - a. maintained by social positive reinforcement (attention)
 - b. maintained by social negative reinforcement (escape)
 - c. maintained by automatic positive reinforcement (sensory stimulation)
 - d. maintained by automatic negative reinforcement (pain attenuation)

IV. RESTRICTIVE TECHNIQUES - These methods may not be utilized without prior approval and continued monitoring by the External Behavior Management Team.

A. PHARMACOLOGICAL THERAPY

- 1. Permission must be obtained from parents/guardians prior to scheduling doctor's appointment whenever medication is being sought because of student's emotional/behavioral concerns.
- 2. Parents/guardians can request information about using medication to deal with behavior issues and appointments with mental health professionals may be scheduled.
- 3. The Nurse and Student Services Director work together in scheduling appointments and all follow-up procedures.
- 4. The Nurse will inform the student's educational team of any unusual medication side effects of which to be aware. Staff members are encouraged to report any unusual behaviors or physiological changes to either the Nurse or Student Services Director.

B. RESTRAINT GUIDELINES

- 1. Physical restraint procedures are used so as not to cause physical injury to the child and to minimize physical and psychological discomfort.
- 2. Only the minimum amount of restraint necessary to control behavior is used and only until the child is calm.
- 3. Staff will use only the restraint and transport techniques for which they have been specifically trained.
- 4. Only employees who are certified through the Crisis Prevention Institute (NVC I) can use physical restraint.

V. DOCUMENTATION

1. Always complete the BEHAVIOR REPORT (white form) when student behavior involves self-injury, injury to others, or intentional destruction of property.
2. To qualify as "injury", the actions of student behavior must require medical attention. Superficial scratches that stop bleeding after washing with soap and water and blotting are not injuries, except in the case of specific students with special medical needs as identified by the Nurses. Scratches or cuts that require a bandage are considered injuries.
3. Write simply, clearly and concisely about direct observations only.
4. **The Behavior Report form is to be completed and distributed before leaving the present work shift.** Copies are to be given to the Case Teacher, Principal, Student Services Director and Dormitories Supervisor. The Nurses and Superintendent receive a copy only if there was an injury.
5. If an Injury resulted (as defined in #2) from student behavior, then the ACCIDENT, INCIDENT OR UNSAFE CONDITION form (yellow) must also be completed and copies given to Risk Manager, Student Services Director and Superintendent.

VI. POSTVENTION

Postvention provides the opportunity to review the behavior event that just occurred. The purpose is to establish facts, look for behavior triggers and patterns, and identify methods to increase acceptable behavior.

After the Behavior Report form is completed, the staff person directly involved is encouraged to complete the Personal Crisis Interview Review form. This form objectively addresses how the behavior event was dealt with, based on the Nonviolent Crisis Intervention components.

The day after the behavior event, the involved staff person will meet with his/her supervisor and the Student Services Director to discuss the incident. The Personal Crisis Interview Form and the Behavior Report forms are the foundation for discussion.

Also, after everyone involved in the event is calm, and if the student is able, it is recommended that the staff person and student have a discussion about what happened. Some possible suggestions so this situation doesn't rise again should also be developed.

VII. BEHAVIOR MANAGEMENT TEAMS

A. EXTERNAL BEHAVIOR MANAGEMENT TEAM

1. Members
 - a. Dormitory Supervisor
 - b. Principal
 - c. Superintendent
 - d. Student Services Director
 - e. SD Board of Regents Attorney (Ex officio)
 - f. Mental Health/Social Services Consultant
 - g. Special Education Consultant
2. Committee meets every other month or as circumstances warrant
3. Agenda and Minutes are developed by the Student Services Director
4. Review all documentation and behavior intervention programs that have been implemented
5. Suggest any modifications for present programs

B. INTERNAL BEHAVIORAL TEAMS

1. Each child will have an individual committee that meets when behavior problems are being exhibited. The Case Manager and/or Case Teacher should notify his/her supervisor, who will then determine if action is necessary. If so, the Dormitories Supervisor or Principal schedules a behavioral staffing.
2. Members
 - a. Case Teacher
 - b. Case Manager
 - c. Principal
 - d. Dormitories Supervisor
 - e. Student Services Director
 - f. Nurse
 - g. Any additional people who work directly with the student(s) and may have pertinent information.
3. The first Internal Team Meeting
 - a. At first meeting all information is reviewed, including observed behaviors, personal strengths, weaknesses and motivators are discussed.
 - b. Target behaviors are identified
 - c. A time frame is established for the collection of basal information about target behaviors.
 - d. Another meeting is then scheduled for the end of the basal period to review data.
4. The second Internal Team Meeting
 - a. Based on documentation, specific behavior management procedures are devised.
 - b. The behavior intervention program is written
 - c. A time frame for periodic review and possible program alterations is developed

VIII. LEVELS SYSTEM/RESIDENTIAL PROGRAM - This is an individualized program which allows privileges to be earned through responsible behavior. The Levels System encourages a child to earn the level of freedom that s/he can successfully manage and is designed to be a concrete, unbiased part of the dormitory structure.

- A. Individual participation will be determined and outlined by the following people: Dormitories Supervisor, Student Services Director, student, and Case Manager. Individual responsibilities will be determined and explained to the student at the beginning of the year. The student's team will then meet at least once every month to review progress and possibly make program revisions.
- B. The program starts at the beginning of each school year and each student's progress will be reviewed at semester time. The team will then determine if the student can be dismissed from the program.
- C. Each student will begin on Level IV. The student's team will determine whether s/he will be allowed all of the privileges of Level IV. The decision will be based on individual strengths, needs, age, maturity, and independence.
- D. Students will remain on each level for a minimum of 10 days. Only days the student is actually at school can be counted in the 10-day time period, including the weekends. The student may request to move up a level after a successful 10-day period.

- E. The student must be given a specific verbal warning that the behavior(s) engaged in are not acceptable. On a second occurrence, a written reminder may be given. Another verbal warning must be given at the beginning of each ten day period, for every offense, even if no written reminder had previously been issued.
- F. **It is advisable to think through and discuss a situation with the student prior to writing a reminder. Be sure you have all of the information and understand the situation from the student's viewpoint, as well as the adult's.**
- G. The student is allowed to receive one written reminder within a 10-day period. A second written reminder for the same offense indicates the inability of the student to meet the requirements of that level and so s/he is demoted to the next lower level. A second verbal warning will not be given for the same offense when two written reminders have previously been given within a ten-day period.
- H. After the 10-day period for mandatory demotion has ended, the student may return to the level s/he was on prior to being demoted, unless it was an "instant demotion" to Level I. If this is the case, the student must work back up through each level.
- I. If a student fails on Level I, (gets 2 written reminders) s/he will be restricted to his/her room for up to 5 hours or perform community service work of 1 hour each day for 5 days. The Dormitory Supervisor will determine the type and length of discipline, with input from others on the student's team. If the offense occurs during the weekend, the student will lose all privileges and must be within view of the dorm staff during all activities. The student may be referred for individual counseling as well.
- J. Instant Demotion: A student may be demoted to Level I for committing any of the following misbehaviors, but only after consulting with the Dormitories Supervisor and/or Student Services Director. If neither of these people can be reached, the student will be restricted from all scheduled activities until contact can be made.
 - 1. physical injury to self or others
 - 2. verbally or physically threatening behavior
 - 3. use of drugs, alcohol, inhalants and tobacco
 - 4. intimate sexual contact with another student
 - 5. destruction of school property
 - 6. taking other's possessions without their permission
- K. Students who achieve Level III or IV can abide by the rules of the apartment during their independent living experience. Those on Level I or II will be held to the restriction of those levels, including community service and room restrictions.
- L. Staff are expected to write reminders during the shift in which the incident occurred. This will encourage discipline rather than punishment. Copies of the reminder will be given to the student, his/her Case Manager, Case Teacher, Dormitories Supervisor, Student Services Director and Principal.

- M. Students are able to petition up any time they have not received two written reminders in a 10-day period. Students, with the assistance of the Case Manager, need to monitor the time frame for getting the petitions signed. The form allowing the move to be made to a higher level should be signed by the Case Manager, but if this person is not scheduled to work, then the Dormitories Supervisor can sign it. If the decision is made that the student is not ready to move up, the Case Manager needs to notify both the Dormitories Supervisor and the Student Services Director, in writing, why this decision was made.
- N. If a student feels s/he has not been treated fairly, a Grievance Committee meeting will be arranged within 3 days of receiving the discipline. In addition to the student, person who wrote the reminder, and any witnesses of the incident, two of the following people will be included in the Grievance Committee: the Case Manager, Student Services Director, Dormitory Supervisor, and/or Principal. It is the student's responsibility to arrange the meeting with the committee members, with assistance from the Dormitory Supervisor. The committee will determine if the discipline was appropriate and act accordingly.

IX. PRIVILEGES AND RESPONSIBILITIES OF LEVELS - All students are expected to meet the following responsibilities, as determined by student, Case manager, Dormitory Supervisor, and Student Services Director, to the best of their personal ability. In addition to the following, individual responsibilities will be added as the student attains more privileges:

- A. Consistently bring all necessary materials to school and then back to dorm.
- B. Independently dress and groom themselves, to the best of their abilities.
- C. Keep room orderly, neat and clean.
- D. Demonstrate respectful behavior towards self and others.

LEVEL IV - PRIVILEGES

- A. Student sets own study time. If a time other than the normal study time is chosen, the student is expected to stay away from the other students whom are in study hall. The student can leave campus with permission from the Case Manager/Houseparent on duty.
- B. Students must be in their own rooms by 11:00 p.m. with a bedtime of 12:00 a.m. Sunday through Thursday. Unless otherwise determined by parent/guardian. On weekends 2:00 a.m. will be the time to be in bed, unless special permission is given by the Dormitories Supervisor to stay up later.
- C. Off-campus privileges as permitted by parents, O & M Specialists and team members. Any unusual circumstances need to be approved, in advance, by the Dormitories Supervisor. Students need to list activity/destination, time leaving and returning. If the team determines the student is responsible enough, the student's activity plan may allow for some unsupervised time to be spent in the dorm.

LEVEL III - PRIVILEGES

- A. Study Hall between 6:00 and 7:00pm. "Entertainment equipment" may be on but should not be loud enough to be heard outside of student's dorm room.
- B. Off-campus privileges on Friday, Saturday and Sunday, as visiting hours and orientation and mobility passes permit.
- C. Students must be in their rooms by 10:30 p.m., with a bedtime of 11:00 pm Sunday through Thursday. On weekends 1:00 a.m. will be bedtime, unless special permission is given by the Dormitories Supervisor to stay up later.

LEVEL II - PRIVILEGES

- A. Student's door may be closed during 6:00pm study hall but no "entertainment equipment" may be on.
- B. Student may go off-campus on Saturday and Sunday and participate in group off-campus activities.
- C. Students must be in their dorm rooms by 10:00 p.m. with a bedtime of 10:30 p.m. Sunday through Thursday. On weekends 11:00 p.m. will be the time to go to bed, unless special permission is given by the Dormitories Supervisor to stay up later.

LEVEL I - PRIVILEGES

- A. During study hall, the bedroom door must remain open and no "entertainment equipment" may be on.
- B. Student may participate in the activities approved by the committee.
- C. Student may spend unstructured time in individual dorm area.
- D. Bedtime is 9:30 p.m. on Sunday through Thursday and 10:00 p.m. on weekends.

BEHAVIOR AND CONDUCT

Individual behavior programs will be developed by Case Managers, Teachers, Student Services Director, Principal and Dormitories Supervisor. Students earn privileges through responsible behavior. Students may be restricted in the amount of noneducational activities they may participate in if they do not demonstrate appropriate behavior and are given responsibilities that staff feel s/he can be successful with.

As students show themselves to be responsible, they are given more freedom in taking on responsibilities that are of interest to them or in an area where they need work. Each student's program is individually designed by a committee consisting of Case Teacher, Case Manager, Student Services Director, Dormitories Supervisor, Student and Parent/Guardian (if available.)

Parents are encouraged to be involved in their child's program by keeping in contact by phone, letters, and personal contact with the SDSBVI.

Students are expected to conduct themselves in a manner which is a credit to themselves as well as to their families and school. Student misconduct will be evaluated and an appropriate course of action (including possible notification of law enforcement personnel) determined on an individual basis by the SDSBVI.

Most misbehavior will be responded to with a warning, or as outlined in individual programs. The following behaviors merit strict discipline and an “instant demotion” if on the Levels System:

- a. Purposeful injury to self or others
- b. Purposeful destruction of property
- c. Use of drugs, alcohol, inhalants (without medical prescription), or tobacco
- d. Intimate sexual activity
- e. Stealing

SMOKING, CHEWING TOBACCO AND INHALANTS - No smoking or chewing tobacco or use of inhalants is allowed on campus by students. If tobacco products are found in the dorm, dorm room, or on the person, of a student who is under the age of 18, they will be confiscated. Any chemical misuse for the purposes of intoxication is against the law and such products will be confiscated and may lead to legal intervention.

ALCOHOL AND CONTROLLED SUBSTANCES - Alcohol and other controlled substances are not allowed on the SDSBVI campus. By Executive Order all state agencies are established drug-free workplaces and prohibit the unlawful manufacture, distribution, dispensation, possession or use of any controlled substance.

The South Dakota Board of Regents strictly prohibits the unlawful possession, use or distribution of alcohol, marijuana or controlled substances by its students or employees while on property controlled by the Board of Regents or while participating in any capacity in activities or employments sponsored by it. All state laws related to controlled substances apply. Compliance with these standards of conduct is mandatory.

Any student who violates the provisions of State law and Regental policy will be subject to disciplinary action. The parent or guardian will be notified of a first offense, a conference will be held and disciplinary action(s) taken. For any subsequent offense, the provision of Student Due Process as detailed in the Administrative Rules of South Dakota Chapters 24:07:01, 24:07:02 and 24:07:03 will apply.

The South Dakota School for the Blind and Visually Impaired will also maintain age-appropriate drug and alcohol education and prevention programs for students in all grades. These drug and alcohol programs will address the legal, social and health consequences of drug and alcohol use, provide information about effective techniques for resisting peer pressure to use illicit drugs or alcohol and convey to students that the unlawful use and possession of illicit drugs and alcohol is wrong and harmful.

If parents or students desire information about alcohol and controlled substances or treatment options, please contact the Student Services Director.

BEDTIME GUIDELINES (for those not on the Levels System) - In addition to the Levels System, bedtimes are determined by the student’s success with their individual behavior program and health conditions. The following is a guideline that the staff agrees is appropriate for various ages of children, but which may vary for each student.

Primary Pupils (Grade 3 and Younger):	Sunday through Thursday:	8:30 pm
	Friday and Saturday:	9:00 pm
Intermediate Pupils (Grades 4-6):	Sunday through Thursday:	9:30 pm
	Friday and Saturday:	10:30 pm
Advanced Students (Grades 7-12):	Sunday through Thursday:	11:00 pm
	Friday and Saturday:	12:00 am

Special permission may be granted by houseparents for students to stay up later on weekends, but no later than 2:00 am.

FUNDS (STUDENT)

It is our responsibility to safeguard student assets and maintain appropriate records. The following procedures will benefit both students and staff by ensuring we properly account for and manage student funds. It is important to note the school will not assume responsibility for cash given directly to students by parents/guardians. Students may have managed funds in several locations in the school. The locations and circumstances are as follows:

LOCATION

1. **Business Office:** Individual student accounts are set up by parent/ guardian. Funds are received for the student and deposited in an account maintained by the Business Manager. This account should cover the student's personal needs and allowances. Parents establish the amount to be dispensed for allowances. The Business Manager provides quarterly accounting of these funds to the parents.
2. **Business Office:** Individual account under the direction of a classroom teacher with monies earned through work-study. Each student has an individual envelope (which is kept in the safe) and is learning to manage his/her own money.
3. **Dormitory:** For students who are not able to independently handle their own allowance monies or paychecks, individual envelopes are kept in a locked closet in the Case Managers' office. This allows for daily access to funds for activities, treats and other needs.

PROCESS

1. No one except the Business Office may receive cash from any student or parent. When a parent or guardian wishes to put money into their account, they should be directed to the Business Office so they can get a receipt. If the Business Office is not open, the parent/guardian may write a check made out to the SDSBVI. The check should be placed in an envelope marked with the student's name and put into Director of Human Resources' mailbox for deposit and receipt.

2. When allowances are given out, students may spend or save the money as they choose. Students are responsible for their own funds. In the case of students who require assistance with managing their allowance, the money will be kept in the dorm as indicated above. No funds over \$20 should be kept in any student's dorm envelope. If the money is not spent, allowances should be temporarily suspended. Dorm personnel will record in the student binders and on the individual envelope money that is spent. This will provide an audit trail should there be a question.

MEDICAL CARE

Twenty-four hour medical care is available either by a Nurse on duty or one "on call". During the day, if the Nurse must leave campus, the location and time of departure and expected return time (and phone number, too, if available) will be noted on the board in the Infirmary. The Nurse will also call the front office personnel so she can be "checked-out".

MEDICAL PROCEDURES FOR SDSBVI STUDENTS

SDSBVI provides the services of a licensed Registered Nurse who is responsible for the coordination of any necessary medical services, including those provided in the community.

All medications that come to the school for the nurses to administer **MUST BE** in a labeled pill bottle. The label **MUST BE** current and accurate for dosages. Medications given to the nurses outside of such bottles will not be accepted.

Phone calls to the school regarding a student's health, wellness related to an illness, etc. need to be first referred to the nursing staff for a parental follow up or contact before making arrangements with other staff members. It is the nursing staff's responsibility to contact the classroom teacher/case teacher, case manager, and other team members as appropriate. This will provide our staff accurate and timely communication from a single source.

The Nurse is responsible for the inclusion of the student's health record as part of the cumulative records, with cross references made to areas of both vision and health. The student's cumulative files contain only immunization records and all other medical information is kept in the Infirmary. If a student leaves SDSBVI, his/her medical records are removed from the Infirmary and placed in the former student files.

The SDSBVI Nurses address health care needs of students who are enrolled, including those having the following needs:

1. administration of medication
2. performance of specialized health care procedures
3. use of health care devices that compensate for the loss of a body function
4. routine or emergency health care procedures, including First Aid
5. special nutritional needs, i.e. weight control

Medical treatment, including dispensation of medications, may be performed by SDSBVI staff members who have passed the Medication Administration Training for Non-Nursing Staff course. All medical procedures will be supervised by the Registered Nurses and the following ethics need to guide all decision making.

1. Above all, do no harm.
2. Always promote good, prevent harm and remove harm.
3. Follow the laws and rules of the Federal/State government related to medication administration.
4. Follow all policies and procedures required by the SDSBVI.
5. Protect the confidentiality of the student by never disclosing information about an individual without permission.
6. Tell the truth and do not deceive others.

MEDICAL ASSESSMENTS

As part of the Admissions and Individual Educational Plan teams, the Nurse's assessment may include:

1. review of school health information
2. additional data collection, as needed
3. interview of a parent or guardian
4. consultation with the primary physician
5. written summary of needed school health services
6. recommendation for the level of training and supervision of school staff designated to provide health services, both initially and ongoing throughout the school year.
7. A "Student Health Summary" is also done as part of each student's multidisciplinary evaluation.
8. any necessary information for Medicaid

If the health assessment determines the student to be in need of special health care service, SDSBVI shall develop an individual health care plan in conjunction with the IEP or added as an addendum during the year. The health plan must include the following:

1. summary of the student's health care needs
2. the special health care needs that must be provided while at SDSBVI
3. special equipment needs, if any, and arrangements for provision, maintenance, and storage of equipment
4. a list of medications to be given and the circumstances under which the medications are to be given
5. the personnel who will provide for the special health care needs of the student during the school day and/or evening hours
6. the modifications required for the routine education program to accommodate the student's special health care needs
7. service delivery options to be used when the Registered Nurse is absent (on call)
8. the information and training needs of school personnel that are related to the special health care needs of the student
9. transportation needs and the training for transportation staff
10. verification that the procedures to be followed in medical routines and emergencies are included in doctor's orders and progress notes. This documentation is written in dormitory logs and staff are informed by the Registered Nurse.
11. The SDSBVI also strongly encourages parents to designate an Aberdeen physician and arrange for transfer of information and treatment authorization
12. A "purple card" must be provided if the student is on managed care, unless the child is exempted during the school year by the Department of Social Services.

WEEKLY INFIRMARY REPORT – The Weekly Infirmary Report is to be completed by the full-time Nurse and given to the Student Services Director the Monday following each week.

ADMITTANCE OF STUDENTS TO INFIRMARY

- A. If there is concern about the health of a student, it should be brought to the attention of the Nurse.
- B. Nursing staff complete the Weekly Infirmary Report.
- C. Symptoms that may warrant referral to the Nurse: elevated temperature, rashes, vomiting, diarrhea, upper respiratory concerns, injury, and headache.
- D. Decisions about the treatment and/or admission to the Infirmary will be made by the Nurse on duty with administrative consultation.**
- E. If after evaluation by the Nurse, it is determined a day student is not well, the Nurse will call the parents. If parents can not pick up their child, they should have a "back up person", i.e. relative or neighbor who would be available to do so. If the student can not be picked up, s/he will go to the Infirmary.
- F. Parents are to be notified by nursing staff if student's illness necessitates admittance to the Infirmary or other intervention.
- G. During the day, sick students will be evaluated by the Nurse who will decide if bedrest is appropriate. The student will either return to the classroom if the illness passes or go to the dormitory after school hours. Provisions will be made by the Student Services Director to insure adequate coverage at supper time. The Nurse will notify appropriate staff and front office personnel by email if a student is to be in the Infirmary during school hours. The Infirmary and front office personnel are to be notified by the Principal if a day student is absent.
- H. Any special medical directions or needs will be written in the dorm's log with a red pen. Verbal directions will also be given to the dorm staff by the Nurse.
- I. Caution should be observed if it is necessary to leave the Infirmary while the student is there. If for some reason the Nurse on duty must leave the building, she will make arrangements with the (a) Student Services Director, (b) Principal, (c) Superintendent (d) Dormitories Supervisor or (e) other staff to cover the Infirmary.
- J. No students are allowed to visit ill students while in the Infirmary, unless given permission by the Nurse.
- K. The Nurse on duty will make arrangements with the kitchen staff for meals for children in the Infirmary. If the student in the Infirmary is on feeding program, the student will need to be fed by a staff member who has completed the required training.
- L. If a student is admitted to the Infirmary, s/he will be required to make up any class assignments missed.
- M. If a student is admitted to the Infirmary, s/he will not be allowed to take part in jobs or evening activities if too ill to return to class.

AFTER HOURS MEDICAL CARE

Observing and reporting physical and behavioral changes of individuals is an important responsibility. All employees have current CPR and First Aid certification. Residential staff have also taken the Medication Training for Non-Nursing Staff training. That knowledge, and common sense, should be utilized whenever needed.

Instructional and Residential staff members have daily contact with the students and are in a position to notice changes. These changes are often difficult to interpret, as there may be many reasons for the same sign or symptom. **Diagnosis, interpretation, and treatment are the responsibility of the nurse. It is the teaching or residential staff member's responsibility to consistently observe and report any changes to the nurse.**

After school hours, the nurse is to be called for serious or unusual circumstances, not routine illnesses. Following are some guidelines for providing general medical care for students:

When students are experiencing medical problems during the day, the nurse is to be notified. All referrals are to be documented and emailed to the Student Services Director.

Dorm staff should treat the symptoms as directed by the nurse. General guidelines about what type of medication can or cannot be given for headaches, colds, etc. will be provided. If a child has a cold or spiked a temperature during the school day, the nurse will put a memo in the log about how to treat the illness during the evening.

Health conditions that DO NOT warrant a call to the nurse:

If there is a fever, (100 degrees+), give Tylenol or Motrin (Ibuprofen) and offer water or juice. Re-check the temperature in 1 1/2 hours and continue to offer water or juice. If the temperature has not gone down at all or has gone up, call the nurse.

If the child is vomiting, make sure NOTHING is given to eat or drink until s/he has not vomited for 2 hours. Then provide sips of clear liquids, such as 7-up, Gatorade, or popsicles. If s/he can hold that down, then try crackers and broth.

If the child has diarrhea, encourage rest and provide only clear liquids; no milk or milk products are to be given.

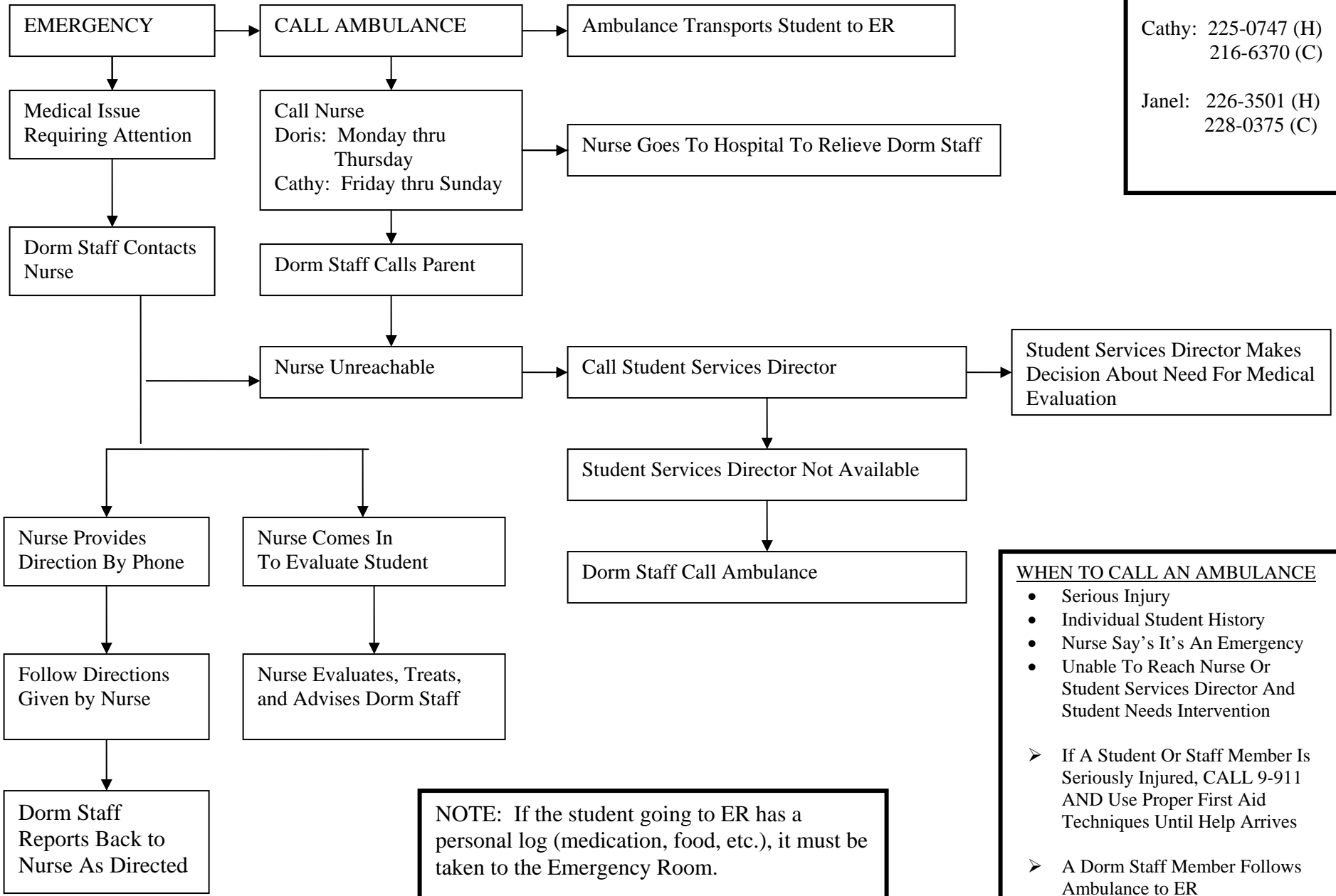
Situations in which to call the nurse:

If there is a laceration which cannot be treated and is severe enough to require stitches.

If a child suffers a head injury and loses consciousness and staff members are unable to arouse the child and/or have difficulty keeping the child aroused. If there is vomiting after the injury the nurse should also be called.

If a child with NO seizure history has a seizure, call 911 and then the Nurse. Specific guidelines are developed for each child with a medical/seizure history.

RESIDENTIAL STAFF EMERGENCY RESPONSE CHART (August 2007)



PHONE NUMBERS

Doris: 397-2343 (H)
380-2346 (C)

Cathy: 225-0747 (H)
216-6370 (C)

Janel: 226-3501 (H)
228-0375 (C)

NOTE: If the student going to ER has a personal log (medication, food, etc.), it must be taken to the Emergency Room.

WHEN TO CALL AN AMBULANCE

- Serious Injury
- Individual Student History
- Nurse Say's It's An Emergency
- Unable To Reach Nurse Or Student Services Director And Student Needs Intervention

➤ If A Student Or Staff Member Is Seriously Injured, CALL 9-911 AND Use Proper First Aid Techniques Until Help Arrives

➤ A Dorm Staff Member Follows Ambulance to ER

EYE CARE AND EYE WEAR MAINTENANCE - All faculty and dormitory staff members at the SDSBVI are expected to be knowledgeable in their day-to-day observations of each student's visual functioning.

The primary responsibility for maintaining healthy eyes and providing emergency care falls upon the Nursing Department. The Nurses monitor the medical status of each student's eye condition, provide routine care, dispense prescribed medications and seek medical attention when warranted.

The Low Vision Specialist has the primary responsibility for analyzing the educational implications of a child's visual functioning. The Low Vision Specialist assesses students, provides consultations and recommendations to the teaching staff and teaches students specific techniques to enhance visual efficiency.

To provide the best eye care possible to each student at the SDSBVI, it is essential to coordinate the functioning of these two departments and ensure the timely dissemination of information to both the faculty and dorm staff. The timely sharing of information with both faculty and dorm staff is also essential. The following guidelines are intended to accomplish that goal.

- A. **EYE REPORTS** - The timely sharing of information between the nursing and low vision departments is essential.
1. A copy of all eye reports, from ophthalmologists, other doctors, optometrists or opticians received by either department will be copied for the other. The original will be filed in the student's Master File in the Staff Work Area and a copy given to the Nurses.
 2. For "noncritical" eye reports (which do not require action by staff members), the information will be paraphrased and distributed in memo form by the person who received the report. This summary will be sent to the Principal, Case Teacher and Case Manager. These people will be responsible for sharing the information with the teachers and dorm staff
 3. For "critical" eye reports (which may have a direct effect on the student's status), a meeting with the Nurse(s), Low Vision Specialist, Principal, Case Manager, and Case Teacher should be held as quickly as possible. Additional faculty or staff members may be asked to attend also. Those in attendance are responsible for disseminating the information to the rest of the teachers and staff members.
 4. The Liaison for Services will provide copies of eye reports generated through the multidisciplinary evaluation process to the Nurses.

B. REQUEST FOR VISION FOLLOW-UP

An efficient system for reporting problems such as observed changes in visual status or broken glasses, and making referrals of a nonemergency nature will improve the efficiency of our vision care at the SDSBVI.

1. To report a problem or request service, any faculty or staff member should talk to the Nurses.
2. A brief follow-up report will be written to identify the action(s) taken. It will be distributed to the Principal, Case Teacher, Case Manager, person making initial referral and others, as appropriate. The Low Vision Specialist should be notified if it's information she needs to know.

DENTAL CARE - It is the responsibility of the parent or guardian to secure dental services and examination in the home community. Emergencies will be taken care of with the permission of the parents.

EAR CARE - Annual hearing screenings will be conducted by the Speech/Language Pathologist. If a child fails a hearing screening, a referral will be made to the Nurses.

1. The Nurse determines if medical attention is needed. If the physician determines the child should be seen by an audiologist, the Parents or Speech/Language Pathologist will set up the appointment and/or accompany him/her to the appointment.
2. If it is determined the hearing screening should be repeated, the Speech/Language Pathologist should be notified by the Nurse and the rescreening will be done in two (2) to four (4) weeks.
3. If a child fails his second screening, the Medical Referral Form will be sent to the parents for medical follow up.

Hearing aids will be monitored by the Speech/Language Pathologist as indicated on the Individual Education Plan.

GOING HOME

- A. If the doctor thinks the child needs 24 hour medical care, the recommendation may be made that the child goes home. The Student Services Director is notified of this recommendation as well as the parents who make the final decision. A student must go home if a contagious disease is diagnosed and the contagion is 24 hours or longer.
- B. If a child is sent home, notify the Dormitories Supervisor, Principal, Student Services Director and Superintendent.
- C. In the absence of a physician's recommendation, concurrence should be made between the Nurse, Student Services Director, Principal, and Dormitories Supervisor before a child is sent home.

EXTENDED ABSENCES

- A. No student can return to school who has been exposed to a communicable disease until contact is made with the Nursing Department.
- B. When the student returns, they are to report to the Infirmary to be checked by the Nurse on duty before returning to classes. A written physician's note should be provided.
- C. If truancy is suspected, the Principal, Superintendent, and Student Services Director should be notified. They will contact the parent and/or the LEA.

CONTAGIOUS DISEASES

- A. If a contagious disease is suspected, take the student into the Infirmary for an examination.
- B. If the Nurse feels it may be contagious, the student must remain in the Infirmary until the doctor's appointment.
- C. Upon confirmation of the diagnosis by the doctor, the parents will be notified, along with the Superintendent, Student Services Director, Principal, and Dormitories Supervisor. The Nurse will share specific information with necessary staff. Upon the recommendation of the doctor, the child may go home.
- D. Children at risk may also need to go home.
- E. The Nurse will report contagious disease to the Office of Disease Prevention (State Department of Health) in accordance with SDCL 34-22-12 and ARSD 44.20.

CHANGED MEDICAL STATUS

- A. The Nurse on duty is responsible for sending an e-mail to necessary staff providing the name of student and the medical change as soon as possible.
- B. This memo is to be sent via e-mail to the student's Case Teacher, Case Manager, Principal, Dormitories Supervisor, and Student Services Director.