



Prepare | Explore | Empower

The Academy Board of Directors

*Executive Work Session
Monday, April 24, 2023
5:30 – 6:55pm*

Agenda

- | | |
|---|------------|
| Charter Renewal Process | 25 Minutes |
| <i>Expectation: CSI staff will join this portion of the meeting to introduce the charter renewal process that will take place over the next 10 months and answer any initial questions.</i> | |
| Monthly Board Communications Review | 15 Minutes |
| <i>Expectation: Each month, Board members will acknowledge and discuss any community feedback or complaints that have been received since the last meeting.</i> | |
| Governance Work Plan: Board Succession Planning | 25 Minutes |
| <i>Expectation: The Board will discuss the process for filling any vacant seats at the end of the school year as well as assigning officer roles for the next school year. The Board will also consider the potential need to invite new committee members.</i> | |
| Annual Board Self-Evaluation | 20 Minutes |
| <i>Expectation: The Board will begin work on the 2023 annual self-evaluation.</i> | |



Prepare | Explore | Empower

The Academy Board of Directors

Board Meeting
Monday, April 24, 2023

7:00pm

Agenda

Consent Agenda	
Moved by	
2 nd By	
Action	

Y/N/P/A	Name
	Drewlow, S
	Klenjoski, D
	Coffee, A.
	Sanchez, K
	McDuffee, A
	Fransua, L
	Hamele, S

I. Open Meeting

The Academy's mission is to help all students grow into college ready, exemplary citizens by combining academic mastery with personal empowerment to drive lifelong success. We serve our full community by intentionally developing a school culture that embraces diversity, equity, and inclusion. With this in mind, the Board of Directors welcomes all members of our community to this meeting and invites each person to begin our time together in whatever way will help ground you for thoughtful and productive discussion - a few deep breaths, a prayer, a moment to organize your thoughts, or whatever meets your needs.

II. Consent Agenda

- a. Approve Agenda
- b. Approval of [March 27, 2023](#), minutes.
- c. Approval of [April 3, 2023](#), minutes.

III. Public Comment

The chairperson will recognize anyone who signs the request form before the meeting time. Public comment and input shall be limited to fifteen minutes total, ten minutes per topic, and 2 minutes per speaker. Neither Board members nor Academy staff is obligated to respond to comments or input. The Board will provide written responses as deemed appropriate.

IV. Reports from Directors, Principals, and Committees

- a. [Executive Director Report](#) – *Expectation: The Executive Director will update the Board on the current state of the school as well as progress toward strategic goals.*
- b. Committee Reports – *Expectation: Committee Chairs will update the board on progress with each committee.*
 - i. [Finance](#) – See Finance Report
 - ii. SACademic – No meeting this month
 - iii. [PTO](#) – See PTO Update

- V. Presentation and Discussion
 - a. [Charter Renewal Resolution](#) – *Expectation: Board members will discuss resolution language for officially beginning the charter renewal process with the Charter School Institute.*
 - b. [Administering Medications to Students Policy](#) – *Expectation: Board members will discuss a policy proposal to allow health clinic staff to administer Narcan in emergency situations.*
 - c. Work Session Summary – *Expectation: The Board Chair will summarize the topics discussed during the work session prior to this formal meeting.*

- VI. Executive Summary
 - a. [Approve Charter Renewal Resolution](#) – *Expectation: Board members will vote to approve the resolution to renew The Academy’s charter with the Charter School Institute.*
 - b. Approve [Administering Medications to Students Policy](#) – *Expectation: Board members will vote to approve a policy proposal to allow health clinic staff to administer Narcan in emergency situations.*

VII. Board Meeting Self-Scoring – *Expectation: The board will self-score their performance for the meeting according to preset criteria.*

Scoring Rubric	
1	Unsatisfactory
2	Satisfactory, looking for significant Improvement
3	Satisfactory, improving but still below expectations
4	Efficient meeting, meets expectations

 /4

VIII. Adjourn Meeting

[Return to Agenda](#)



Prepare | Explore | Empower

Board of Directors
Board Meeting Minutes
Monday, March 27, 2023

Board Members Present:

Kevin Sanchez	Chairperson
Sarah Drewlow	Vice Chairperson
Dan Klenjoski	Board Member
Autumn Coffee	Secretary
Amy McDuffee	Board Member
Larissa Fransua	Board Member
Shawn Hamele	Board Member

Also Present:

Brent Reckman	Executive Director
Mark Wilson	COO

Minutes of the regular board meeting of The Academy held at 11800 Lowell Blvd, Westminster, CO 80031 in Adams County on March 27, 2023.

I. Open Meeting

A quorum being present, Mr. Sanchez called the meeting to order at 7:00 pm

II. Consent Agenda

Mrs. Drewlow moved to approve the February 27, 2023, minutes. Seconded by Mr. Klenjoski.

Discussion: None

Ayes: Sanchez, Coffee, McDuffee, Fransua, Hamele

Nays: None

III. Public Comment

a. There was no public comment this month.

IV. Reports from Directors, Principals, and Committees

a. Executive Director Report

- i. Strategic Initiatives – Next week we begin our CMAS testing; PSAT and SAT will be the week following. We are making a concerted effort to explain to students and parents about what these tests are and why they matter. We are doing a lot within the school on the test days to allow the students to have fun and recognize the importance of the tests.
- ii. Futures Committee – Due to spring break and other events happening, we haven't moved forward with anything quite yet.

- b. Finance Report – The month of March has been steady; we will start moving toward end-of-the-year projections and prioritize year-end purchasing in April.
 - i. After Care – we are working on some staffing shortages for the summer, which could affect enrollment and revenue.
 - ii. The legislation has not moved much. The equalization fund, which started at 10M and dropped to 5M, is now at 7.5M.
 - iii. Fundraising – we raised just over 85K in profit from our Boosterthon. We have already signed on to host the event again next year. The money this year will go toward classroom technology.
 - c. SACademic Committee – This was our final meeting of the year. The goal was to confirm the committee’s information for the administration of the UIP (Unified Improvement Plan). We are focusing on three areas: 1) student performance for students participating in READ plans; 2) elementary math; 3) secondary math.
 - d. PTO – No meeting this month
- V. Presentation and Discussion
- i. Executive Session – The discussion on personnel matters was postponed to a special meeting on Monday, April 2, 2023.
- VI. Adjourn Meeting
- Mr. Sanchez adjourned the meeting at 7:19 pm.

[Return to Agenda](#)



Prepare | Explore | Empower

Board of Directors
Board Meeting Minutes
Monday, April 3, 2023

Board Members Present:

Kevin Sanchez	Chairperson
Sarah Drewlow	Vice Chairperson
Dan Klenjoski	Board Member
Autumn Coffee	Secretary
Amy McDuffee	Board Member
Larissa Fransua	Board Member

Also Present:

Brent Reckman	Executive Director
Mark Wilson	COO

Minutes of the regular board meeting of The Academy held at 11800 Lowell Blvd, Westminster, CO 80031 in Adams County on April 3, 2023.

I. Open Meeting

A quorum being present, Mr. Sanchez called the meeting to order at 5:33 pm

II. Public Comment

a. There was no public comment this month.

III. Presentation and Discussion

a. Executive Session – C.R.S. §24-6-402(4)(f): Personnel matters – Executive Director annual evaluation.

b. Mr. Sanchez made a motion for the board to enter an Executive Session at 5:34. At this time, Mr. Reckman and Miss Wagar left the call. Sarah Drewlow seconded the motion and it passed.

Discussion: None

Ayes: Mrs. Coffee, Mrs. Fransua, Mr. Klenjoski, Mrs. McDuffee

Nays: None

c. Mr. Sanchez made a motion for the board to end the Executive Session at 6:22. Mrs. Drewlow seconded the motion, and it was passed.

Discussion: None

Ayes: Mrs. Coffee, Mrs. Fransua, Mr. Klenjoski, Mrs. McDuffee

Nays: None

IV. Executive Summary

- a. Mrs. Drewlow made a motion to approve the discussion from the executive session as presented. Mrs. McDuffee seconded the motion, and it was passed.

Discussion: None

Ayes: Mrs. Coffee, Mrs. Fransua, Mr. Klenjoski, Mr. Sanchez

Nays: None

- V. Mr. Sanchez adjourned the meeting at 6:25.

[Return to Agenda](#)

DRAFT



Prepare | Explore | Empower

Executive Director Board Report – April 2023 Meeting

Strategic Initiatives Update

Expectation: Share information about ongoing implementation of initiatives in support of The Academy's 5-year Strategic Plan.

Principals presented their 2022-23 Annual Work Plans to the Board at the July Retreat. The Board finalized the 2022-23 Bi-Annual Scorecard at the August meeting. Principals then presented on their beginning-of-year data at the October Special Meeting. We wrapped up mid-year data collection in early February. Principals then presented on mid-year progress to both the SACademic Committee and the Board in their February meetings. CMAS, PSAT, and SAT testing is now complete. We saw a significant increase in student participation and engagement this year following some intentional efforts in this direction. Middle School out-outs, for example, dropped from over 100 to fewer than 30. We will complete year-end data collection in early May and be prepared to share results with the Board at the June meeting.

Futures Committee Update

Expectation: Share information about ongoing implementation development of a Facilities Master Plan.

In November, we formalized our partnership with JHL Constructors to support the completion of our Facilities Master Plan. In February, the JHL team completed a site evaluation along with pricing exercises to contribute to a more detailed final draft of the Master Plan. Academy admin finished reviewing this new information and submitted another round of feedback to our design partner, HCM, in mid-April. We expect HCM to be able to produce a final draft of the Master Plan soon and hope to share it with the Futures Committee before the end of the school year.

[Return to Agenda](#)



Prepare | Explore | Empower

Finance & Operations Board Report, April 2023

Members Present: Dan Klenjoski, Shawn Hamele, Andrea Foust, Mark Wilson, Brent Reckman.

Introduction (5 minutes)

Expectation: Review agenda and norms as needed. Share any relevant resources for committee to review.

No new resources shared this month.

League's draft Legislative Agenda: [CLICK HERE](#)

First Education Bills: [CLICK HERE](#)

Legislative Overview: [CLICK HERE](#)

Financial Report Review (25 minutes)

Expectation: Financial report sent out in advance. Review and discuss current position in relation to modified budget. Review status of 23/24 budget scenarios.

		Budgeted Student Enrollment = 1850		Current Year - FY2023		
Acct	Account	March	FY 2023 YTD	FY2023 Approved Amended Budget	YTD % of Budget	FY2023 Expected End of Year
Revenue						
1500	Earnings on Investments	15,691.54	88,429.44	\$80,000.00	110.5%	\$80,000.00
1600	Food Services	42,739.42	334,866.61	\$375,000.00	89.3%	\$375,000.00
1700	Pupil Activities	22,504.77	534,248.12	\$650,000.00	82.2%	\$650,000.00
1800	Community Services Activities	88,761.08	722,542.13	\$738,400.00	97.9%	\$738,400.00
1900	Other Local Sources	144,587.12	404,849.86	\$275,000.00	147.2%	\$275,000.00
3000	Revenue from State Sources	109,690.68	500,388.83	\$699,575.49	71.5%	\$699,575.49
3100	Categorical Revenue	0.00	324,976.07	\$576,076.28	56.4%	\$576,076.28
3200	Adjustments to Categorical Revenue	0.00	0.00	\$2,968.00	0.0%	\$2,968.00
3900	Other Revenue From State Sources	252,162.44	1,928,494.43	\$2,605,216.83	74.0%	\$2,605,216.83
5200	Interfund Transfers	0.00	400.00	\$400.00	0.0%	\$400.00
5600	Direct Allocations	1,390,902.87	12,897,640.62	\$17,311,400.65	74.5%	\$17,311,400.65
11	Total Revenue	\$2,067,039.92	\$17,736,836.11	\$23,314,037.25	76.1%	\$23,314,037.25
Expenditure Summary						
		March	FY 2023 YTD	FY2023 Approved Amended Budget	YTD % of Budget	FY2023 Expected End of Year
0100	Total Salaries	876,301.39	6,907,907.39	10,796,843.98	64.0%	10,796,843.98
0200	Total Benefits	312,934.45	2,498,380.88	4,306,101.44	58.0%	4,306,101.44
0300-0500	Total Purchased Svcs	519,864.82	3,662,765.37	5,111,532.72	71.7%	5,111,532.72
0600	Total Supplies	79,458.86	1,281,408.47	2,238,503.66	57.2%	2,238,503.66
0700	Total Property	0.00	226,595.75	695,073.00	32.6%	695,073.00
0800	Total Fees/Pupil Activities	36,046.98	511,690.04	765,982.45	66.8%	765,982.45
0900	Total Other Uses	0.00	0.00	\$0.00	0.0%	\$0.00
	Total Expenditures	\$1,824,606.50	\$15,088,747.90	\$23,914,037.25	63.1%	\$23,914,037.25
	Total Expenditures	\$1,824,606.50	\$15,088,747.90	\$23,914,037.25	63.1%	\$23,914,037.25
	Salary Accrual Adj.		\$725,250.00			
	Net Profit (loss)	\$242,433.42	\$1,922,838.21	-\$600,000.00		-\$600,000.00
	Board Approved Beg. Fund Balance Use			\$600,000.00		\$600,000.00
	Budgeted Margin			\$0.00		\$0.00
	Beginning Fund Balance			\$8,074,321.15		\$8,074,321.15
	Est. Ending Fund Balance			\$7,474,321.15		\$7,474,321.15

Report sent out in advance. It was noted that:

- Investments remain strong with some potential restructuring of Sunflower Bank accounts
- Aftercare projections are to be monitored and adjusted as we move into next year re. staffing
- Boosterthon revenue and expense lines landed this month
- Further supply chain assistance grant reimbursed @ 37K
- FRCC remains on budget

Legislative Updates (10 minutes)

Expectation: COO to update committee on status of legislative session and potential impacts e.g. PPR, MLE.

Updates on the budget are as follows:

- Additional 3M requested for MLE fund (10M total)
- Takes MLE fund from 17M to 27M (approx. \$597 pp, 1.1M↑) **Current approval is at 7.5M**
- ~9% PPR increase proposed (approx. \$846 pp, 1.56M↑) **Holding firm, currently**

	AMENDED - JAN 22/23	8% PPR Increase 1845 Enrollment 33% MLE request	8% PPR Increase 1845 Enrollment 66% MLE request	8% PPR Increase 1845 Enrollment 100% MLE request
	1,850	1,845	1,845	1,845
	9,487.74	10,347.76	10,347.76	10,347.76
	848.00	1,048.00	1,248.00	1,448.00
1500	80,000.00	80,000.00	80,000.00	80,000.00
1600	375,000.00	375,000.00	375,000.00	375,000.00
1700	650,000.00	650,000.00	650,000.00	650,000.00
1800	738,400.00	906,000.00	906,000.00	906,000.00
1900	275,000.00	275,000.00	275,000.00	275,000.00
3900	22,597.76	22,597.76	22,597.76	22,597.76
3900	6,319.74	6,319.74	6,319.74	6,319.74
3900	670,657.99	557,940.00	557,940.00	557,940.00
3000	0	0	0	0
3900	252,234.00	252,234.00	252,234.00	252,234.00
3900	29,417.76	29,417.76	29,417.76	29,417.76
3900	93,325.04	138,325.04	138,325.04	138,325.04
3200	2,968.00	2,968.00	2,968.00	2,968.00
3900	1,569,143.23	1,933,560.00	2,302,560.00	2,671,560.00
3900	395,887.48	395,887.48	395,887.48	395,887.48
3900	34,946.52	34,946.52	34,946.52	34,946.52
3900	231,520.10	231,520.10	231,520.10	231,520.10
3000	200,295.48	200,295.48	200,295.48	200,295.48
3000	48,302.00	0.00	0.00	0.00
4000	0.00	0.00	0.00	0.00
4000	0.00	97,868.00	97,868.00	97,868.00
4000	38,091.02	0.00	0.00	0.00
4000	0.00	0.00	0.00	0.00
4000	87,031.00	0.00	0.00	0.00
4000	159,523.86	0.00	0.00	0.00
4954	41,575.62	0.00	0.00	0.00
5200	400	0	0	0
5600	240,918.35	240,918.35	240,918.35	240,918.35
5600	17,070,482.30	18,609,780.50	18,609,780.50	18,609,780.50
11	23,314,037.25	25,040,578.73	25,409,578.73	25,778,578.73
0100	10,796,843.98	11,559,725.32	11,559,725.32	11,559,725.32
0200	4,306,101.44	4,623,645.92	4,623,645.92	4,623,645.92
0300-0700	8,045,109.38	8,170,419.14	8,170,419.14	8,170,419.14
0800	765,982.45	650,000.00	650,000.00	650,000.00
	23,914,037.25	25,003,790.39	25,003,790.39	25,003,790.39
	-600,000.00	36,788.34	405,788.34	774,788.34
	100,000.00	200,000.00	200,000.00	200,000.00
	-500,000.00	236,788.34	605,788.34	974,788.34

Fundraising Update (5 minutes)

Expectation: COO to inform committee of elementary fundraising update.

Tech demos and trials taken place with Promethean. Communication sent to the community to update. Elementary boards ordered with quotes in to support secondary in the near future. Anticipated to be set up and ready for start of 23/24 year.

Charter Renewal Overview (5 minutes)

Financial Submission Requirements

3-year Financial Forecast

- Schools must submit a three-year financial forecast. This must include the next fiscal year plus the next three years.

Schools may submit the financial forecast using an expanded version of the [CDE Uniform Budget Summary](#) or the [CSI Renewal Budget Template](#). *The next fiscal year budget should be identical to the budget submitted to CSI as a part of the annual budget submission process.*

Financial Policies and Procedures

- Schools must submit a copy of all current financial policies and procedures. [The CSI Financial Policies and Procedures Guidance is available on the CSI resource site.](#)

Other Information

- CSI may ask for additional information once the annual audit has been completed in October.

By June 30th, the following policies need to be complete: Budget, Accounting, Audit, Interim Financial Reporting, Banking Services, Procurement, Contracts, Equipment Control and Disposition, Travel, Conflict of Interest, Ethical Principles/Disclosure, Borrowing, Records Retention.

Futures Committee and Facility Planning (15 minutes)

Expectation: COO to share updates on current year purchasing plans, EOY projections and longer-term projects.

- EOY projections underway: well ahead on salaries and benefits
- ~1M with original 600K fund balance use and 400K contingency from mid-year
- Financing and planning questions, gathering information to review options

22/23 projects completed/underway: Elem playground (Phase 1 & 2), Chromebook investment, phone system, chiller, kitchen investments, sprinkler overhaul, Promethean panels, classroom refurbishments etc.

Self-Evaluation (5 minutes)

Expectation: Finance Committee members have the opportunity to provide feedback to COO to improve the processes and meeting efficiency moving forward. [Self-rated as 4]

Next Meeting: 11 May, 2023

[Return to Agenda](#)



Prepare | Explore | Empower

The Academy PTO
Thursday, April 6, 2023

On Thursday, April 6, 2023, Karianne Klenjoski led an informal meeting for those interested in participating in the PTO. Six parents attended, but several others have expressed interest.

Karianne shared information about the PTO schedule, the responsibilities of the four board members, and answered questions. Those present left the meeting with the task of considering running for one of the four PTO board positions: president, vice president, secretary, and treasurer.

The next meeting will be on Thursday, May 4, 2023. At this meeting, we will vote on the officers for the 2023-2024 school year.

[Return to Agenda](#)

Signed Board Resolution Requesting Charter Renewal

The Academy of Charter Schools
11800 Lowell Blvd Westminster, CO 80031

Charter School Resolution

This charter school Resolution is executed on this Monday, April 24, 2023.

SECTION 1: RECITALS

WHEREAS, the Colorado General Assembly has enacted the Charter Schools Act (the “Charter Schools Act”), **CRS 22-30.5-101** *et seq.*, allowing for the creation and operation of charter schools within the state by its terms and for certain purposes as enumerated in **CRS 22-30.5-102(2) & (3)**; and

WHEREAS, the Colorado General Assembly has subsequently enacted **CRS 22-30.5-501** *et seq.*, (the “State Charter Institute Act”) authorizing the creation of the Colorado Charter School Institute (CSI) and empowering CSI to enter into charter school contracts as specified therein; and

WHEREAS, as pursuant to **CRS 22-30.5-503(b)(III)**, **22-30.504(1)** and **22-30.5-508(1)**, CSI has the authority to approve applications to establish charter schools in the state with conditions under which a charter school is to operate; and

WHEREAS, the current contract is effective beginning **July, 1 2019**. The contract states the terms and conditions of the contract will be reviewed and renewed and amended. It further states that the contract will terminate on **June 30, 2024**; and

WHEREAS, **The Academy of Charter Schools** has been accredited as a **Performance School**;

NOW, THEREFORE, **The Academy of Charter Schools** resolves to seek renewal of the current charter and requests the continuation of the current charter school contract. The School will work with CSI to provide the necessary information as detailed in the charter renewal handbook.

Signed By:

Kevin Sanchez, Academy Board Chair

Certified By:

Autumn Coffee, Academy Board Secretary

[Return to Agenda](#)



March 22, 2023

Colorado Charter School Institute
1600 N Broadway, Suite 1250, Denver, CO 80202

Dear Board Chair and School Leader,

Your school's charter contract is set to expire on June 30, 2024. As such, the school is eligible to apply for contract renewal. During the renewal process, the Colorado Charter School Institute (CSI) will examine the academic, financial, and operational performance of the school throughout the current contract term to determine whether the contract will be renewed after the 2023-24 school year. This document provides an overview of charter renewal process, school board and school leader roles, and tentative school submission requirements and deadlines. The Intent to Renew form, Renewal Timeline and Submission Overview, Renewal Submissions Details, and the 2023 CSI Charter Renewal Handbook are attached.

Charter Renewal Process

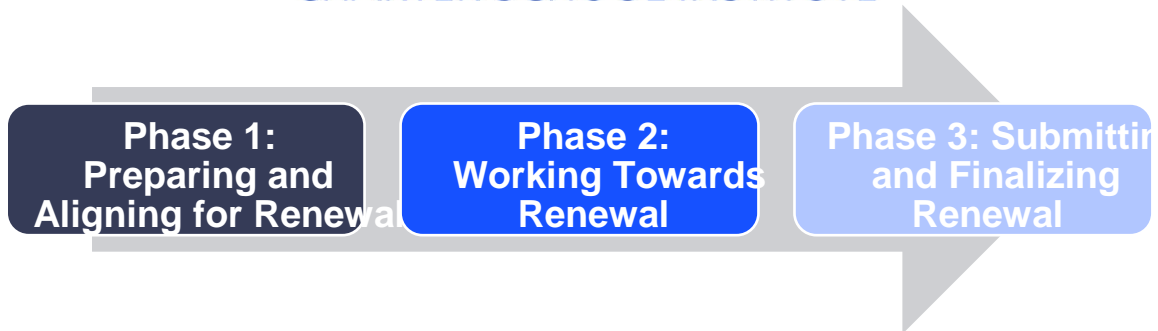
The authority to operate a charter school is granted through a limited-term, renewable contract. Contract renewal is not automatic – it must be earned through strong academic results, financial viability, and operational effectiveness. A strong renewal process is critical to protect charter school autonomy, student rights, and the public interest, and ensures that schools are held to high standards.

The primary driver of the renewal evaluation is the CSI Annual Review of Schools. The CSI Annual Review of Schools (CARS) is the system used to annually evaluate and accredit schools based on the CSI Academic, Financial, and Organizational Performance Framework. CARS builds upon the evaluation lens utilized by the State—which evaluates academic achievement, academic growth, and postsecondary and workforce readiness—by including additional measures related to academic, financial, and organizational performance to provide a more comprehensive and robust evaluation that includes strong indicators of charter viability and sustainability.

While the majority of the renewal evaluation is based on the evidence of school performance over the charter term, the CSI charter renewal process provides schools with the opportunity to present new or supplemental evidence around school performance in the areas of academics, finances, and organization/governance outside of the information annually captured in the CARS Report. The CSI charter renewal process is broken into three phases that are designed to streamline the process and align various components of the charter renewal process with ongoing school processes.



COLORADO
CHARTER SCHOOL INSTITUTE



The information gathered during the renewal process will help to augment the CSI Renewal Report, in addition to the information included in the CARS Report and existing body of evidence, and may serve to inform the renewal contract, identify areas of needed CSI support, and/or update CSI records.


School Submission Requirements and Deadlines

Each phase of the renewal process includes various activities and submissions. Phase timelines and submission requirements are included in the CSI Renewal Handbook and a summary is provided in the Renewal Timeline and Submission Overview and the Renewal Submissions Details.

We look forward to engaging with the school in the charter renewal process. Please reach out with any questions or concerns regarding the process or submission requirements. Sincerely,



Ryan Marks
Chief of Authorizing and Accountability
Colorado Charter School Institute



Terry Croy Lewis
Executive Director
Colorado Charter School Institute

Attachments:

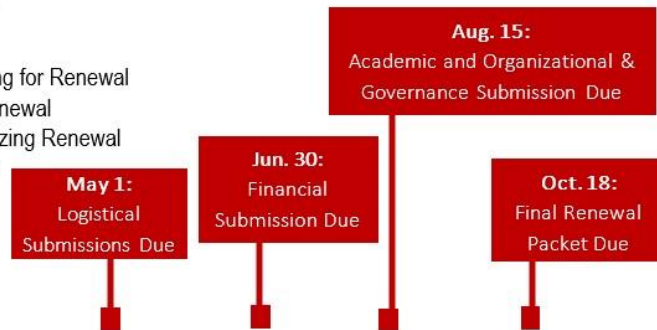
- Intent to Renew Form
- Renewal Timeline and Submission Overview
- Renewal Submissions Details
- CSI Charter Renewal Handbook

[Return to Agenda](#)

Renewal Timeline & Submissions Overview

Timeline and Submissions Key

- Submission Dates
- Phase 1: Preparing and Aligning for Renewal
- Phase 2: Working Towards Renewal
- Phase 3: Submitting and Finalizing Renewal
- Occurs during multiple phases
- Potential Dates



Renewal Events	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb
CSI Attends School Board Meeting												
Kick-Off Phone Call with CSI												
CSI Releases CSI Renewal Handbook												
Monthly Phone Call with CSI (as needed)												
Prepare for Site Visit												
CSI Renewal Site Visit												
CSI Attends School Board Meeting												
School Works on Submissions												
Presentation to CSI Board												
SPF and CARS Report is Released												
Renewal Report Released to School												
Renewal Report Discussed by CSI Board PM Committee												
CSI Board Action on Renewal												



Prepare | Explore | Empower

ADMINISTERING MEDICATIONS TO STUDENTS POLICY

Mission

The Academy's mission is to help all students grow into college ready, exemplary citizens by combining academic mastery with personal empowerment to drive lifelong success. We serve our full community by intentionally developing a school culture that embraces diversity, equity, and inclusion.

Purpose

The purpose of this policy is to provide guidelines on how Academy staff will or will not administer medications to students.

Administering Medications to Students

School personnel shall not administer prescription or nonprescription medication to students unless appropriate administration cannot reasonably be accomplished outside of school hours. Medication may be administered to students by school personnel whom a registered nurse has trained and delegated the task of administering such medication.

Definitions and Procedures

For purposes of this policy, the term "medication" includes both prescription medication and nonprescription medication. The term "nonprescription medication" includes but is not limited to over-the-counter medications, homeopathic and herbal medications, vitamins and nutritional supplements, and topical applications.

Medication may be administered to students only when the following requirements are met:

1. A parent or guardian has made a request in writing to the school's health office for The Academy to administer the medication.
2. The medication cannot reasonably be administered outside school hours.
3. The registered nurse has reviewed the parental/guardian request, along with the Colorado Health Care Provider's recommendations and approves or denies the request.
4. If approved the Medication Administration Plan is signed by the parent/guardian and the health care provider.

5. Prescription medication is kept in the original properly labeled container with the student's name, name of the medication, dosage, how often it is to be administered, name of the prescribing health care practitioner, and current date printed on the container.
6. Nonprescription medication is kept in the original properly labeled container and accompanied by a Medication Administration Plan signed by the parent/guardian and the health care provider.
7. The parent/guardian shall be responsible for providing all medication to be administered to the student.

Student's prescribed medications should be kept in the Health Office, with the exception of some rescue medications. Colorado law (C.R.S.22-1-119 Education Law, General Provisions) provides immunity to any school employee who administers any medication to a student in accordance with written instructions from a parent/guardian if there is an adverse reaction suffered by the student as a result of administering such medication.

Self-Administration of Medication for Asthma, Allergies or Anaphylaxis

A student with asthma, a food allergy, other severe allergies, or a related, life-threatening condition may possess and self-administer medication to treat the student's asthma, food or other allergy, anaphylaxis or related, life-threatening condition. Self-administration of such medication may occur during school hours, at school-sponsored activities, or while in transit to and from school or a school-sponsored activity. A parent or guardian shall issue a request for their student to self-administer medication to the principal.

Authorization for a student to possess and self-administer medication to treat the student's asthma, food or other allergy, anaphylaxis or other related, life-threatening condition shall be granted by the registered nurse and authorization may be limited or revoked by the school principal after consultation with the school nurse and the student's parent/guardian if the student demonstrates an inability to responsibly possess and self-administer such medication.

Administration of Medical Marijuana to Qualified Students

The Academy strives to honor families' private medical decisions while ensuring a learning environment free of disruption. Prescription medications, including medical marijuana, should only be administered to students in accordance with this policy, on school property during school hours, or during school sponsored activities, when administration is medically necessary and cannot reasonably be accomplished outside of these specified times and places.

For purposes of this policy, the following definitions shall apply:

1. "Permissible form of medical marijuana" means a product infused with medical marijuana that is intended for use or consumption other than by smoking, including but not limited to edible products, ointments, and tinctures. Marijuana intended for use or consumption through smoking or vaping, concentrated marijuana (including hashish, wax, and shatter) are not considered medical marijuana and are prohibited. Forms of medical marijuana not included in this definition may be proposed by the qualified student's parent/guardian to

the school health office, who may authorize such a request after consultation with others including appropriate medical personnel chosen by the school.

2. "Primary caregiver" means the qualified student's parent, guardian or other responsible adult over eighteen years of age who is identified by the student's parent/guardian as the qualified student's primary caregiver. In no event shall another student be recognized as a primary caregiver. Any primary caregiver seeking access to school or district property, a school bus or school-sponsored event for purposes of this policy must comply with the Board's policy and/or procedures concerning visitors to schools and all other applicable policies.
3. "Medical professional" means an individual licensed under article 36 or article 38 of title 12, C.R.S.
4. "Marijuana consumer waste" means any component left after the consumption of a regulated marijuana product, including but not limited to containers, packages, cartridges, pods, cups, batteries, all-in-one disposable devices, and any other waste component left after the regulated marijuana is consumed.
5. "Volunteer" means a school staff member that volunteers at their own discretion to administer a permissible form of medical marijuana to the qualified student in compliance with this policy and the written plan developed by The Academy.
6. "Qualified student" means a student who holds a valid registration from the state of Colorado (license issued by the Colorado Department of Public Health and Environment) for the use of medical marijuana and for whom the administration of medical marijuana cannot reasonably be accomplished outside of school hours. A qualified student's primary caregiver may administer a permissible form of medical marijuana to a qualified student if all of the following parameters are met:
 - a) The qualified student's parent/guardian provides the school with a copy of the student's valid registration from the state of Colorado authorizing the student to receive medical marijuana;
 - b) The qualified student's parent/guardian or primary caregiver provides the permissible form of medical marijuana;
 - c) The qualified student's parent/guardian signs a written acknowledgement assuming all responsibility for the provision, administration, and use of medical marijuana, and may also grant permission for a volunteer to store, administer, or assist in the administration of medical marijuana. This written acknowledgment must also release The Academy, including any volunteer, from liability for any injury that may occur pursuant to this policy;
 - i. The Academy determines, in its sole discretion: that a location and a method of administration are available that do not create risk of disruption to the educational environment or exposure to other students; and,
 - ii. if needed, the location of a locked storage container to store the medical marijuana that does not significantly delay access to or the administration of the medical marijuana in a medical emergency, or the primary caregiver may remove any remaining medical marijuana;

- a) The Academy prepares, with the input of the qualified student's parent/guardian, a written "Administration of Medical Marijuana to Qualified Students Plan" describing:
- i. the valid registration for the State of Colorado for the use of Medical Marijuana,
 - ii. the Medical Marijuana product and dose prescribed,
 - iii. copy of physician certification,
 - iv. the side effects of the product, or the reason the product is necessary for the Qualified Student,
 - v. the specified time and frequency of administration,
 - vi. name, DOB, and copy of identification of all requested persons to administer Caregiver names listed on the Medical Marijuana Registry Card,
 - vii. a statement that the Medical Marijuana product cannot be administered exclusively outside of school hours, and
 - viii. an explanation of why the Medical Marijuana product cannot be administered exclusively outside of school hours.

The Written Plan shall be signed by the school administrator, the qualified student (as appropriate) and the qualified student's parent/guardian.

1. The school may determine, at its sole discretion, whether a location or method of administration of Medical Marijuana products is available that does not create a disruption to the learning environment or cause exposure to other students. The school may also determine, at its sole discretion, whether the continued use of the Medical Marijuana product disrupts the learning environment or causes exposure to other students. If the school determines that the Medical Marijuana product creates a disruption or causes exposure, the school shall consider alternative arrangements.
2. If at any time dosage amounts or times must change, the Guardian must request to alter/revise the Written Plan prior to implementing changes.

This policy conveys no right to any student or to the student's parents/guardians or other primary caregiver to demand access to any general or particular location to administer medical marijuana.

All school staff members have the sole discretion to decide if they personally want to volunteer to administer medical marijuana. No individual will pressure, demand, direct, threaten or attempt to require a school employee to volunteer to administer medical marijuana. If the designated volunteer(s) identified in the written plan is unavailable to administer the medical marijuana to the qualified student, The Academy will notify the parent/guardian, but is not obligated to provide a substitute.

Nurses have the same rights as other staff members to exercise sole discretion to decide if they personally want to volunteer to administer or store medical marijuana. Volunteers will not be delegated under a nurse's license to carry, administer, direct, or assist in the administration of the medical marijuana.

Permission to administer medical marijuana to a qualified student may be limited or revoked due to violations of this policy. If this occurs, the parent/guardian must remove the medical marijuana and any consumer waste from school property or The Academy will dispose of it in accordance with law and school protocols.

Student possession, use, distribution, sale or being under the influence of marijuana inconsistent with this policy may be considered a violation of Board policy and may subject the student to disciplinary consequences

If the federal government indicates that The Academy's federal funds are jeopardized by this policy, the Board declares that this policy shall be suspended immediately and that the administration of any form of medical marijuana to qualified students on school property, on a school bus or at a school- sponsored event shall not be permitted. If this occurs, The Academy shall post notice of such policy suspension and prohibition in a conspicuous place on its website.

Use of Opiate Antagonists in Emergency Situations

To the extent state funding and supplies are available, The Academy shall have a stock supply of opiate antagonists to assist a student who is at risk of experiencing an opiate-related drug overdose event. For purposes of this policy, an opiate antagonist means naloxone hydrochloride or any similarly acting drug that is not a controlled substance and that is approved by the federal Food and Drug Administration (FDA) for the treatment of a drug overdose. The stock supply of opiate antagonists may also be used to assist a school employee or any other person who is at risk of experiencing an opiate-related drug overdose event. Administration of an opiate antagonist by a school employee to a student or any other person shall be in accordance with applicable state law.

ADMINISTERING MEDICATIONS TO STUDENTS POLICY

The Board of Directors at The Academy approved the Administering Medications to Students Policy on Monday, April 24, 2023.

Board Chairperson

Date

[Return to Agenda](#)



The Legislature created the Opiate Antagonist Bulk Purchase Fund, referred to as the Naloxone Bulk Fund, in Colorado Senate Bill 19-227. It allows eligible entities to access opiate antagonists for free. Naloxone is a commonly used opiate antagonist that reverses an opioid overdose to save a person's life. Opioid drug abuse is a concern that impacts the entire community. Schools can be one part of a system to increase access to naloxone within communities.

Eligibility Requirements for Schools and Districts

- ❖ K-12 schools and districts are eligible to apply for the Bulk Fund and access free naloxone.
- ❖ In order to submit an application for the Bulk Fund, schools or districts must submit a **governing board policy** addressing the possession and administration of naloxone.
 - Schools and districts may apply for a standing order (Step 1) before the policy is in place; however, the policy must be in place before submitting a Naloxone Bulk Fund application (Step 2).
 - [Naloxone in Schools Toolkit](#) includes a variety of resources to support Districts develop a policy
 - Example of a [Naloxone District Policy](#) from Boulder Valley School District

How to Apply for the Bulk Fund

1. FIRST

- ❖ Eligible entities must first have a standing order before submitting an application for the Bulk Fund. Standing orders certify an entity is able to administer naloxone and provides a certification of approval.
 - If you need to request a standing order, please visit the [naloxone standing order CDPHE webpage](#) and click the blue "Make a request for Naloxone standing order" bar.
 - Create an account on OpiRescue as a School entity group, and submit the standing order request.
- ❖ Once submitted, within a week, you should receive an email with a copy of your standing order.

2. ONCE YOU HAVE A STANDING ORDER

- ❖ Once you have a standing order, you may apply for the Naloxone Bulk Fund.
 - Visit the [CDPHE overdose prevention website](#) and click "Naloxone Bulk Purchase Fund".
 - Click the blue "Apply for the Naloxone Bulk Fund" bar.
 - Complete and submit the required [Google Form Application](#).
- ❖ Once the application is submitted, applications are reviewed by CDPHE staff. A confirmation email should be received within 1-2 weeks after submitting the application.
 - In this confirmation email, there will be details on how to place your naloxone order.

3. ONCE YOU HAVE PLACED YOUR ORDER

- ❖ Once your order is placed:
 - If it's your school's first time ordering, it typically takes 3-4 weeks to receive your product.
 - If you have previously placed an order, it typically takes 1-2 weeks to receive your product.
- ❖ Once your order has shipped, you will receive a confirmation email with tracking information.

For further information or assistance please contact: cdphe_naloxone@state.co.us

[Return to Agenda](#)

Naloxone in the School Setting

Position Statement

NASN POSITION

It is the position of the National Association of School Nurses (NASN) that the safe and effective management of opioid-related overdoses in schools must be incorporated into the school emergency preparedness and response plans. The registered professional school nurse (hereinafter referred to as school nurse) provides leadership in all phases of emergency preparedness and response. When emergencies happen, including drug-related emergencies, proper management of these incidents at school is vital to positive outcomes. The school nurse is essential to the school team responsible for developing and implementing emergency response procedures. School nurses in this role should facilitate access to naloxone for quick response in the management of opioid-related overdoses in the school setting.

BACKGROUND AND RATIONALE

Opioid overdose deaths are a public health crisis according to the National Institute of Health (NIH) due to increased opioid misuse (NIH, 2019). According to the Centers for Disease Control and Prevention (CDC), drug overdose deaths are the leading cause of injury-related deaths in the United States. In 2017, more than 70,000 people died from prescription or illicit opioid misuse (CDC, 2017). In response, the US Department of Health and Human Services (HHS) is focusing its efforts on five priorities: access to treatment and recovery services, promoting overdose reversing drugs, strengthening understanding of the epidemic through better public health surveillance, providing support for cutting edge research on pain and addiction, and advancing better practices for pain management (NIH, 2019).

Deaths from opioids include those caused by prescription medications such as oxycodone, morphine or hydrocodone, and illegal drugs such as heroin or the synthetic opioid fentanyl (CDC, 2018). A crucial contributing factor regarding drug overdose deaths involves the nonmedical use of prescription painkillers—using drugs without a prescription or using drugs to obtain the "high" produced. Between 2016 and 2017, deaths from synthetic opioids increased significantly in 23 states (CDC, 2019). Many of these opioid-related deaths by overdose were due to opioids which contained fentanyl, perhaps the most dangerous synthetic opioid (CDC, 2019). In 2018, the CDC stated that deaths related to opioids consisted of over two-thirds of all overdose deaths (CDC, 2018).

According to the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Survey on Drug

Use and Health, in 2017 there were 2.2 million adolescents ages 12 to 17 who were current illicit drug users. The CDC recognized the magnitude of this crisis in 2018 (SAMHSA, 2018) when overdoses were named as the most pressing health concerns and added to its list of top five public health challenges.

Naloxone is an opioid antagonist that will temporarily reverse the potentially deadly respiratory depressive effects for legal and illicit drugs. It is available as intramuscular or subcutaneous injection and nasal spray. When administered quickly and effectively, naloxone has the potential to immediately restore breathing to a victim experiencing an opioid overdose. Additional doses can be administered every 2-3 minutes (Selekman, 2019).

The use of naloxone as an opioid overdose reversal agent by laypeople and first responders has doubled from 2017-2018 and has proven to be an effective strategy in preventing overdose opioid deaths. The CDC (2019) estimates a co-prescribing ratio for opioids and naloxone as 70:1. For every 70 high dose opioid prescriptions written, there is only one naloxone co-prescription written, with rural areas having a much lower rate than metropolitan areas. Schools are responsible for anticipating and preparing to respond to a variety of emergencies. The school nurse is often the first health professional who responds to an emergency in the school setting. The school nurse possesses the education and knowledge to identify emergent situations, manage the emergency until relieved by emergency medical services (EMS) personnel, communicate the assessment and interventions to EMS personnel, and follow up with the healthcare provider. Thus, school nurse access to naloxone as part of their school's emergency preparedness will improve opioid overdose response, response preparation, and harm reduction and avoid horrific outcomes such as death. With naloxone as part of an emergency protocol, a school nurse can quickly administer it to prevent overdose deaths by reversing life-threatening respiratory depression. Ensuring ready access to naloxone at schools aligns with one of the SAMSHA's five strategic approaches to prevent overdose deaths (SAMHSA, 2018).

Naloxone saves lives and can be the first step toward opioid use disorder (OUD) recovery. Opioid overdose-related deaths can be prevented when naloxone is administered in a timely manner. As a narcotic antagonist, naloxone displaces opiates from receptor sites in the brain and reverses respiratory depression that usually is the cause of overdose deaths (SAMHSA, 2018). Emergency protocol for any suspected overdose should include administering Naloxone and transporting the individual for emergency care. The access to emergency treatment can be the first step toward a much larger course of treatment of OUD.

School nurses should be familiar with the legal implications in their state when implementing naloxone as part of their school district's emergency response plan. Laws vary from state to state in terms prescribing, supply maintenance and who can administer naloxone in the school setting. Since 2017, every state and the District of Columbia have laws that provide protection from criminal liability for naloxone administration by laypersons or first responders (SAMSHA, 2019).

Community prevention education is key when addressing the public health crisis of opioid-related deaths. School nurses have a crucial role to play with research-based, primary prevention strategies within their school communities. Through community outreach with prescription opioid abuse, misuse and overdose awareness programs, school nurses can provide valuable education and be a useful resource for K-12 students and their families. Furthermore, school nurses can assist families in recognizing the signs and symptoms of substance abuse, support and guide them in locating resources for care, counseling, and even refer students for appropriate treatment of OUD.

REFERENCES

Centers for Disease Control and Prevention. (2018). *Drug overdose deaths*.

<https://www.cdc.gov/drugoverdose/data/statedeaths.html>

Centers for Disease Control and Prevention (2018). *Opioid overdoses treated in emergency departments*.
<https://www.cdc.gov/vitalsigns/opioid-overdoses/>

Centers for Disease Control and Prevention (2018). *Opioid basics*.
<https://www.cdc.gov/drugoverdose/opioids/index.html>

Centers for Disease Control and Prevention. (2018). 2018 in review: CDC looks back at the year's most pressing health concerns. <https://www.cdc.gov/media/releases/2018/p1221-2018-yearreview.html>

Centers for Disease Control and Prevention (2019). Synthetic opioid overdose data.
<https://www.cdc.gov/drugoverdose/data/fentanyl.html>

Center for Disease Control and Prevention. (2019). Life Saving Naloxone from pharmacies.
<https://www.cdc.gov/vitalsigns/naloxone/index.htm>

Johnson, K., Selekman, J. (2019). Students engaging in high risk behavior. In J. Selekman (Ed.) *School nursing: A comprehensive text* (3rd ed.), pp. 826-835. Philadelphia, PA: F.A. Davis Company.

National Institute of Health (NIH): National Institute of Drug Abuse. (2019). Opioid.
<https://www.drugabuse.gov/drugs-abuse/opioids>

National Institute of Health (NIH): National Institute On Drug Abuse. (2019). Opioid overdose crisis.
<https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis>

Substance Abuse and Mental Health Services. (2018). *Opioid overdose prevention toolkit* (HHS Publication No. [SMA] 18-1472). Rockville, MD: Author. <https://store.samhsa.gov/system/files/sma18-4742.pdf>

U.S. Department of Health and Human Services (HHS). (n.d.). About the Epidemic webpage provides information from HHS on the opioid epidemic. <https://www.hhs.gov/opioids/about-the-epidemic/>

Acknowledgment of Authors:

Suzanne Levasseur MSN, APRN, CPNP, NCSN

Lynn Nelson MSN, RN, NCSN

Doreen Crowe, MEd, BSN, RN, NCSN

Keisha ES Major MSN-Ed, RN, NCSN

Dates:

Adopted: June 2015 Reviewed: July 2019

Revised: June 2020

Suggested citation: National Association of School Nurses. (2020). *Naloxone in the school setting* (Position Statement). Author.

“To optimize student health, safety and learning, it is the position of the National Association of School Nurses that a professional registered school nurse is present in every school all day, every day.”

All position statements from the National Association of School Nurses will automatically expire five years after publication unless they have been renewed, revised, or retired at or before that time.

www.nasn.org

National Association of School Nurses

1100 Wayne Avenue, Suite 925

Silver Spring, MD 20910

1-240-821-1130

[Return to Agenda](#)



College students are part of communities and part of the solution. We envision a state of Colorado with no opioid deaths. NASPA - Student Affairs Administrators in Higher Education, the Coalition of Colorado Campus Alcohol and Drug Educators (CADE), and the Colorado Consortium for Prescription Drug Abuse Prevention have collaborated on this joint statement regarding Naloxone to make recommendations for campus administrators regarding the use and storage of Narcan on campus.

Over a quarter million students are enrolled in colleges or universities in Colorado, and we know these students live, work, and play in communities beyond their college campus (IPEDS, 2017). Data from the recent American College Health Association National College Health Assessment indicates 5.2% of college students report misusing prescription painkillers in Colorado in the past 12 months (CADE Data Set, 2019).

In 2017, over 1,000 Coloradans died due to a drug overdose, and 57 percent of those deaths involved an opioid (CDPHE, 2019). College students are not immune from these statistics as some of these deaths occurred in 18-25 year olds. About 2.5 million young adults aged 18 to 25 nationwide reported misusing opioids in the past year, which corresponds to about 7.3 percent of the young adult population (NSDUH, 2018). Students equipped with naloxone can be a part of the solution to Colorado's opioid crisis.

- **What is an opioid?**

Opioids are powerful medications indeed — when prescribed by doctors and used correctly, medications such as oxycodone (OxyContin, Percocet), hydrocodone (Vicodin), and fentanyl can help relieve pain. They can help people get through surgeries, relieve cancer pain, recover from injuries, or manage chronic pain.

- **What is Naloxone?**

Naloxone is an opioid antagonist, which means it stops the body from responding to opioids and temporarily reverses their effect. Naloxone knocks opioids off certain brain receptors and doesn't allow them to reconnect. The body reacts by going into withdrawal.

Naloxone (brand name Narcan) is extraordinarily safe, is available in over 500 pharmacies across Colorado, and is covered by Medicaid and most private health insurance. Naloxone has no abuse potential, and can be used on minors, and even on pets.

Colorado law allows anyone (yes, that includes students) to possess and use naloxone to prevent overdose deaths. The law also has Good Samaritan protections with civil and criminal liability protection for anyone administering naloxone to save a life and protects 911 callers from arrest if they

are also in possession of or have been using drugs. Recent legislation in 2019 was passed that allowed school nurses and administrators to carry naloxone. In addition the bill stated in statute that naloxone can be made available wherever an automated external defibrillator (AED) is located. (Bill full text:

https://leg.colorado.gov/sites/default/files/2019a_227_signed.pdf)

- **Availability of naloxone**

Because of the scope of the opioid crisis, the US Surgeon General recommends knowing how to use naloxone and keeping it within reach. Therefore access to naloxone for students in a variety of settings (e.g. residence halls, Panhellenic organizations, campus police, other student housing, student health centers etc.) is recommended. Many universities throughout the U.S. have either developed on-campus naloxone policies or made naloxone available through student health services including the University of Texas at Austin, the Ohio State University, and Bridgewater State University.

There is no single identifiable characteristic for risk for overdose, and stigma contributes to the idea that the only people at risk for opioid overdose are homeless or are using street heroin. An overdose can happen when someone either takes too many opioids, takes a risky combination of opioids with alcohol, or takes another substance like a sleeping pill or anti-anxiety medication.

Additionally, fentanyl, a powerful opioid, has been found in other drugs (e.g. MDMA, illicit Xanax) unbeknownst to the user. Therefore, making naloxone widely available and knowing how to use it is one means to ensure access to this life-saving drug and reduce stigma.

- **Having naloxone available doesn't increase drug use or misuse**

According to the Drug Policy Alliance, several research studies have shown that naloxone access does not increase or promote drug use. The notion that naloxone promotes risky behavior perpetuates stigma among those with opioid use disorder. For more information, visit <http://www.drugpolicy.org/issues/naloxone>

- **Best practices for training and storage**

Professional staff, student staff, and students at large can be trained to administer naloxone. Naloxone has no age restriction. You do not need to be certified or attend a lengthy training to administer naloxone. Multiple organizations offer free educational sessions on how to prevent, recognize, and reverse an opioid overdose using naloxone. Educational efforts can reduce risk factors for opioid overdose, discuss harm reduction policy, and provide awareness regarding laws and potential liabilities.

[Return to Agenda](#)