# AMENDED AGENDA and NOTICE
# SCHOOL COMMITTEE MEETING
**(originally posted 11/12/26 at 11:52 a.m.; amended on 11/13/26 at 8:30 a.m.)**

**Regular Session Meeting**
**Monday, November 16, 2026**

**LOCATION**
**40 Fairbank Road, Sudbury, MA 01776; Room 214**
**Dial In: 1 301 715 8592 - Webinar ID: 867 6769 8494**
**Live Link: https://us02web.zoom.us/j/86767698494**

## AGENDA

**6:30 p.m. - Open Executive Session** **(Approximate)**

1. Executive Session
    a. Motion and vote to meet in executive session and to return to open session pursuant to Massachusetts General Laws chapter 30A section 21(a)(3) for the following purpose:
        i. Purpose (3): to discuss strategy and vote with respect to ongoing litigation, specifically, to discuss MCAD Docket Number 25BEM0092, because an open discussion may have a detrimental effect on the bargaining position of the Committee; and
        ii. Purpose (7) to review and approve minutes from the Sudbury School Committee executive session meeting of October 8, 2026.

**7:00 p.m. - Open Regular Session** **(Approximate)**

1. Public Comment — 15 Mins
    a. At the start of each regularly scheduled School Committee meeting, community members may address the Committee. In-person attendees should sign in; remote attendees on Zoom should use the "Raise Hand" feature (in the Reactions menu, or under "More" on mobile). For remote comments, attendees must also type their full name into the Zoom name field in order to be called on. Per Policy BEDH, each speaker has up to three (3) minutes and must state their name and city/town. Public comment is not a discussion or debate, but an opportunity to share opinions on matters within the Committee's authority. Meetings are live-streamed and recorded for SudburyTV; participation constitutes consent to be recorded and broadcast.

2. Special Matters
    a. MetroWest Health Study Presentation — (Report) — 45 Mins
    b. LGBTQ+ PAC Mid Year Report — (Report) — 15 Mins

3. Educational and Operational Matters — (Reports) — 15 Mins
    a. SEA (Anneke Bartelsman)
    b. District Reports
        i. Interim Assistant Superintendent
        ii. Interim Superintendent

4. Consent Calendar — (Discussion/Action) — 5 Mins
    a. Approval of SERF Grant
    b. Monthly Accounts Payable and Payroll Warrants Submission

5. Business and Policy Matters
    a. Superintendent Search Update — (Discussion/Action) — 10 Mins
        i. Revise Job Posting
        ii. Community Forum Update
    **b. FY28 Budget Goals — (DIscussion/Action) — 10 Mins**

| | | | |
|---|---|---|---|
| c. | Curriculum Review | (Discussion/Action) | 10 Mins |
| d. | Review Policy JJF Student Activity Accounts per Budget Subcommittee Recommendation | (Discussion/Action) | 10 Mins |
| e. | Policy BGB Step 2 Policy JFBC METCO (Discussion Item) | (Discussion) | 10 Mins |
| f. | Policy BGB Step 3 (Action Item) | (Discussion/Action) | 30 Mins |
| | i. JLCD Administration of Medication of Students | | |
| | ii. JLCDC Self Administration and Self-Carry of Medication | | |
| | iii. JKAA Prevention of Physical Restraint of Students | | |

6. Future Agenda Items (Report) 5 Mins

7. Adjournment

*This listing of matters is those reasonably anticipated by the Chair, which may be discussed at the meeting. Not all items listed may in fact be discussed, and other items not listed may also be brought up for discussion to the extent permitted by law. The Chair will strive to honor timed items as best as possible.*

*The next School Committee Meeting is scheduled for* ***Monday, November 30, 2026***

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 2 - Special Matters
a. MetroWest Health Study Presentation
b. LGBTQ+ PAC Mid Year Report

**Recommendation:**

**Background / Preparation Information:**

Betsy Grams will present the findings from the MetroWest Health Study. Please review her presentation and bring any questions or comments. A representative from SEPAC and the LGBTQ+ PAC will be attending this portion of our meeting.

We will also hear the mid-year report from our LGBTQ+ PAC. They will update on how their work is going this year. Please review the information they provided and bring any questions or comments.

**Attachments:**

**LGBTQ+ PAC Mid-year Update to SC - 11.16.26 (1)**
**SC MWAHS 11.16.26 (1)**

**Action:** **Report:** **XX** **Discussion:**

METROWEST ADOLESCENT HEALTH SURVEY

# Understanding the Data and Strengthening Our Supports

November 16, 2026



# Agenda

01 MetroWest Adolescent Health Survey Methods

02 Data Highlights: Trends and Demographic Sets

03 Safe and Supportive Schools

04 From Data to Action

05 Questions and Discussion

# MetroWest Adolescent Health Survey

**What it is ...**

- Regional youth health survey, administered during the fall of 2025, 14,516 middle school students from 23 communities
- Based upon CDC's Youth Risk Behavior Surveillance Survey (YRBSS)
- Grant-funded project by the MetroWest Health Foundation
- Curtis students completed the survey online on November 5, 2025
- **Curtis n = 770, grades 6 - 8, representing an 89% participation rate**

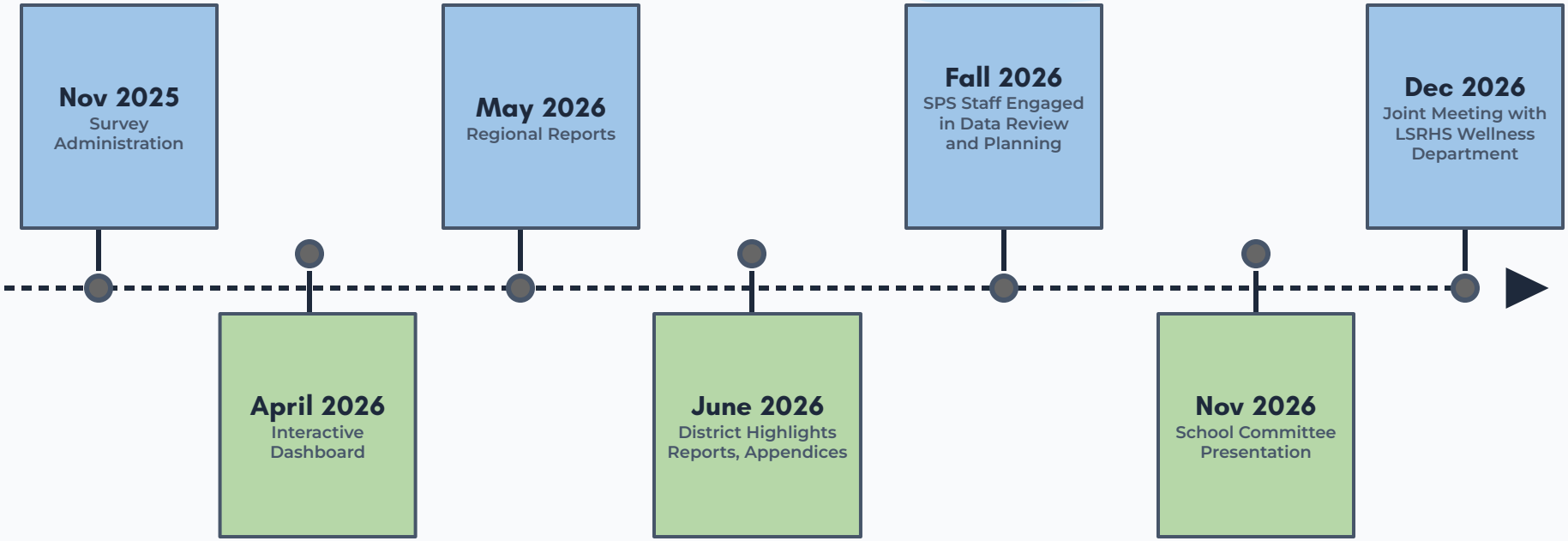
METROWEST HEALTH FOUNDATION
Funded by:
MetroWest Health Foundation

# MetroWest Adolescent Health Survey

- **Validity and Reliability:** Research indicates that youth respond truthfully when their participation
  - is voluntary;
  - they perceive the survey as important; and
  - they understand their responses are anonymous.
- **Generalizability**: the high participation rate makes the student data highly representative of the whole student population
- **Translations:** in English, Portuguese, and Spanish
- **Format:** 120 questions on risk behaviors and protective factors

METROWEST HEALTH FOUNDATION
Funded by:
MetroWest Health Foundation

# 2025–2026 MetroWest Adolescent Health Survey Timeline



**Protective Factors:** Characteristics that promote resilience, foster success, and reduce risk behaviors.

## Individual-Level Protective Factors

- Problem-solving skills
- Positive self-image
- Healthy stress management strategies

## Family-Level Protective Factors

- Expressions of care
- Predictable schedules
- Clear & consistent expectations

## School-Level Protective Factors

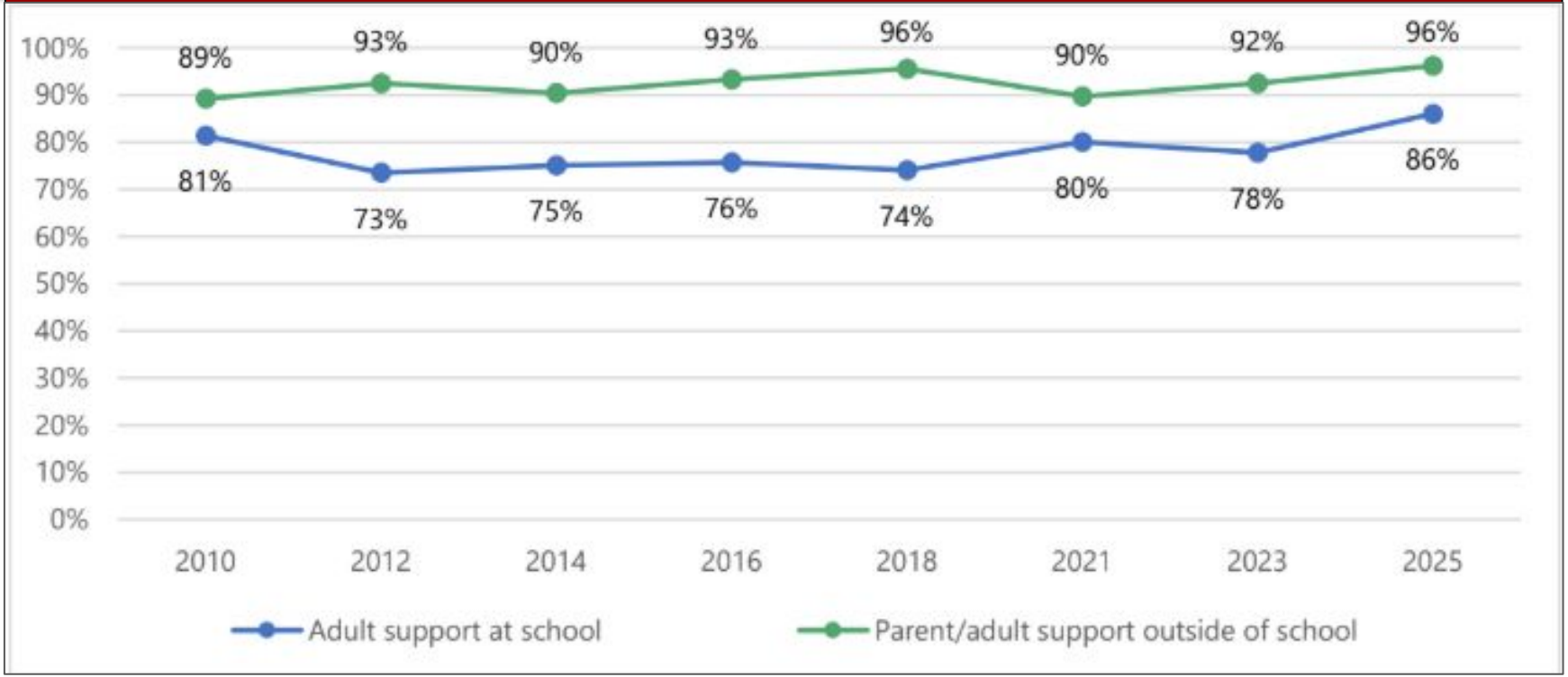
- Positive school climate & culture
- Trusting relationships with staff
- Opportunities for leadership roles or participation in clubs

## Community-Level Protective Factors

- Safe neighborhoods & community
- Access to resources - mental health services & recreational programs

# Trends in Adult Support

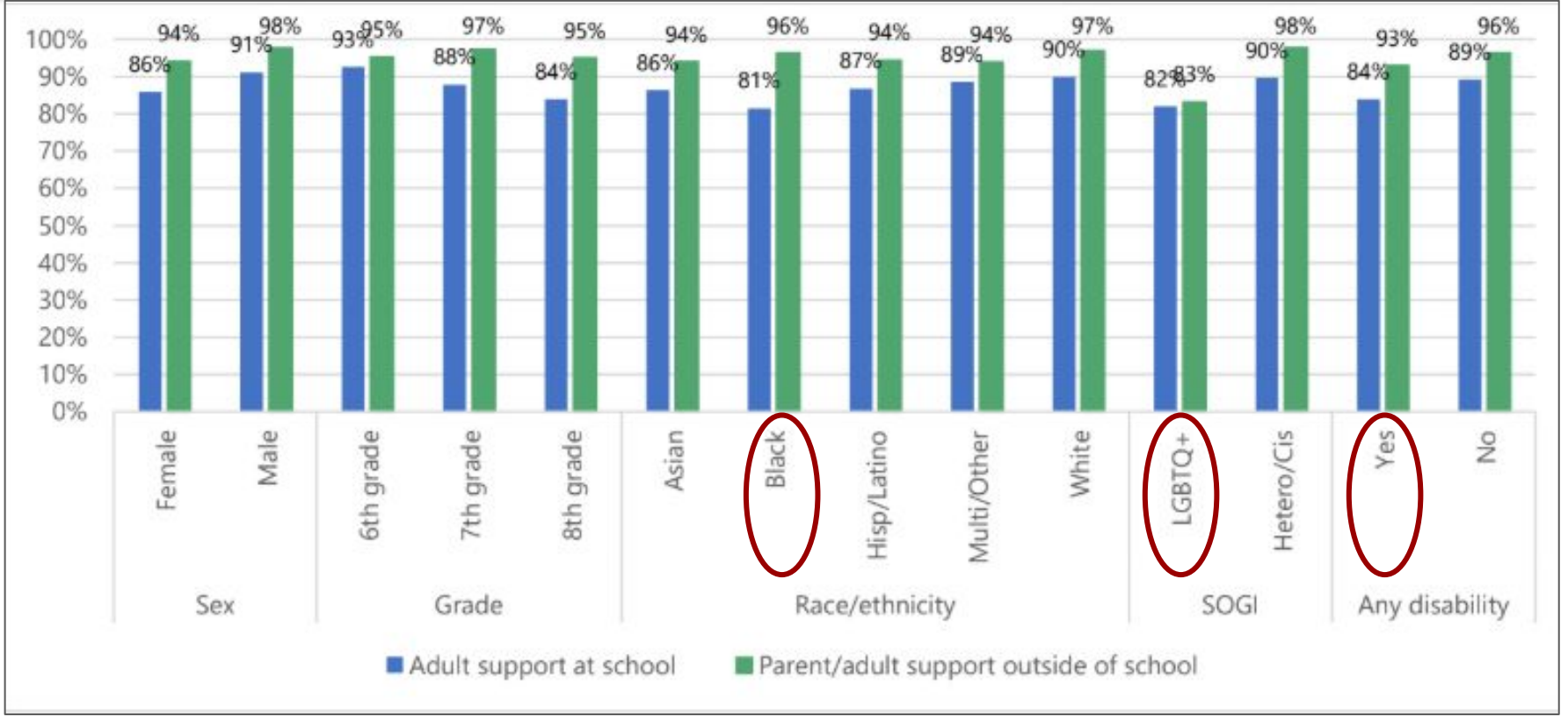
## Curtis 7th & 8th Grade Students - November 2025




- In 2025, adult support at school reached its highest level since 2010, with 86% reporting feeling supported by an adult at school.

# Demographic Patterns in Adult Support

## Curtis 6th - 8th Grade Students - November 2025



# Trends in Adult and Peer Support
## Curtis 7th & 8th Grade Students - November 2025

| Adults and Peer Support | 2010 | 2012 | 2014 | 2016 | 2018 | 2021 | 2023 | 2025 | MetroWest 2025 |
|---|---|---|---|---|---|---|---|---|---|
| Adult support: have adult at school to talk to about a personal problem | 81.3% | 73.5% | 75.0% | 75.7% | 74.1% | 80.0% | 77.7% | 86.0% | 75.3% |
| Adult support: Have parent/non-school adult to talk to about important things | 89.2% | 92.5% | 90.4% | 93.3% | 95.5% | 89.7% | 92.4% | 96.2% | 92.9% |
| Peer support: Feel you have a friend you can talk to about a personal problem (often/very often) | | 70.4% | 70.3% | 70.5% | 64.1% | 59.6% | 63.5% | 64.8% | 63.7% |
| Peer support: Feel you are part of a group of friends (often/very often) | | 81.8% | 84.4% | 85.6% | 83.8% | 77.9% | 76.7% | 81.5% | 76.4% |
| Peer support: Feel lonely (often/very often) | | 6.5% | 7.8% | 5.7% | 13.6% | 21.1% | 15.4% | 10.2% | 16.2% |
| Peer support: Feel you have a lot in common with the people around you (often/very often) | | | | | 65.9% | 62.5% | 66.4% | 70.4% | 63.0% |
| Peer support: Feel there are people who really know and understand you (often/very often) | | | | | 66.2% | 64.4% | 62.7% | 69.5% | 64.4% |
| Peer support: Feel left out and excluded by others (often/very often) | | | | | 10.3% | 13.4% | 14.3% | 12.8% | 15.8% |

- All indicators in adult and peer support have increased since the COVID-era in 2021 and are now higher than MetroWest regional averages.
- The percentage of students reporting feeling lonely has decreased since 2021, from 21% to 10%.

# Trends in School Connectedness

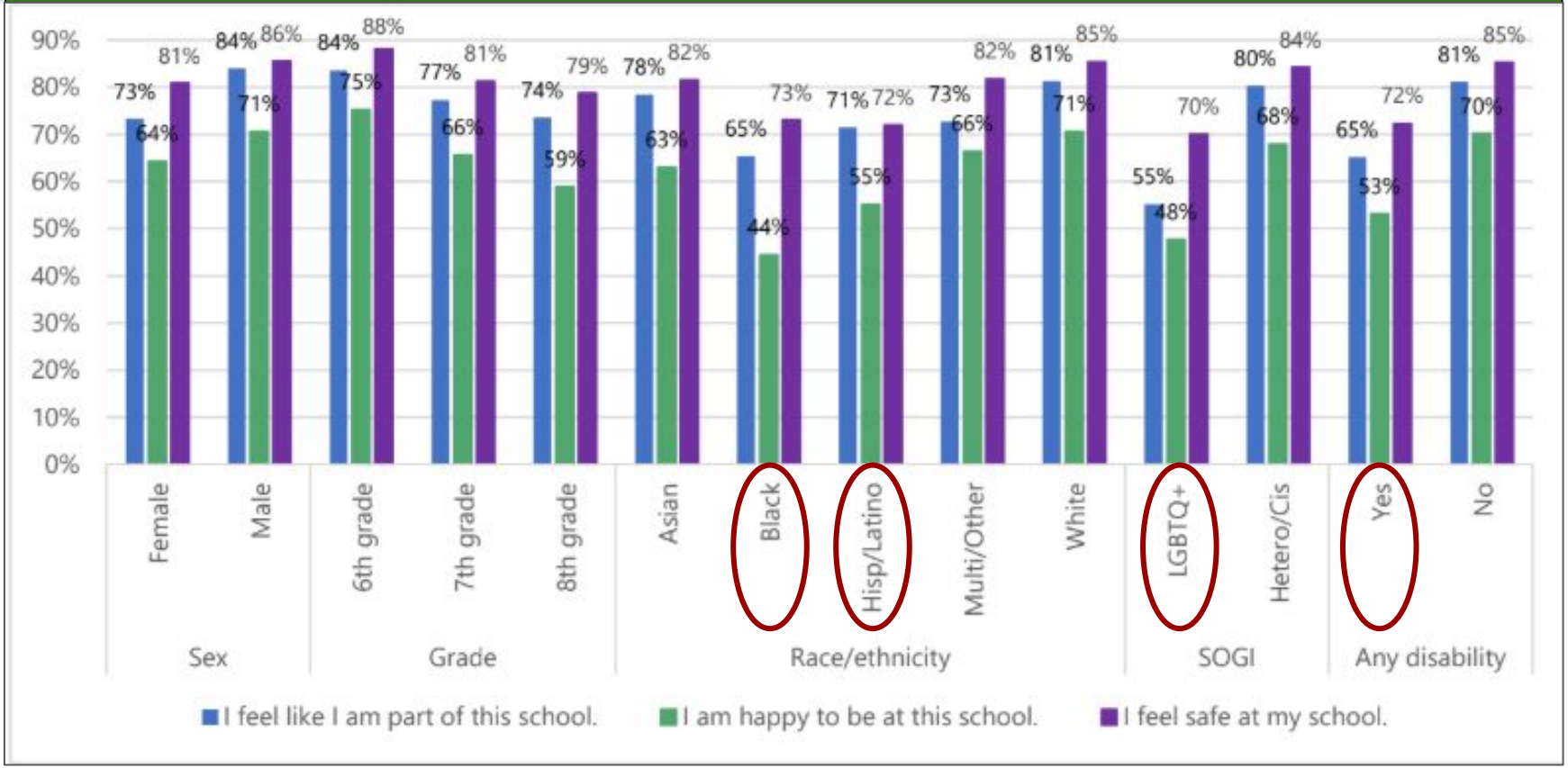
## Curtis 7th & 8th Grade Students - November 2025

| School Connectedness | 2010 | 2012 | 2014 | 2016 | 2018 | 2021 | 2023 | 2025 | MetroWest 2025 |
|---|---|---|---|---|---|---|---|---|---|
| School connectedness: I feel close to people at school. (agree/strongly agree) | 81.6% | 85.0% | 79.7% | 77.9% | 75.5% | 69.0% | 70.0% | 78.2% | 73.0% |
| School connectedness: I feel like I am part of this school. (agree/strongly agree) | 81.1% | 82.4% | 81.2% | 78.5% | 70.6% | 68.6% | 69.2% | 75.6% | 68.7% |
| School connectedness: I am happy to be at this school. (agree/strongly agree) | 74.8% | 77.7% | 74.4% | 71.9% | 62.2% | 55.8% | 55.2% | 62.6% | 57.9% |
| School connectedness: Teachers at this school treat students fairly. (agree/strongly agree) | 69.2% | 72.1% | 71.6% | 64.7% | 56.0% | 55.5% | 56.4% | 61.6% | 60.0% |
| School connectedness: I feel safe at my school. (agree/strongly agree) | 85.9% | 88.2% | 87.6% | 87.1% | 73.1% | 79.6% | 77.0% | 80.1% | 73.6% |

- All indicators of school connectedness have increased since 2021, reflecting an overall positive trend.
- Across every indicator, student-reported levels are higher than the corresponding MetroWest regional percentages.

# Demographic Patterns in School Connectedness

## Curtis 6th - 8th Grade Students - November 2025



# Trends in Substance Use

## Curtis 7th & 8th Grade Students - November 2025

2025 Participation Rate: 89.1%

| | 2010 | 2012 | 2014 | 2016 | 2018 | 2021 | 2023 | 2025 | MetroWest 2025 |
|---|---|---|---|---|---|---|---|---|---|
| **Total Responses** | 620 | 664 | 650 | 623 | 563 | 558 | 503 | 472 | 10,331 |

| Substance Use | 2010 | 2012 | 2014 | 2016 | 2018 | 2021 | 2023 | 2025 | MetroWest 2025 |
|---|---|---|---|---|---|---|---|---|---|
| Cigarette smoking (lifetime) | 5.0% | 2.1% | 3.0% | 0.8% | 1.1% | 2.5% | 1.0% | 1.5% | 2.7% |
| Cigarette smoking (past 30 days) | 3.3% | 1.1% | 0.6% | 0.3% | 0.2% | 1.1% | 0.4% | 0.6% | 0.8% |
| Electronic vapor product use (lifetime) | | | 1.4% | 1.9% | 3.5% | 3.4% | 0.6% | 0.8% | 3.5% |
| Electronic vapor product use (past 30 days) | | | 0.8% | 0.5% | 2.7% | 1.3% | 0.4% | 0.2% | 1.7% |
| Alcohol use (lifetime) | 8.9% | 7.2% | 9.0% | 8.3% | 6.1% | 10.3% | 6.4% | 7.6% | 8.2% |
| Alcohol use (past 30 days) | 4.4% | 2.9% | 3.7% | 3.9% | 2.0% | 3.1% | 2.4% | 2.8% | 2.5% |
| Marijuana use (lifetime) | 2.6% | 1.4% | 1.4% | 0.5% | 0.9% | 1.6% | 0.6% | 1.1% | 1.5% |
| Marijuana use (past 30 days) | 1.3% | 0.8% | 0.6% | 0.2% | 0.5% | 1.3% | 0.0% | 0.2% | 0.6% |
| Prescription drug misuse (lifetime) | 2.1% | 0.6% | 1.1% | 0.7% | | | 2.6% | 3.6% | 3.7% |
| Prescription drug misuse (past 30 days) | | | | | | | 0.8% | 0.8% | 1.4% |

- Tobacco and nicotine use remains relatively low.
- Alcohol use has not changed dramatically since 2010. Lifetime use peaked in 2021 at 10%, and over time, current use has ranged between 2 - 4%.
- Lifetime misuse of prescription drugs increased from 2010 to 2025.

# Trends in Alcohol Use

## Curtis 7th & 8th Grade Students - November 2025

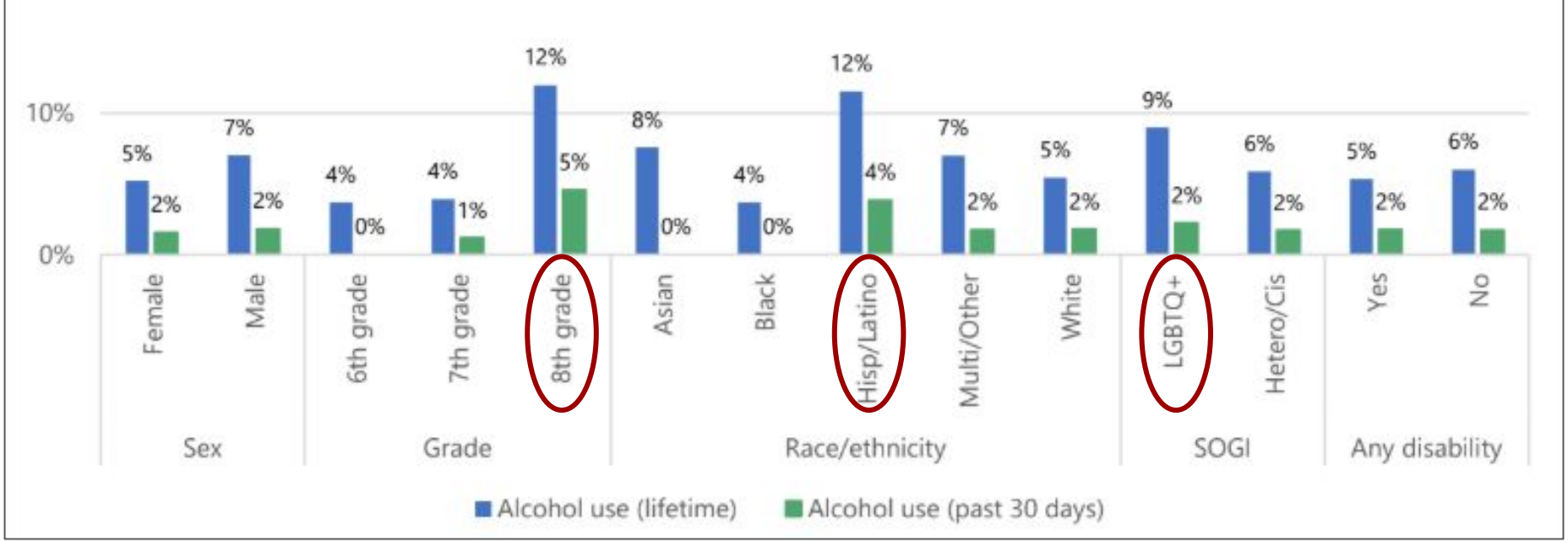
| | District (%) | | | | | | | | | | MetroWest Region (%) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | 2006 | 2008 | 2010 | 2012 | 2014 | 2016 | 2018 | 2021 | 2023 | 2025 | 2025 |
| | — | — | *(620)* | *(664)* | *(650)* | *(623)* | *(563)* | *(558)* | *(503)* | *(472)* | *(10,331)* |
| ***ALCOHOL USE**** | | | | | | | | | | | |
| Lifetime alcohol use (Q46) | — | — | 8.9 | 7.2 | 9.0 | 8.3 | 6.1 | 10.3 | 6.4 | 7.6 | 8.2 |
| Had first drink of alcohol before age 11 years (Q47) | — | — | 3.3 | 3.2 | 3.4 | 3.1 | 3.0 | 5.1 | 2.4 | 2.8 | 3.4 |
| Current alcohol use (past 30 days) (Q48) | — | — | 4.4 | 2.9 | 3.7 | 3.9 | 2.0 | 3.1 | 2.4 | 2.8 | 2.5 |
| Binge drinking (past 30 days)† (Q51) | — | — | 1.6 | 0.9 | 0.5 | 0.3 | 0.0 | 1.3 | 0.2 | 0.4 | 0.4 |
| Was "drunk" from consuming alcohol (past 30 days) (Q49) | — | — | 1.5 | 0.8 | 0.9 | 0.7 | 0.5 | 1.1 | 0.6 | 0.4 | 0.5 |
| Went to a party/hung out where alcohol was available (past 30 days) (Q50) | — | — | 5.2 | 6.8 | 5.6 | 5.3 | 4.3 | 5.3 | 2.8 | 5.7 | 5.5 |
| Ever rode in car driven by a high school student who had been drinking (Q53) | — | — | — | 0.9 | 1.2 | 0.7 | 0.9 | 2.5 | 0.6 | 1.7 | 1.4 |
| Perceived risk of having five or more drinks of alcohol once or twice a week (moderate/great risk) (Q54) | — | — | — | — | — | — | — | 87.4 | 87.6 | 86.6 | 88.2 |

- Alcohol use has not changed dramatically from 2010. Lifetime use declined from a high 10% in 2010 to 6% in 2023, with reports at about 8% in 2025.
- Current drinking has been similar in recent surveys, with approximately 3% reporting alcohol use in the past 30 days.

*These questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. It also includes drinking hard seltzers (seltzer water that contains alcohol, like White Claw, Truly, or High Noon), hard lemonade, hard cider, and "ready-to-drink" or pre-made cocktails that contain alcohol. For these questions, drinking alcohol does <u>not</u> include drinking a few sips of wine for religious purposes."*

# Demographic Pattern in Alcohol Use

## Curtis Grades 6 - 8 - November 2025




- Alcohol use is similar among females and males.
- Both lifetime use and current drinking are higher in 8th grade compared to lower grades.
- Rates of lifetime alcohol use are higher among Hispanic/Latino and LGBTQ+ students.

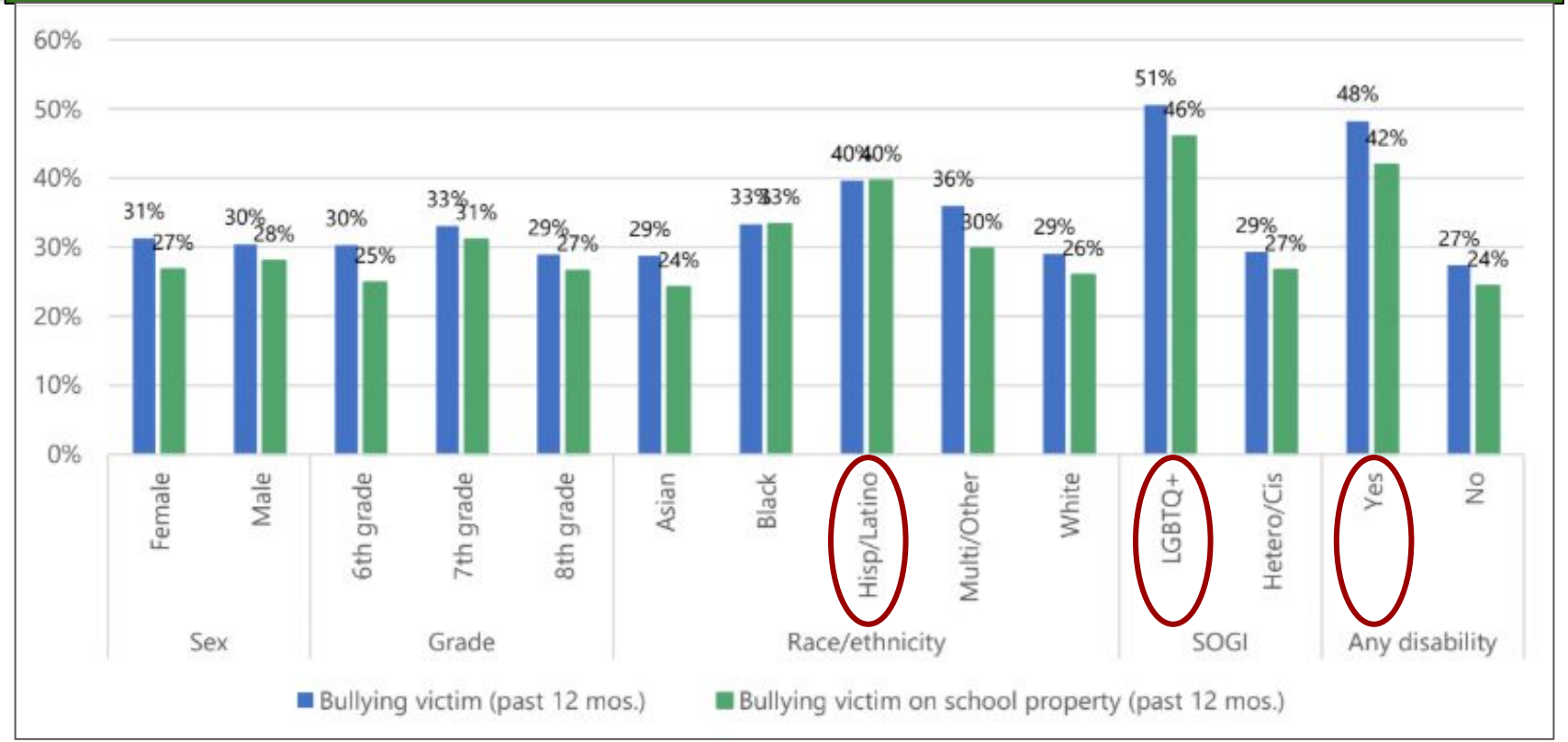
# Trends in Bullying and Cyberbullying
## Curtis 7th and 8th Grade Students - November 2025

| | District (%) | | | | | | | | | | MetroWest Region (%) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | 2006 | 2008 | 2010 | 2012 | 2014 | 2016 | 2018 | 2021 | 2023 | 2025 | 2025 |
| | — | — | *(620)* | *(664)* | *(650)* | *(623)* | *(563)* | *(558)* | *(503)* | *(472)* | *(10,331)* |
| ***BULLYING (past 12 months)**** | | | | | | | | | | | |
| Been a victim of bullying (Q25) | — | — | 38.5 | 34.5 | 28.7 | 28.4 | 26.5 | 32.4 | 30.0 | 31.1 | 30.0 |
| Been a victim of bullying on school property (Q26) | — | — | 30.1 | 28.2 | 22.8 | 23.2 | 22.6 | 25.5 | 26.8 | 29.0 | 27.6 |
| Bullied someone else (Q29) | — | — | 20.9 | 10.6 | 7.6 | 9.9 | 5.9 | 9.0 | 10.0 | 7.4 | 9.6 |
| Bullied someone else on school property (Q30) | — | — | — | 4.7 | 4.1 | 5.4 | 3.6 | 5.4 | 6.2 | 4.9 | 6.8 |
| Talked to a teacher/adult from school about being bullied (Q27) | — | — | 9.1 | 10.6 | 8.0 | 12.2 | 8.8 | 9.2 | 11.4 | 9.5 | 12.6 |
| Talked to a parent/adult outside of school about being bullied (Q28) | — | — | 17.5 | 20.9 | 16.9 | 21.0 | 14.6 | 17.9 | 18.2 | 18.2 | 19.3 |
| ***CYBERBULLYING (past 12 months)†*** | | | | | | | | | | | |
| Been a victim of cyberbullying (Q31) | — | — | 13.5 | 16.1 | 16.2 | 18.0 | 13.3 | 24.1 | 13.5 | 15.3 | 18.4 |
| Cyberbullied someone else (Q34) | — | — | 7.5 | 5.3 | 4.7 | 4.6 | 3.4 | 8.0 | 5.2 | 4.7 | 5.6 |
| Talked to a teacher/adult from school about being cyberbullied (Q32) | — | — | 2.4 | 2.6 | 3.1 | 3.4 | 2.9 | 4.5 | 2.8 | 3.2 | 4.0 |
| Talked to a parent/adult outside of school about being cyberbullied (Q33) | — | — | 4.1 | 7.0 | 5.6 | 7.6 | 5.0 | 7.2 | 4.2 | 5.7 | 6.5 |
| ***IDENTITY-BASED BULLYING (at school and/or electronically, past 12 months)‡*** | | | | | | | | | | | |
| Bullied because of your race or ethnicity (Q35a) | — | — | — | — | — | — | — | 8.0 | 11.8 | 10.2 | 13.7 |
| Bullied because of your religion or culture (Q35b) | — | — | — | — | — | — | — | 6.9 | 8.8 | 6.8 | 8.1 |
| Bullied because of your gender (Q35c) | — | — | — | — | — | — | — | 7.7 | 4.8 | 4.5 | 5.1 |
| Bullied because of your sexual orientation or what others think it is (Q35d) | — | — | — | — | — | — | — | 8.8 | 5.6 | 6.4 | 5.7 |
| Bullied because of a disability you have or others think you have (Q35e) | — | — | — | — | — | — | — | 6.4 | 5.4 | 5.5 | 6.8 |
| Bullied because of your height or weight or how you look (Q35f) | — | — | — | — | — | — | — | 28.3 | 27.6 | 25.3 | 33.9 |

- Students reported slight increases in both bullying on school property & cyberbullying between 2023 and 2025.
- Among students who reported experiencing mistreatment, appearance was the most frequently identified reason, cited by 25% of respondents.

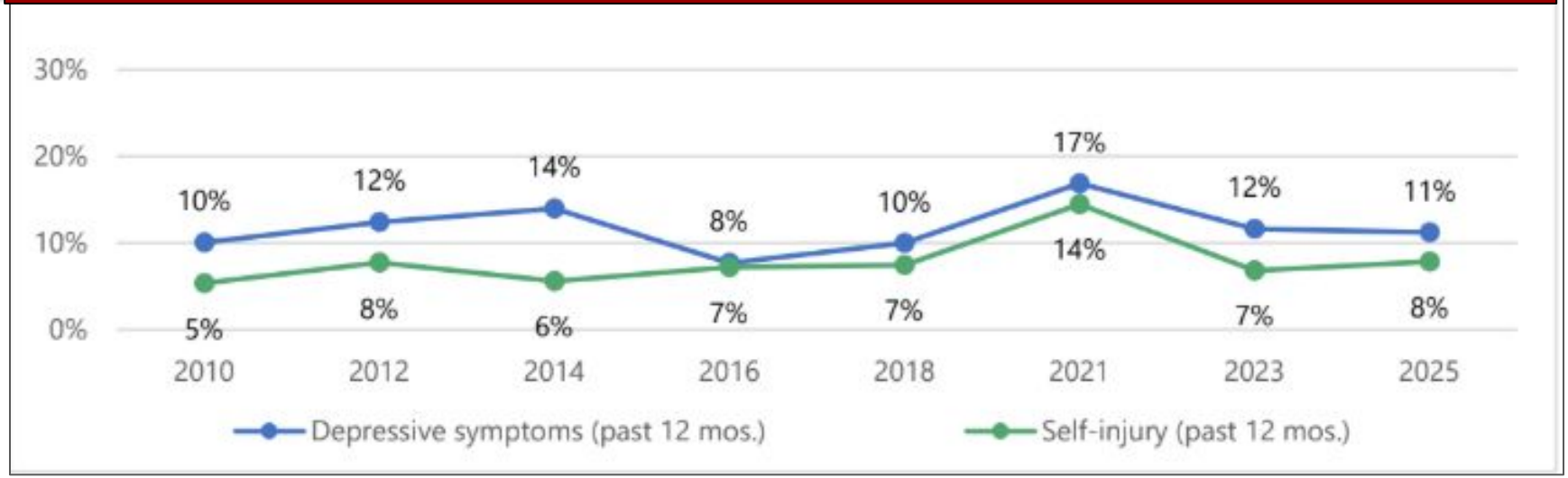
# Demographic Patterns in Bullying

## Curtis 6th - 8th Grade Students - November 2025



# Trends in Mental Health: Depressive Symptoms and Self-Injury

## Curtis 7th & 8th Grade Students - November 2025

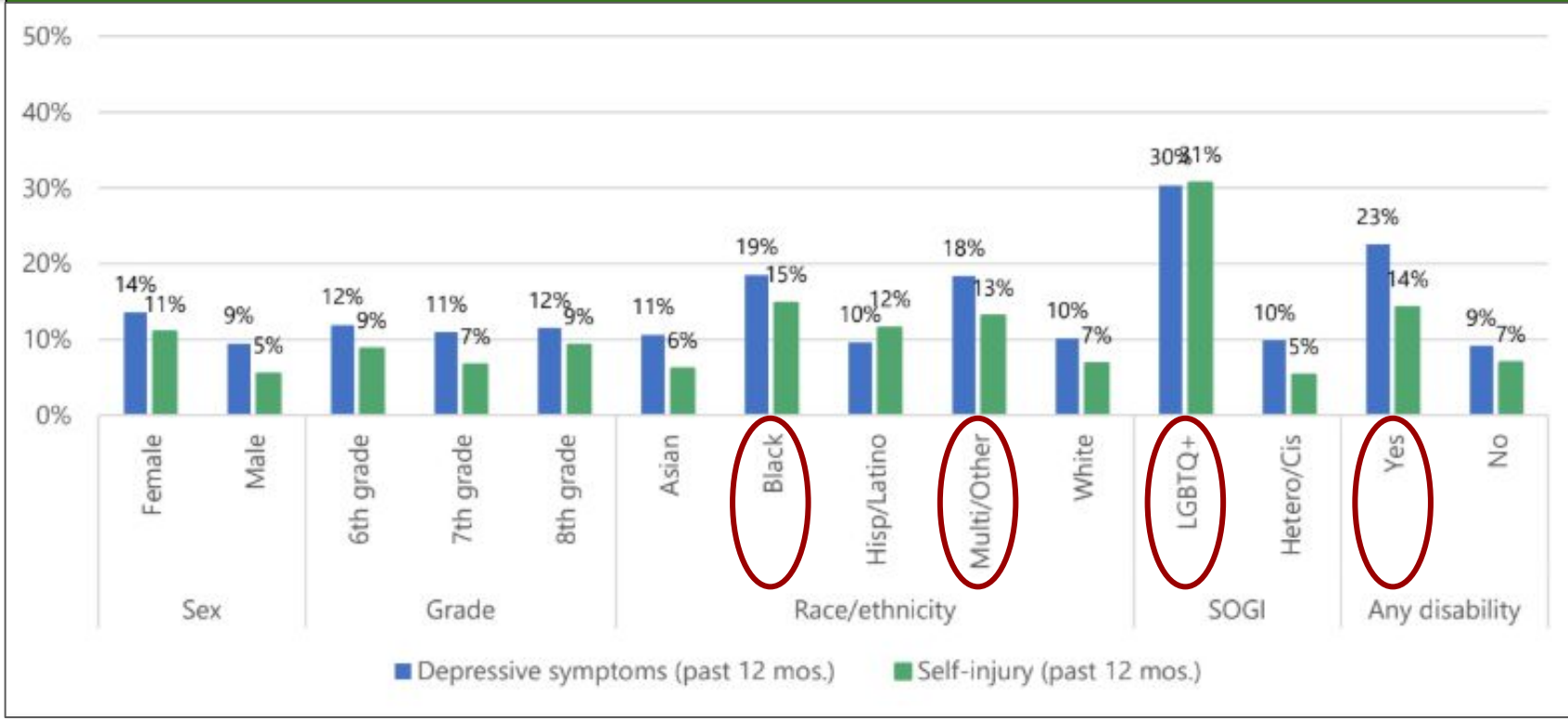



- After rising to a high of 17% in 2021, reports of depressive symptoms in the past 12 months decreased to 11% over the past two surveys.
- Reports of intentional self-injury in the past 12 months follow a similar pattern, decreasing from a high of 14% in 2021 to 8% in 2025.

**Depressive symptoms are defined as feeling so sad or hopeless almost every day for two weeks or more in a row that you stopped doing usual activities in the past 12 months. **Self-injury is defined as hurting yourself on purpose.*

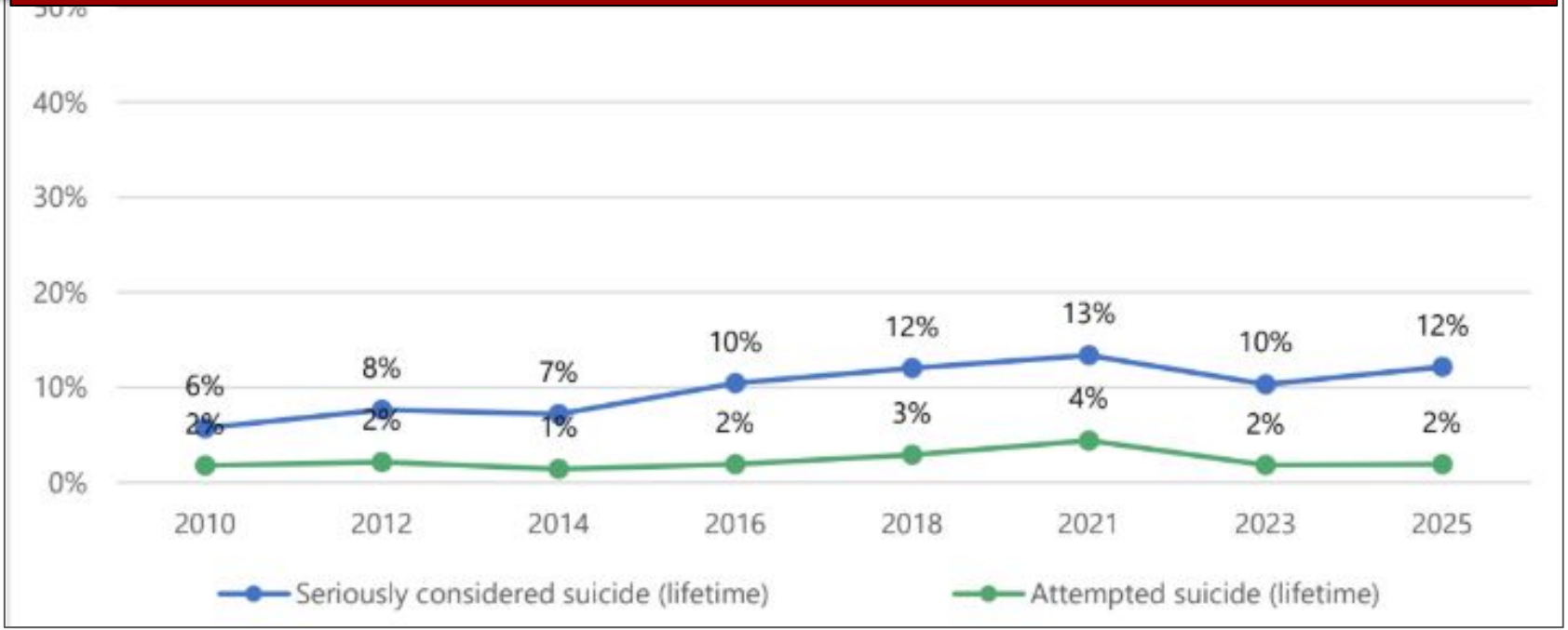
# Demographic Patterns in Depressive Symptoms and Self-Injury

## Curtis 6th - 8th Grade Students - November 2025



# Trends in Mental Health: Suicidality

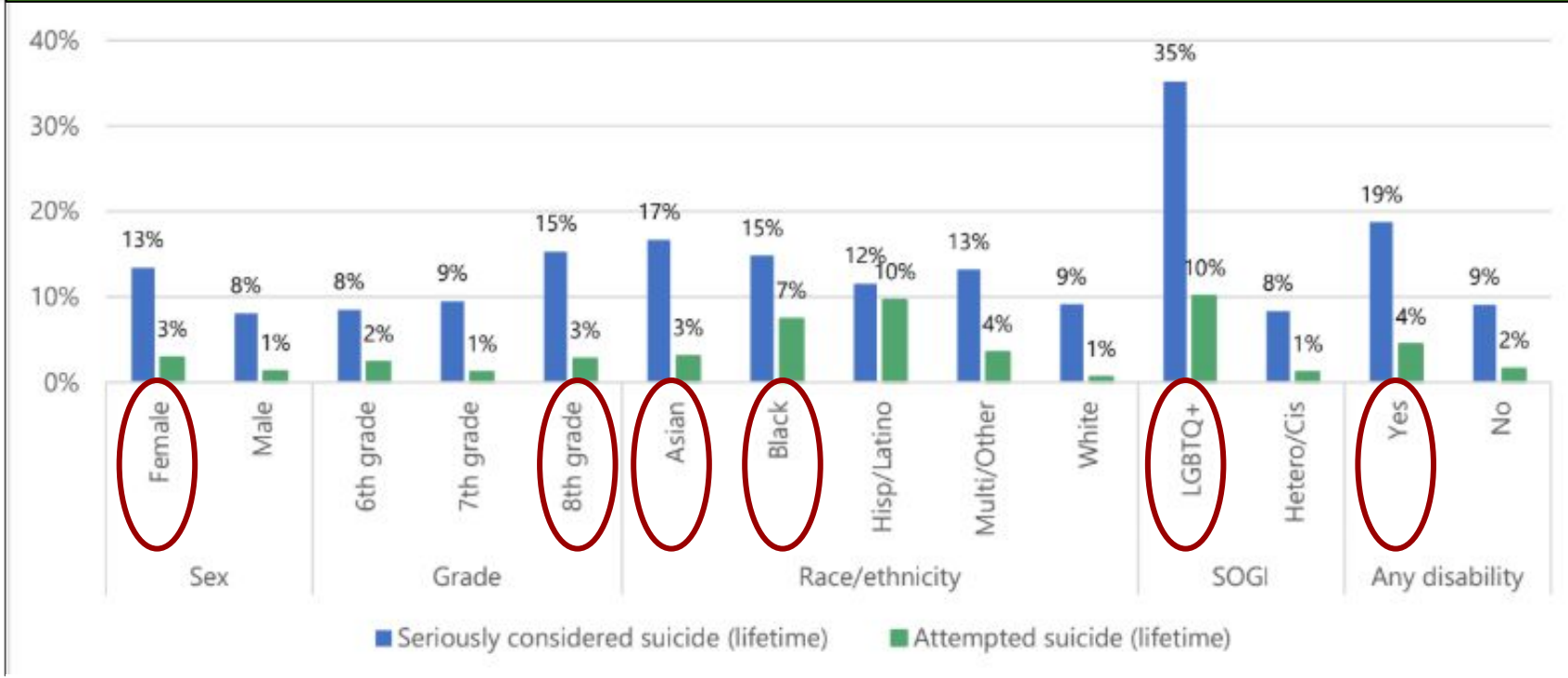
## Curtis Grades 7 and 8 - November 2025




- The proportion of youth who seriously considered suicide in their lifetime has ranged from 10-13% since 2016, with 2025 reports at 12%.
- Lifetime reports of suicide attemps decreased from 4% in 2021 to 2% in 2025.

# Demographic Patterns in Suicidality

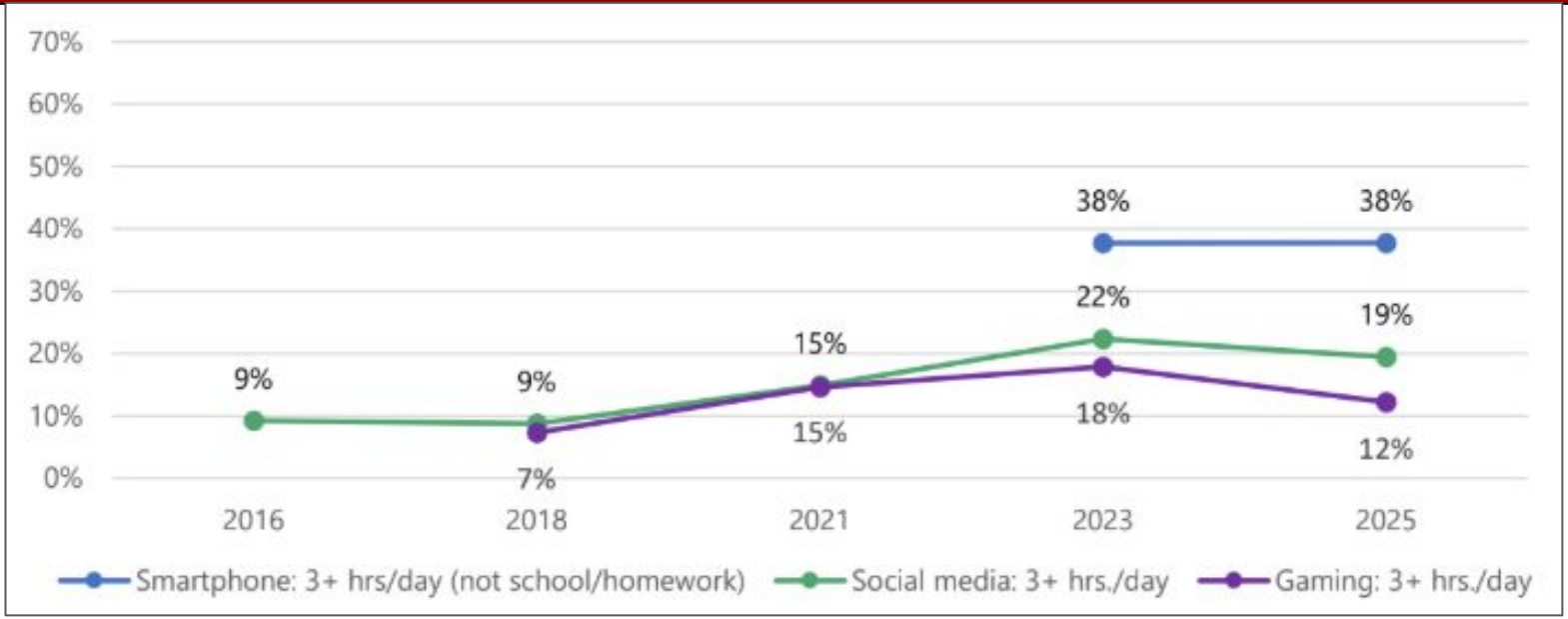
## Curtis 6th - 8th Grade Students - November 2025




- Reported suicidal thoughts are not evenly distributed across student groups, with higher rates among certain populations, including female students, 8th graders, LGBTQ+ students, students of color, and students with disabilities.

# Trends and Patterns in Digital Media Use

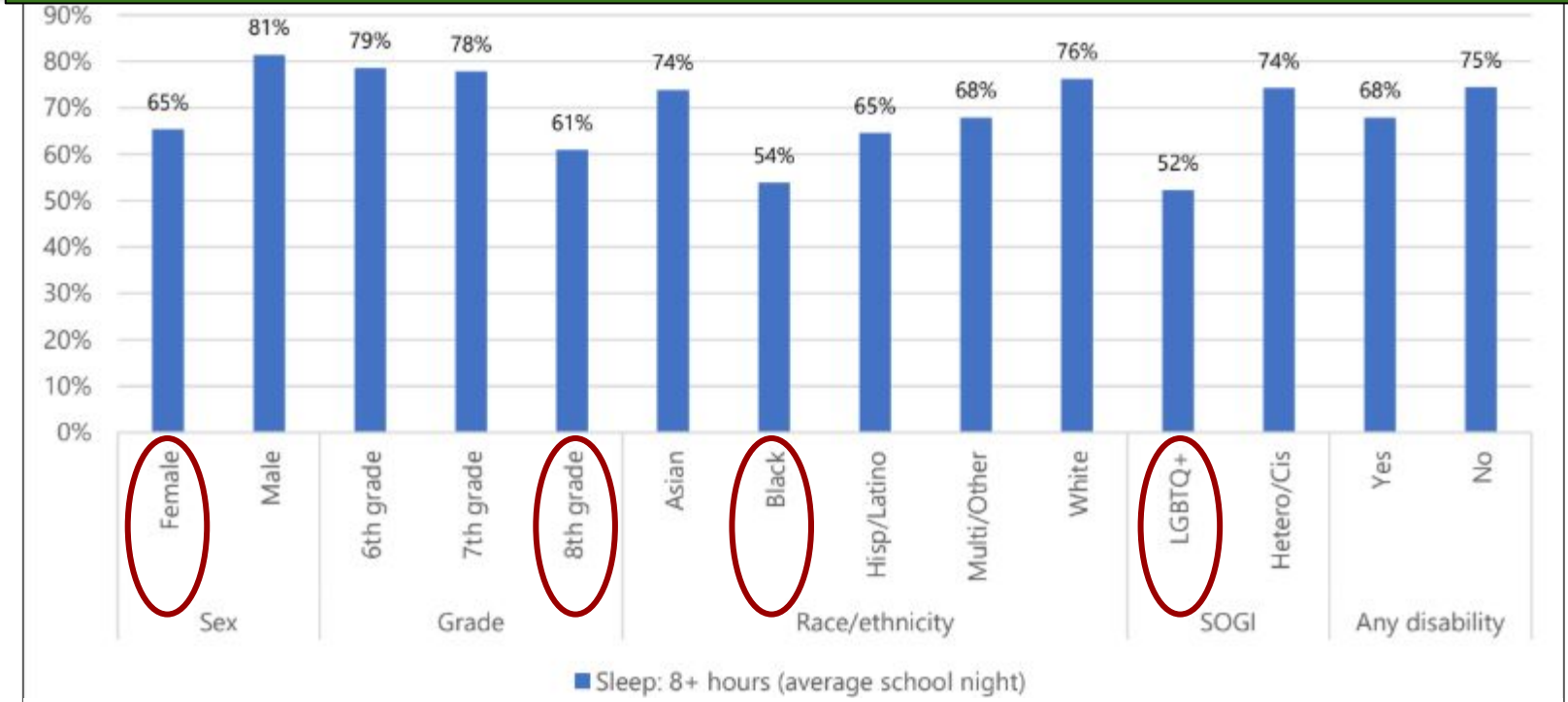
## Curtis 7th & 8th Grade Students - November 2025




- Social media use (3 or more hours per day) decreased from 22% in 2023 to 19% in 2025.
- Digital media use varies by racial/ethnic group, with the highest levels of phone use, social media use, and gaming reported by Black and Hispanic/Latino youth compared to other groups.
- Use of all three types of digital media are slightly higher among LGBTQ+ youth compared to hetero/sisgender youth, and among youth with disabilities compared to nondisabled youth.

# Demographic Patterns in Sleep

## Curtis 6th - 8th Grade Students - November 2025




- Males are more likely than females to report getting 8 hours of sleep; rates are lower among 8th graders.
- Sleep duration varies by student group, with lower rates among LGBTQ+ students and students with disabilities.

# What the Data Tells Us

- **Strong relationships are a protective factor.** Students report positive levels of adult support at home and school, with increases in adult and peer support since 2021 and decreases in loneliness and exclusion.
- **Experiences of connection and belonging are inconsistent across subgroups**. Black, Hispanic/Latino, LGBTQ+, and students with disabilities (SWD) report lower levels of school connectedness and, in some areas, less positive school experiences.
- **Substance use remains relatively low overall**. Curtis rates are at or below regional percentages; however, increases in alcohol use and prescription drug misuse since 2023 warrant attention.
- **Bullying and cyberbullying remain areas of focus**. Rates have increased slightly, with Hispanic/Latino, LGBTQ+, and students with disabilities reporting higher rates of mistreatment.
- **Suicidality remains an area of focus.** The percentage of youth who have seriously considered suicide in their lifetime has remained relatively consistent (10–13%) since 2016, with the most recent report at 12%. LGBTQ+ students report the highest rates.
- **Healthy habits and digital media use present a mixed picture**. Many students report inadequate sleep, while the proportion spending three or more hours daily on social media and gaming has declined.

# Safe and Supportive Schools Model

## School Climate

- Welcoming Routines
- Connection Activities
- Silent Mentoring
- **School Climate Surveys**
- Violence Prevention
- Responsive Practices
- LGBTQ+ Inclusive

## Social-Emotional Learning

- Evidence-Based Curricula
- Core Subject Integration
- SEL Assessments
- Targeted Supports
- Foundational Practices
- Trauma-Sensitive
- Responsive Teaching

## Mental Health

- Health Education
- Substance Use Prev & SBIRT
- **Student Health Surveys**
- Suicide Prev Education
- Professional Development
- Depression/SI Screen
- Transition Programs

## School Safety

- Visitor Management
- Safety Care Training
- Say Something Training
- Behavior Expectations Chart
- Adult Response Rubric
- Police & Fire Partnerships

## Emergency Mgmt

- Safety and Fire Drills
- Threat Assessment
- Suicide Intervention
- CPR & First Aid
- Reunification Plan
- District Crisis Teams

## Safety Assessment

- Protocols & Policies
- Risk Assess Training
- Safety Plans
- Building Safety Teams
- Anonymous Reporting

# Curriculum and Instruction: Building Skills for Lifelong Well-Being

**Social-Emotional Learning & Skill Development:** SEL integration across classroom instruction and Second Step instruction during middle school Connection Block.

| 6th Grade | 7th Grade | 8th Grade |
|---|---|---|
| Wellness Wheel | Disease Prevention | Risk Factors and Disease Prevention |
| Safety & Injury Prevention | Stress Management | Media Literacy and Consumer Health |
| Decision-Making Model and Support Systems | Mental Health: Depression and Suicide Awareness | Mental Health: Depression and Suicide Awareness |
| Relationship Skills and Bullying Prevention | Digital Well-Being and Cyberbullying Prevention | Decision-Making and Substance Use Prevention |
| Nutrition | Substance Use Prevention | Relationship Skills |
| Human Development and Puberty | Self-Advocacy | Community and Public Health |

Aligned to: Massachusetts Comprehensive Health and Physical Education Framework 2023, SHAPE National Health Standards 2024, and CASEL SEL Competencies

# Pathways to Connection, Support, and Belonging

### Supports & Early Identification

- SEL Assessments
- SBIRT: Substance use screening
- BSAD: Brief depression and suicide screening
- Connection Card activity and silent mentoring
- High school mentors supporting middle school students
- School counselor check-ins and individual supports

### Safe, Supportive & Connected School Communities

- Schoolwide behavior expectations and charts
- Say Something Anonymous Reporting System
- Student Connectedness Survey and school climate monitoring
- Curtis Café and opportunities for student connection

### Student Engagement, Leadership & Belonging

- Diversity Club
- Playbook Initiative
- Tenacity Challenge
- Curtis Angels civic action group
- Interscholastic athletics, student clubs, and Unified Sports
- Unified Field Day

### Schoolwide Community-Building Initiatives

- Kindness Week
- Digital Citizenship Week
- Other themed weeks and schoolwide activities that promote inclusion, positive relationships, and responsible decision-making

# From Data to Action

Building Capacity & Supporting Student Well-Being



# Using Data to Strengthen School Climate & Adult Capacity



- **District Leadership Team**: Data dive focused on the student experience, using local data to identify patterns, explore opportunities, and develop school climate action steps across the district.
- **Middle School Staff Professional Learning**: Dedicated time to explore student data and experiences, strengthen understanding of school climate and belonging, and build educator capacity to implement inclusive practices that help all students feel welcomed, connected, and valued.
- **Continuous Improvement**: Ongoing use of student data, reflection, action planning, and follow-up to monitor progress, inform next steps, and strengthen school climate as part of our districtwide continuous improvement cycle.
-

# Partnerships & Grant-Supported Initiatives



## Community Partnerships & Advisory Groups

- LGBTQ+ PAC and SEPAC: Ongoing partnerships to strengthen inclusion, belonging, student and family experiences, and supportive school practices.
- Anti-Hate/Anti-Bias Task Force: Collaboration among district staff and community members to advance the district's work around addressing hate, bias, microaggressions, and creating safe and inclusive school environments.

## Grant-Supported Initiatives

1. **CJP Grassroots Grant** - Professional learning to strengthen staff capacity to recognize, intervene, and respond to hate speech and bias-related incidents.
2. **MetroWest Health Foundation Grant**
    - Launch a Youth Action Group using No Place for Hate materials.
    - Develop an initiative to reduce mental health stigma and barriers to seeking help.
    - Build educator capacity to strengthen student belonging and connection for all of our students.
    - Conduct student focus groups to better understand student experiences and identify opportunities for action.

# Continuing to Strengthen Curriculum, Instruction and Supports



- Review and **revise selected health education units** to address priority areas identified through youth health data, including the addition of a Adapted Health Education course.
- Strengthen developmentally appropriate instruction related to mental health, help-seeking, substance use prevention, healthy relationships, and other identified needs.
- Continue aligning instruction with student needs, current research, and opportunities to **build protective factors and healthy decision-making skills**.
- **Mental Health Supports**: Continue responding to students' evolving mental health needs while strengthening staff capacity to recognize concerns, provide appropriate support, and connect students with resources.

We welcome your questions, feedback, and ideas as we reflect on the MetroWest Adolescent Health Survey data and consider next steps for continued action and collaboration.

# SPS LGBTQ+ PAC
# Mid-year Update

November 16, 2026

# Mission Statement

The SPS LGBTQ+ PAC strives for the understanding of, respect for, and support of all children and families who belong to the SPS LGBTQ+ community.

# Vision

The SPS LGBTQ+ community feels joyful, safe, welcomed, and supported by the school district every single day as their authentic selves.

# What we've accomplished.

6 ➔ SPS Open houses

4 ➔ Community Events

- Parent meetups
- Family meetups
  - Friendsgiving
    - *Partnered with Sudbury Pride & Congregation Beth El*

# What we're working on.

- ➔ Superintendent search committee
- ➔ Supporting alignment with MA state standards
- ➔ Professional Development resources
- ➔ Incident data collection & best practice for supporting LGBTQ+ community
- ➔ Responding to incidents targeting LGBTQ+ students
- ➔ Planning for and handling privacy concerns for Field Trips

# Connect with us.

We aim to reach the entire SPS LGBTQ+ community

*Allies always included!*

sudburylgbtqpac.org

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 4 - Consent Calendar
a. Approval of SERF Grant
b. Monthly Accounts Payable and Payroll Warrants Submission

**Recommendation:**

Motion to approve the Consent Calendar as presented//amended.

**Background / Preparation Information:**

4a. Approval of SERF Grant Funds – The School Committee must approve any funds brought into the district. Please review and bring any questions that will help you determine if you want these monies to be moved into our budget.

4b. Monthly Accounts Payable and Payroll Warrants Submission – Please review and bring any questions

**Attachments:**
**SC Memo SERF grant 11-16-26 (1)**
**Monthly Accounts Payable and Payroll Warrants_111626**

**Action:** **XX** **Report:** **Discussion:** **XX**

# *Sudbury Public Schools*

*40 Fairbank Road*
*Sudbury, Massachusetts 01776*
*Phone: (978) 639-3211*

**Annette Doyle**
Interim Superintendent of Schools
annette_doyle@sudbury.k12.ma.us

**Carol Cavanaugh**
Interim Assistant Superintendent
carol_cavanaugh@sudbury.k12.ma.us


To: School Committee

From: Carol Cavanaugh, Interim Assistant Superintendent

Date: November 16, 2026

Re: SERF Grant ID #F26MG02

Principal Sara Harvey and Assistant Principal Michelle Savage have received a SERF grant for their project entitled “Building Executive Function Capacity: Creating Consistent Schoolwide Practices to Support Learning, Independence, and Student Wellness.”

The grant will enable Loring School to develop a consistent, schoolwide approach to supporting executive function skills through professional learning, collaboration, classroom application, and partnership with Landmark Outreach.

I am requesting that the School Committee vote to accept the SERF grant for the above-noted purposes in the amount of $2,500.

## SUDBURY PUBLIC SCHOOLS

Office of the Director of Business and Human Resources

**To:** School Committee

**Date:** 11/16/2026

**RE:** FY27 Accounts Payable & Payroll Warrants Processed

With the required School Committee approvals received, the following Accounts Payable Warrants and Payroll Warrants were processed for payment during the current period:

| Date: | Warrant Type: | Warrant #: | Amount $: |
|---|---|---|---|
| 10/28/2026 | Payroll | P/R 10/29/2026 | $ 1,650,009.85 |
| 11/10/2026 | Payroll | P/R 11/12/2026 | $ 1,666,851.11 |
| | | | |
| 10/22/2026 | Accounts Payable | 1316 | $ 3,006,925.67 |
| 10/29/2026 | Accounts Payable | 1317 | $ 417,877.19 |
| 11/5/2026 | Accounts Payable | 1318 | $ 598,649.22 |
| 11/5/2026 | Accounts Payable | 1319 | $ 7,390.76 |
| 11/12/2026 | Accounts Payable | 3 | $ 17.79 |
| 11/12/2026 | Accounts Payable | 1320 | $ 394,210.35 |

**Buckner Creel**
**Acting Director of Business and Human Resources**

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 5a - Superintendent Search Summary of Community Input
i. Revise Job Posting
ii. Community Forum Update

**Recommendation:**

Motion to approve the job posting as presented/amended.

**Background / Preparation Information:**

School Committee members wanted to make changes to our job posting so the Collins Center worked to incorporate revisions to the posting. Please review the new draft and bring any questions or comments.

One member asked this to be on the agenda so we can discuss the timeline of posting and format of the community input sessions. There is no information to review for this topic. A different member asked for the number of participants for each forum. These data are included in the packet.

**Attachments:**
**Updated Sudbury Superintendent Posting for posting (1)**
**Attendance.docx (1)**

**Action:** **XX** **Report:** **Discussion:** **XX**

# SUDBURY PUBLIC SCHOOLS
# SUPERINTENDENT OF SCHOOLS

**40 Fairbank Road, Sudbury, Massachusetts 01776 • www.sudbury.k12.ma.us**

## ABOUT THE SEARCH

The Sudbury Public School Committee has engaged the Collins Center for Public Management at the University of Massachusetts Boston to conduct a comprehensive search for an experienced, principled, and visionary educational leader to serve as the next Superintendent of Schools. The anticipated start date for the position is July 1, 2027.

## SUDBURY COMMUNITY & DISTRICT

Located 20 miles west of Boston, Sudbury is a historic, vibrant New England town renowned for its civic engagement, natural beauty, and deep commitment to public education. Sudbury Public Schools (SPS) is a premier PreK–8 district that consistently ranks among the highest-performing public school systems in Massachusetts.

SPS provides a student-centered education that balances high academic achievement with creativity, collaboration, and social-emotional growth. The district is defined by a blend of community affluence and socioeconomic diversity, reinforcing a shared commitment to both academic excellence and equitable access for every learner.

## WHAT OUR COMMUNITY CELEBRATES

Core strengths that make Sudbury an exceptional place to lead:

- **Extraordinary Educators & Staff:** SPS is anchored by dedicated, highly skilled teachers and support staff who foster warm, caring school cultures and strong relationships with students.
- **A Tradition of Academic Excellence:** The district enjoys a proud reputation for high expectations, strong student outcomes, and preparing learners to thrive as independent, curious thinkers.
- **Engaged Families & Active Partnerships:** Sudbury benefits from deeply invested families, active Parent-Teacher Organizations (PTOs), and strong community volunteerism.
- **Whole-Child Support:** From robust special education and mental health programming to METCO partnerships, the district is committed to the belief that “all means all.”

## DISTRICT BY THE NUMBERS

| GRADE SPAN | ENROLLMENT | WORKFORCE | OPERATING BUDGET |
|---|---|---|---|
| **PreK – Grade 8 (4 Elementary, 1 Middle)** | **~2,500 Students** | **~550 Total Staff (280+ Certified)** | **~$50 Million** |

## STUDENT DEMOGRAPHICS*

77% White | 10% Asian | 9% Multiracial | 7% Hispanic/Latino | 3% Black/African American

30% High Needs | 2% English Language Development (ELD)

*** DESE, November 2026**

## THE LEADERSHIP MANDATE: KEY PRIORITIES

Supported by a seasoned central office and building leadership team, the next Superintendent will inherit a strong foundation while addressing clear priorities identified by the School Committee and broader community:

- **Rebuild Trust Through Transparent Communication:** Serve as an accessible, candid, and visible leader who restores public confidence. The community seeks a superintendent who communicates proactively, explains complex decisions clearly, and actively listens to diverse perspectives.
- **Foster Collaborative Governance:** Partner effectively with the School Committee to establish a healthy, productive governance climate defined by clear role boundaries, mutual respect, and unified strategic direction.
- **Provide Sound Fiscal Stewardship:** Bring strong financial acumen to navigate structural budget constraints, rising operational costs, and long-term capital planning with clarity, accountability, and transparency.
- **Elevate Academic Rigor & Support Diverse Learners:** Maintain SPS's standing as a top-tier district by strengthening literacy outcomes, ensuring curriculum consistency, challenging high-achieving learners, and delivering responsive support for special education and neurodiverse students.
- **Establish a Balanced Vision for Technology & AI:** Lead the district in evaluating instructional technology, Chromebook usage, screen time, and artificial intelligence to ensure digital tools enhance—rather than distract from—deep learning.

## IDEAL CANDIDATE PROFILE & QUALIFICATIONS

The School Committee seeks an ethical consensus-builder with demonstrated instructional expertise, political acumen, and a collaborative leadership style.

### REQUIRED QUALIFICATIONS

- Massachusetts DESE licensure as Superintendent/Assistant Superintendent, or eligibility for licensure.
- Master's degree in Education, Administration, or a related field.
- Ten years in public education, including leadership experience as a district-level administrator, principal, or comparable educational leader.
- Proven track record in leading instructional improvement, curriculum assessment, and organizational change.
- Demonstrated experience managing complex municipal or school budgets and operational systems.
- Exceptional written, verbal, and interpersonal communication skills.

### PREFERRED QUALIFICATIONS

- Earned Doctorate (Ed.D. or Ph.D.).
- Prior experience as a Superintendent of Schools and background as a classroom teacher.
- Experience leading in high-performing, engaged suburban communities with complex stakeholder dynamics.

## SALARY AND BENEFITS

The anticipated starting salary is $230,000 - $270,000 depending on qualifications and experience. The District offers a competitive benefit package.

## APPLICATION PROCESS & CONTACT INFORMATION

**Application Deadline: Wednesday, November 25, 2026**

Interested candidates should email a **letter of interest** and a **resume** to the Collins Center Recruitment Team at **collinscenterrecruit@umb.edu**.

**Subject Line Format: "SPS - Last Name"**

***Note:*** *Applicants should not contact Sudbury Public School Committee members or district staff directly. All applications must be submitted to the Collins Center Recruitment email.*

**For Further Inquiries, Contact:**

**Bill Lupini:** William.Lupini@umb.edu
**Mary Flanders Aicardi:** Mary.Aicardi@umb.edu
**Marie Altieri:** Marie.Altieri@umb.edu

**Collins Center Information:**
**www.umb.edu/cpm**

*The Sudbury Public Schools is an equal opportunity employer committed to expanding workforce diversity and prohibiting discrimination based on race, color, religion, national origin, age, sex, gender identity, sexual orientation, homelessness, or disability across all programs and activities, while fostering a harassment-free environment.*

To: Sudbury School Committee

From: Jessica McCready, Chair

Re: Attendance at Staff and Community Forums

Nov 13, 2026

Dear Members of the Committee,

One member asked for the Collins Center to report the numbers in attendance at the forums held to gather staff and community input on the superintendent search. These numbers are listed below.

In-person Staff Session – 1

Virtual Staff Session – 22

In-person Community Session – 6

Virtual Community Session – 26

As of Nov 13th at noon, the Collins Center had received 203 responses to the online survey.

They are adding one additional virtual and one in-person community forum (staff and community welcome).

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 5b - FY28 Budget Goals

**Recommendation:**

**Background / Preparation Information:**

The Budget Subcommittee recommended that the full Committee review our FY28 Budget Priorities in their timeline. We discussed this earlier this year but did not formalize any items or come to any conclusions on our priorities. Please come to the meeting with your budget goals/priorities/initiatives. We can then decide which ones to provide to the district as they continue to prepare the budget.

**Attachments:**

| | | | | | |
|---|---|---|---|---|---|
| **Action:** | **XX** | **Report:** | | **Discussion:** | **XX** |

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 5c - Curriculum Review

**Recommendation:**

Our Interim Assistant Superintendent prepared information on Curriculum Review for our meetings on Oct 19th and Nov 2 but we did not have the time to hear her presentation. She will share this information with us in this meeting. Please review and bring any questions or comments.

**Background / Preparation Information:**

**Attachments:**
**SPS Curriculum Review Guide FINAL FY26 (1)**

| | | | | | |
|---|---|---|---|---|---|
| **Action:** | **XX** | **Report:** | | **Discussion:** | **XX** |

# Sudbury Public Schools Curriculum Review Guide

## INTRODUCTION

At the heart of any school district is teaching and learning. In Sudbury Public Schools, we believe that when high quality curricula are clearly defined and consistently applied, students will better meet our high academic standards.

By prioritizing regular curriculum renewal, we ensure our units of study remain current, aligned with state and national frameworks, reflective of research-based best practices, and equitable for every student. A unified program of study across all grade levels allows us to set learning benchmarks and use data effectively to track student progress. Most importantly, it provides a stable roadmap for teachers, enabling them to focus on individual student needs while ensuring every child is prepared for the next step in their education. The Sudbury Public Schools remains dedicated to this excellence through our systematic Curriculum Review Process. This process keeps the mission, vision, core values, and equity statement of the Sudbury Public Schools at the center of this important work.

### *Mission*

The Sudbury Public Schools strive to enable all students to reach their intellectual and personal potential. The school system, in partnership with families and the community, will work with integrity and respect to realize the shared vision of enabling students to become lifelong learners and effective contributors of society.

### *Vision*

We are committed to excellence in educating students to be knowledgeable, creative, independent thinkers who are caring collaborative members of the school and wider communities.

### *Core Values*

- Enhance the learning and teaching process to enable and inspire students to achieve their potential
- Actively promote personal responsibility and integrity
- Seek and promote opportunities to advance equity
- Cultivate a lifelong commitment to community

### *Equity Statement*

Sudbury Public Schools are committed to welcoming, affirming, and celebrating all students, staff, and families. Sudbury Public Schools are committed to creating and sustaining a culture that promotes advocacy, equity, and justice for marginalized groups who have been systematically oppressed and excluded. Sudbury Public Schools are committed to an anti-bias education that includes and values the perspectives and histories of diverse peoples.

### *Inclusion Statement*

All means all.
Sudbury Public Schools is committed to being an inclusive environment where all students are full members of our school community. We hold to the belief that all individuals should be respected, valued, and included by peers, teachers, parents/guardians, and the community at large. We are an inclusive environment where all students feel safe and thrive socially, emotionally, physically and academically.

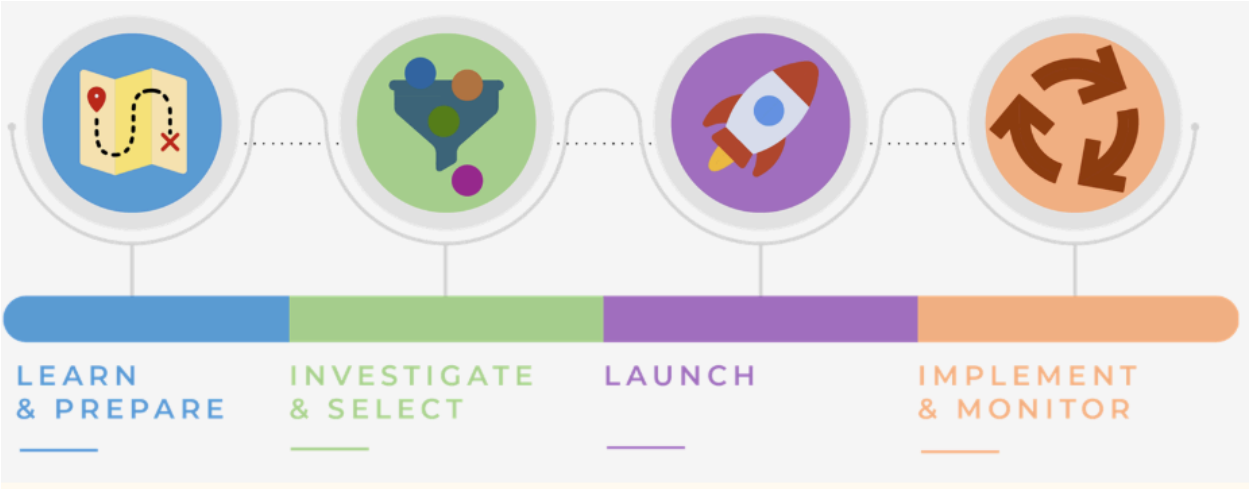
## Purpose of Curriculum

The purpose of the curriculum is to provide a thoughtful, sequenced, well-developed plan to optimize the teaching and learning related to each course of study. Curriculum development considers:

- State and national standards for learning
- Content that students must know to meet the standards
- Skills students must be able to employ to meet the standards
- Habits of mind students need to grow their independence as learners
- Resources to be utilized (textbooks, technology, HQIM - High Quality Instructional Materials)
- Assessments to gauge learning and inform instruction (formative, summative)
- Timelines for lessons and units (scope and sequence, pacing guides)

## What is a Curriculum Review?

A Curriculum Review is a formal, periodic deep-dive into what and how students are being taught in a specific content area. It is a highly-structured, multi-year cycle designed to ensure that teaching materials align with state standards, current research, and community values. The Curriculum Review Team typically includes curriculum leaders, district/building administrators, classroom teachers (preferably 1 per grade level), special educators, EL teachers, coaches, and specialists. SPS has adapted the IMplement MA process and tailored it to our needs for curriculum review.



**Phase 1: Learn & Prepare (1 year)**
The objective of this phase is to conduct an audit of the current state of the program, analyze the strengths and areas for growth, and identify 2-4 priority areas to target in the Curriculum Review process. During this phase, the Curriculum Review Team works collaboratively to review and analyze the strengths and needs of the existing, written, and taught curriculum related to the following areas:

- ☐ Assess alignment to MA state frameworks or appropriate national standards
- ☐ Review student assessment data
- ☐ Evaluate alignment to research-based, best practices in instruction
- ☐ Establish curriculum materials
    - ☐ Are absent of discriminatory content and provide a culturally responsive, balanced view
    - ☐ Incorporate authentic, meaningful opportunities for student engagement
    - ☐ Integrate intentional uses of technology and high quality instructional materials
    - ☐ Contain clear expectations of what must be taught (scope and sequence, pacing)
    - ☐ Are aligned to research-based best practices in instruction
    - ☐ Contain scaffolds and other supports to address gaps in student knowledge and needs of English Learners and students with disabilities
    - ☐ Provide opportunities for extension
    - ☐ Include diversity of assessments that provide meaningful data to guide instruction
    - ☐ Contain appropriate levels of rigor (promotes higher order thinking, inquiry/problem solving)
    - ☐ Has common format of written curriculum that adheres to backwards design
- ☐ Determine the extent to which there are opportunities for cross-disciplinary learning
- ☐ Define proficiency levels
- ☐ Evaluate degree to which the taught curriculum is aligned to the written curriculum
- ☐ Examine Guiding Questions

**Phase 2: Investigate & Select (1-2 years)**
The objective of this phase is to consider the district priorities established in Phase 1 and research curriculum materials or re-design current materials to align with these priorities. The focus will be on the following areas:

- ☐ Familiarize the Curriculum Review team with EdReports rubrics and CURATE
- ☐ Research potential high-quality instructional materials - HQIMs, if applicable
- ☐ Analyze materials through 3 lenses
    - ☐ materials review
    - ☐ brief field test/pilot of 2-3 materials
    - ☐ conduct publisher meetings (if applicable)
- ☐ Identify or re-design instructional materials to meet district priorities and align with state standards
- ☐ Once selected/updated, craft the scope and sequence and pacing guides
- ☐ Craft an Action Plan for Implementation
    - ☐ Identify initial and ongoing professional development needs
    - ☐ Detail budget requirements and procurement needs
    - ☐ Plan a presentation for School Committee
    - ☐ Outline a communication plan for staff and community
    - ☐ Determine plan for assessments and evaluation

**Phase 3: Launch (1 - 2 years)**

Once the curriculum materials have been selected/re-designed and funding has been secured for implementation, it is time to consider how the materials will be launched in the district. This is the time to establish the working expectations for the use of new materials and conduct preliminary training. The focus will be on the following areas:

- ☐ Map out goals for successful implementation and draft a plan
- ☐ Examine the assessments in the new materials and determine their scope, structure, and purpose
- ☐ Audit current district assessments and determine their purposes, quality, and frequency
- ☐ Create an assessment plan – decide how we will use the existing and new assessments at each grade level and create a schedule and expectations for the use of data.
- ☐ Study the structure and units of lessons and establish a pacing schedule and accounting for building schedule challenges
- ☐ Create guidance documents and establish expectations to maintain common experiences for students
- ☐ Establish collaborative planning structures and expectations for collaborative planning
- ☐ Determine the plan for coaching
- ☐ Audit the available training time, determine the training needs for specific groups of educators, and develop a professional development plan

**Phase 4: Implement and Monitor (1 - 4 years)**

This phase involves providing staff the appropriate professional development to successfully implement the new curriculum. The goal of this phase is to engage teachers, support staff, and administration in targeted training on the implementation of the new materials. The other important feature of this phase is continually monitoring the work in action to gather data and adjust the plan. The focus will be on the following areas:

- ☐ Provide sustained, systemic professional development with a plan to support new teachers including topics such as:
    - ☐ Understanding the design of the curriculum and alignment to standards
    - ☐ Utilizing the materials at the lesson and unit level
    - ☐ Implementing the instructional practices and routines within the curriculum
    - ☐ Adapting the materials where there are deficiencies (no curriculum is perfect!)
    - ☐ Using the new assessments identified in Phase 3
- ☐ Distribute all materials required for the new curriculum
- ☐ Support implementation through coaching, collaboration, and feedback
- ☐ Gather data to measure progress towards identified goals
- ☐ Monitor implementation including
    - ☐ Collaborative and/or independent planning needs
    - ☐ Use of the new instructional materials
    - ☐ Student engagement and feedback
    - ☐ Teacher and administrator feedback
    - ☐ Professional development/training successes and deficiencies

# Roles and Responsibilities of the Curriculum Review Committee

**The Curriculum Review Team may include:**

- Assistant Superintendent for Teaching and Learning
- Principals and/or Assistant Principals
- Curriculum Coordinators
- Teachers (preferably 1 per grade level)
- Special Educators, ELD Teachers, Coaches, Specialists
- Selected Expert Consultants

**Assistant Superintendent for Teaching and Learning**

- Supervises the curriculum review process for the district
- Initiates and maintains contact with the Curriculum Review Team
- Convenes meetings to develop action plans and timelines
- Provides support to the process, including time and resources
- Provides feedback on the documentation materials prepared by the Curriculum Review Team
- Communicates with the Superintendent and the School Committee

**Principal / Assistant Principal**

- Communicates the district's agreed-upon curriculum and maintains a focus on its implementation
- Provides support and leadership to the curriculum review process by providing needed time and resources
- Creates accountability mechanisms for ensuring the curriculum is utilized consistently and with integrity.

**Curriculum Coordinator**

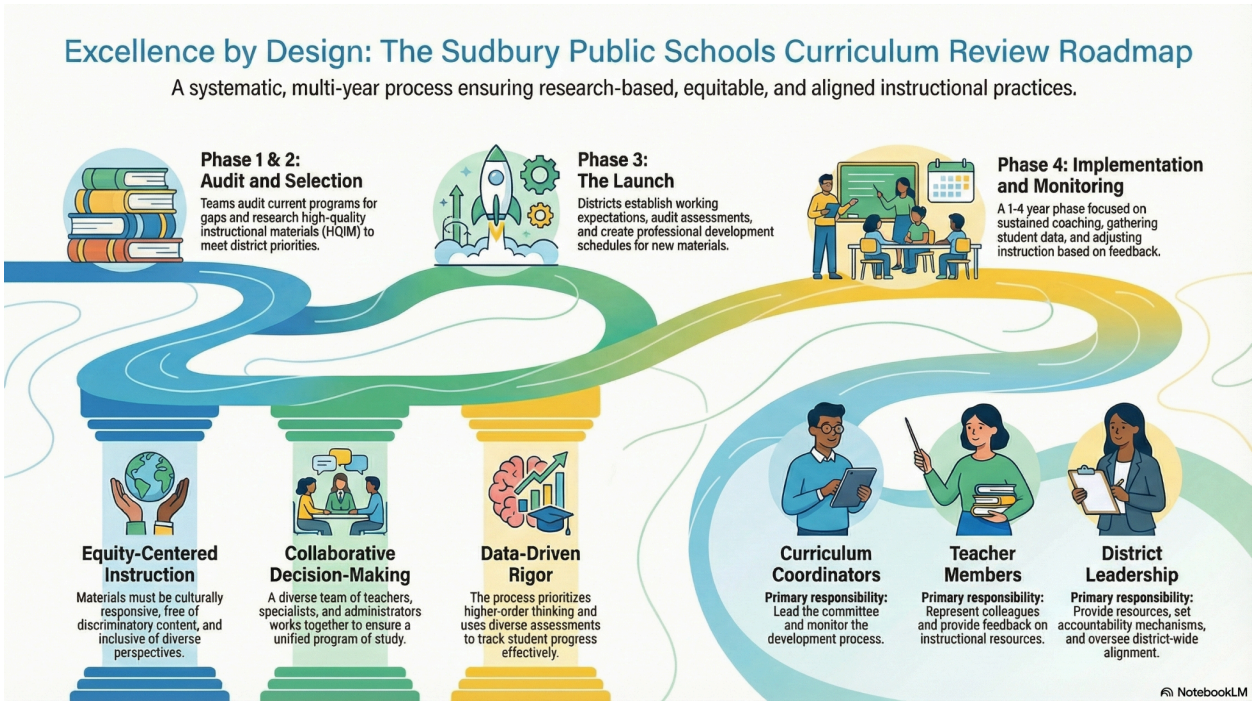
- Leads the Curriculum Review Committee for their content area
- Coordinates and monitors the curriculum development process for their assigned content area
- Maintains an ongoing discussion with faculty regarding the agreed upon curriculum
- Provides professional development and support on the curriculum development process
- Oversees scope, sequence, pacing guides, instructional and assessment implementation
- Joins a curriculum review committee outside their content area
- Consults technology department during the review process

**Teacher Committee Member**

- Examines new materials and/or revise current curriculum
- Provides feedback on instructional resources and needed professional development
- Serves as a liaison to colleagues regarding information about the curriculum and the curriculum review process
- Represents other teachers in the process
- Selects common assessment in partnership with curriculum leaders

**During the process, the Curriculum Review Team is responsible for:**

- Reviewing/assessing the existing curriculum
- Collecting and analyzing relevant documents and data
- Examining appropriate HQIMs (High Quality Instructional Materials)
- Interrogating current practice with an eye toward impact on student achievement for all learners
- Developing a proposed action plan for implementation of selected material


Excellence by Design: The Sudbury Public Schools Curriculum Review Roadmap
A systematic, multi-year process ensuring research-based, equitable, and aligned instructional practices.
Phase 1 & 2:
Audit and Selection
Teams audit current programs for gaps and research high-quality instructional materials (HQIM) to meet district priorities.
Phase 3:
The Launch
Districts establish working expectations, audit assessments, and create professional development schedules for new materials.
Phase 4: Implementation and Monitoring
A 1-4 year phase focused on sustained coaching, gathering student data, and adjusting instruction based on feedback.
Equity-Centered Instruction
Materials must be culturally responsive, free of discriminatory content, and inclusive of diverse perspectives.
Collaborative Decision-Making
A diverse team of teachers, specialists, and administrators works together to ensure a unified program of study.
Data-Driven Rigor
The process prioritizes higher-order thinking and uses diverse assessments to track student progress effectively.
Curriculum Coordinators
Primary responsibility: Lead the committee and monitor the development process.
Teacher Members
Primary responsibility: Represent colleagues and provide feedback on instructional resources.
District Leadership
Primary responsibility: Provide resources, set accountability mechanisms, and oversee district-wide alignment.
NotebookLM

## CURRICULUM REVIEW CYCLE: CONTENT FOCUS AREAS

***By Content Area:***

| Content Area Focus | Phase 1: Learn and Prepare | Phase 2: Investigate and Select | Phase 3: Launch | Phase 4: Implement and Monitor |
|---|---|---|---|---|
| ELA | ES & MS 2031-2032 | ES & MS 2032-2033 | ES & MS 2033-2034 | ES 2025-2030<br>ES & MS 2034-2038 |
| Mathematics | 2029-2030 | 2030-2032 | 2032-2033 | 2025-2029*<br>2033-2037 |
| Social Studies | 2027-2028 | 2028-2029 | 2029-2030 | 2030-2033 |
| Science | ES 2026-2027<br>MS 2030-2031 | ES 2027-2028<br>MS 2031-2032 | ES 2028-2029<br>MS 2032-2033 | ES 2030 - 2035<br>MS 2025-2030 |
| Physical Education | 2024-2025 | 2025-2026 | 2026-2027 | 2027-2031 |
| Health Education | ES 2022-2023<br>ES 2029-2030<br>MS 2030-2031 | ES 2023-2024<br><br>MS 2031-2032 | ES 2024-2025<br>MS 2025-2026**<br>MS 2032-2033 | ES 2025-2029<br>MS 2026-2030<br>MS 2033-2037 |
| Social-Emotional Learning | ES 2027-2028<br>MS 2026-2027 | ES 2028-2029<br>MS 2027-2028 | ES 2029-2030<br>MS 2028-2029 | ES 2030-2034<br>MS 2029-2033 |
| World Language | ES 2025-2026<br>MS 2026-2027 | ES 2026-2027<br>MS 2027-2028 | ES 2027-2029<br>MS 2028-2030 | ES: 2029-2034<br>MS 2030-2035 |
| Digital Literacy & Computer Science | ES 2018-2019<br>ES 2029-2030<br><br>MS 2031-2032 | ES 2022-2023<br><br><br>MS: 2032-2033 | ES: 2023-2024<br><br>MS 2026-2027***<br>MS: 2033-2034 | ES: 2024-2028<br><br>MS 2027-2031<br>MS 2034-2039 |
| Preschool | 2027-2028 | 2028-2029 | 2029-2030 | 2030-2034 |

*Mathematics Curriculum was updated to a revised/updated program, implemented in 2025-2026.
**Middle School Health Education was revised with a launch year of 2025-2026.
***Middle School Digital Literacy and Computer Science was revised with a launch year of 2026-2027.

***By Year:***

| Year | Phase 1: Learn and Prepare | Phase 2: Investigate and Select | Phase 3: Launch | Phase 4: Implement and Monitor |
|---|---|---|---|---|
| 2025-2026 | ES WL | PE<br>Dig Lit/Comp Sci | MS Health | ES ELA<br>Math*<br>MS Science<br>ES Health<br>ES DigLit/CompSci |
| 2026-2027 | ES Science<br>MS WL<br>MS SEL | ES WL | PE<br>MS Dig Lit/Comp Sci | ES ELA<br>Math<br>MS Science<br>ES/MS Health<br>ES DigLit/CompSci |
| 2027-2028 | ES SEL<br>Preschool<br>ES Soc. Studies | ES Science<br>MS WL<br>MS SEL | ES WL | ES ELA<br>Math<br>MS Science<br>PE<br>ES/MS Health<br>ES DigLit/CompSci<br>MS Dig Lit/Comp Sci |
| 2028-2029 | | ES SEL<br>Preschool<br>ES Soc. Studies | ES Science<br>ES WL<br>MS WL<br>MS SEL | ES ELA<br>Math<br>MS Science<br>PE<br>ES/MS Health<br>MS Dig Lit/Comp Sci |
| 2029-2030 | Math<br>ES Dig Lit/Comp Sci<br>ES Health | Soc. Studies | ES SEL<br>MS WL<br>Preschool<br>ES Soc. Studies | ES ELA<br>MS Science<br>PE<br>MS Health<br>MS SEL<br>ES WL<br>MS Dig Lit/Comp Sci |
| 2030-2031 | MS Science<br>MS Health | Math<br>ES Health | | ES Science<br>ES/MS SEL<br>PE<br>ES/MS WL<br>MS Dig Lit/Comp Sci<br>Preschool<br>ES Soc. Studies |
| 2031-2032 | ES/MS ELA<br>MS DL and CS | Math<br>MS Science<br>MS Health | ES Health | ES Science<br>ES/MS SEL<br>Soc. Studies<br>PE<br>ES/MS WL<br>Preschool |

**Sudbury Public Schools**
**School Committee Meeting**

| | |
|---|---|
| **Date:** | **November 16, 2026** |
| **Agenda Item:** | 5d - Review Policy JJF Student Activity Accounts per Budget Subcommittee Recommendation |

**Recommendation:**

Motion to defer execution of Policy JJF until FY28.

Motion to direct the Superintendent to assign responsibility to the permanent School Business Administrator for overseeing a formal audit and comprehensive review of the district's student activity accounts to be presented to the School Committee including account balances, reconciliation procedures, internal controls, and compliance with applicable requirements.

**Background / Preparation Information:**

This item comes to us as a recommendation from the Budget Subcommittee after their October 23rd meeting. They are asking that we defer the execution of Policy JJF Student Activity Accounts because we currently have an acting director of Finance and HR. Please read through the memo written by Karyn and Buck that describes the request and bring any questions or comments to the meeting. The current policy is attached for your information.

**Attachments:**
**Policy JJF - Student Activity Accounts**

| | | | | | |
|---|---|---|---|---|---|
| **Action:** | **XX** | **Report:** | | **Discussion:** | **XX** |

To: Sudbury School Committee
From: Karyn Jones, Budget Subcommittee Member, and Buckner Creel, Acting Director of Business and Human Resources
Date: November 2, 2026
Re: Policy JJF, Student Activity Accounts: FY27 Recommendations

---

At its October 23, 2026 meeting, the Budget Subcommittee discussed the implementation of Policy JJF, Student Activity Accounts, including the annual requirements for School Committee oversight, account balances, and audits.

It was discussed that it has been at least three years since there has been an audit of the student activity accounts. The Subcommittee also discussed the need for a more comprehensive understanding of the accounts, including current balances, reconciliation procedures, and internal controls.

Policy JJF and M.G.L. Chapter 71, Section 47 establishes requirements for the oversight and auditing of student activity funds. The policy requires annual audits of Student Activity Checking Accounts in accordance with Massachusetts Department of Elementary and Secondary Education (DESE) guidelines, inclusion of Student Activity Agency Accounts in the Town's annual audit, and an annual School Committee vote establishing maximum checking account balances. DESE guidance also recommends consideration of an independent outside audit every three years for accounts exceeding the applicable $25,000 threshold.

Given current administrative capacity constraints and the significant work associated with FY28 budget development, the Subcommittee discussed prioritizing the district's immediate financial responsibilities while establishing a plan for a more comprehensive review of student activity accounts.

The Acting Director of Business and Human Resources recommended that the permanent Director of Business and Human Resources oversee a formal audit and comprehensive review of the student activity accounts, including account balances, reconciliation procedures, internal controls, and compliance with applicable requirements.

**Recommendations**

Based on this discussion, we recommend that the School Committee:

1. Defer additional administrative review and reporting associated with student activity accounts for FY27, given current administrative capacity constraints and FY28 budget development priorities, while maintaining all required audit, accounting, and School

Committee approval obligations under Policy JJF and applicable state law.
2. Direct the Superintendent to assign responsibility to the permanent Director of Business and Human Resources for overseeing a formal audit and comprehensive review of the district's student activity accounts, with findings and recommendations presented to the School Committee.

These recommendations are intended to balance current administrative capacity with the Committee's responsibility for financial oversight. They do not eliminate or suspend any audit or accounting requirements established by state law or district policy.

**Suggested Motions for School Committee Consideration**

**Motion 1: FY27 Student Activity Account Oversight**

Move that the Sudbury School Committee defer execution of Policy JJF until FY28.

**Motion 2: Formal Audit and Comprehensive Review**

Move that the Sudbury School Committee direct the Superintendent to assign responsibility to the permanent School Business Administrator for overseeing a formal audit and comprehensive review of the district's student activity accounts, including account balances, reconciliation procedures, internal controls, and compliance with applicable requirements, and to present the findings and recommendations to the School Committee per Policy JJF.

Thank you for your consideration.

Karyn Jones
Budget Subcommittee Member

Buckner Creel
Acting Director of Business and Human Resources

Policy JJF - Student Activity Accounts enclosed

**File: JJF - STUDENT ACTIVITY ACCOUNTS**

Student funds may be raised to finance the activities of authorized student organizations. Student activity funds are considered a part of the total fiscal operation of the District and are subject to policies established by the School Committee and the Office of the Superintendent. The funds shall be only for the benefit of students and managed in accordance with sound business practices, which include accepted budgetary, accounting, and internal control practices. The Superintendent shall ensure that, annually, all Principals and student organizations receive a copy of this policy as well as a copy of established procedures for control of receipts and expenditures that meet or exceed DESE guidelines.

In compliance with Massachusetts General Law, the School Committee:

1. Authorizes the Principals to accept money for recognized student activity organizations, which currently exist, or as from time to time may be revised. All funds received for student activities must be deposited into the Student Activity Agency Account and no funds shall be directly deposited to a Student Activity Checking Account except from the Student Activity Agency Account.

2. Authorizes the Town or District Treasurer to establish and maintain a Student Activity Agency Account(s) which is to be audited as part of the Town's annual audit. The interest that is earned on such accounts shall be maintained in the Agency Account and distributed annually among the Student Activity Checking Accounts as directed by the procedures established by the Superintendent.

3. Authorizes Student Activity Checking Accounts for use by the Principals with specific maximum balances established annually for each school by vote of the School Committee. Payments for expenditures shall be made, whenever possible, by check, debit, or EFT directly from the Student Activity Checking Account. Reimbursements to personal credit card holders shall require the prior authorization of the Superintendent. Signatory authorization for Student Activity Checking Accounts shall be restricted to the Principal and (Superintendent or Treasurer). Student Activity Checking Accounts shall be audited annually in accordance with DESE guidelines.

4. Directs Principals to provide the Treasurer with a bond in an amount agreeable to the Treasurer.

5. Shall annually, prior to the start of each school year, vote to establish or change the maximum balance that may be on deposit in each Student Activity Checking Account.

For accounts with maximum balance limits that exceed $25,000.00, the School Committee shall consider, in accordance with DESE guidelines, that an audit be conducted by an outside audit firm every three years.

**Inactive Student Activities**

When a student activity ceases to be active for a period of three years or more the Principal or other authorized administrator shall require the following actions:

1. Obtain written notice from the faculty advisor or student officer that the activity will cease to be a viable account. If unable to obtain such notification the Principal shall request action to close the account from the School Committee.

2. Identify in writing all assets of the student activity. The disposition of any assets shall be determined by the School Committee and may not benefit specific individuals.

3. Annually notify all students of the required actions if an activity ceases to exist.

**Student Activity Deficits**

Individual student activity accounts are not permitted to be in a deficit position. Whenever a deficit exists that is not the result of timing, the Superintendent shall recommend remedial action to the School Committee in a timely manner.

SOURCE: MASC - Updated 2021

LEGAL REFS: MGL 71:47

CROSS REFS: JJA – Student Organizations
DIE, Audits

*Approved by Sudbury School Committee: October 2, 2023*

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 5e - Policy BGB Step 2 Policy JFBC METCO (Discussion Item)

**Recommendation:**

**Background / Preparation Information:**

We are on Step 2 of Policy BGB: Discussion item - reading of the proposed policy or policies; response from Superintendent; report from any advisory committee assigned responsibility in the area; Committee discussion and directions for any redrafting.

Policy JFBC METCO comes to us from the Budget Subcommittee. Please review their memo as well as an email Karyn sent me with their plan for next steps. Annette has drafted a policy for our consideration, which is also included in this packet. Buck has also prepared a memo on this policy for our consideration. You will also find a draft that Karyn emailed me. This draft has not been reviewed by the METCO directors. Please review the drafts and bring any questions, comments or edits. We will bring this policy back for Step 3 Action Item in a subsequent meeting.

**Attachments:**
**1-METCO Policies**
**2-METCO Policy (1)**
**3-SPS SC Memo RE_ METCO Policy JFBC FY27 (1)**
**4-JFBC - METCO Policy Potential Edits (1)**

**Action:** **Report:** **Discussion:** **XX**

Excerpt from email dated Sept 4 from Karyn Jones to Jessica McCready, Annette Doyle, Betsy Sues and Julie Williams in which Karyn Jones summarizes the outcome of the Budget Subcommittee meeting.

**METCO**

The Budget Subcommittee reviewed the FY27 METCO budget and voted to recommend that the School Committee approve it as presented. We also discussed Policy JFBC and agreed that it should be updated to reflect the current METCO program and address the process for annual budget approval. We also talked about how this item would be appropriate for the Consent Calendar. Policy states this should be voted on before June 30, so it could be best to have this on the agenda sooner rather than later.

**Materials for the packet:**

- Memo
- Policy JFBC – METCO
- FY27 METCO Budget Approval for School Committee Vote

***Please Note:*** As mentioned in the memo, there was also consensus between the Budget Subcommittee and administration that Policy JFBC should be updated. Our consensus was to leave it to you and Annette to determine the best way to move that forward, either having the administration prepare proposed redlines for review by the full Committee or having the School Committee refer the policy to the Policy Subcommittee for review.

**TO:** Sudbury School Committee
**FROM:** Karyn Jones, Budget Subcommittee
**DATE:** October 9, 2026
**RE:** FY27 METCO Budget Approval and Policy JFBC

Per School Committee Policy JFBC, METCO, the School Committee is required to review and approve the proposed METCO budget on or before June 30. At its September 4, 2026 meeting, the Budget Subcommittee reviewed the FY27 METCO budget and voted to recommend that the full School Committee approve the budget as presented.

During the budget review, the administration shared that, for the current school year, the METCO program is operating at three of the district's four elementary schools: Haynes, Noyes, and Nixon. The program is no longer operating at Loring. The administration explained that this change was made to reduce transportation costs and shorten the amount of time students spend on buses.

The Budget Subcommittee noted that Policy JFBC explicitly states, "The METCO Program will be in each school." The policy also identifies a goal of evenly distributing METCO students within each school and grade level while avoiding racial isolation.

Given the language of the existing policy, the Budget Subcommittee recommended that the full School Committee discuss whether it wishes to maintain the expectation that the METCO program operate in all four elementary schools or revise the policy to reflect a different approach to program implementation.

The Subcommittee also discussed the policy's requirement that the School Committee annually review and approve the METCO budget by June 30. The administration explained that meeting this deadline can be challenging because certain budget information, including grant funding and transportation costs, may not be finalized or available until after June 30. As a result, the Subcommittee recommended that the full School Committee consider whether the existing deadline remains appropriate or should be revised to better align with the availability of financial information. The Committee may also wish to discuss whether annual budget approval should remain the responsibility of the School Committee or be delegated to the Superintendent.

There was consensus among Budget Subcommittee members and administration that Policy JFBC warrants review. The Subcommittee recommends that the full School Committee discuss both the expectations for METCO program implementation across the district's schools and the annual budget approval requirements before determining what revisions, if any, should be made.

**File: JFBC - METCO**

The Sudbury Public Schools, in cooperation with the State Department of Education and the Metropolitan Council for Educational Opportunity, Inc. (METCO), agree to provide instruction in the Sudbury Public Schools for Boston children wishing to pursue their education in Sudbury.

The Sudbury Public Schools support the purposes of METCO, as stated in the METCO Handbook under METCO PROGRAM STANDARDS:

METCO is a state-funded program which provides:

1. An opportunity for an integrated public school education for urban black and other minority children from racially imbalanced schools in Boston by placing them in suburban schools;
2. A new learning experience for suburban children;
3. A closer understanding and cooperation between urban and suburban parents and other citizens in the Metropolitan Boston Area.

In order to gain the fullest benefit from this program, preferably, students will enter at grade K, 1, 2, or 3 on a space available basis. The goal is to evenly distribute students within each school and grade level while avoiding racial isolation.

The School Committee will annually review and approve the proposed METCO budget for the ensuing school year on or before June 30th.

The METCO Program will be in each school.

The continuance of the METCO Program in Sudbury is dependent upon State funding.

# *Sudbury Public Schools*

*40 Fairbank Road*
*Sudbury, Massachusetts 01776*
*Phone: (978) 639-3211*

**Annette Doyle**
**Buckner Creel**
*Interim Superintendent of Schools* — *Acting Director of Business and HR*
annette_doyle@sudbury.k12.ma.us — buckner_creel@sudbury.k12.ma.us


To: School Committee
From: Buckner Creel
Acting Director of Business and Human Resources

Date: October 15, 2026

Re: **FY28 METCO Grant Budget approval process**

The METCO grant request for proposals (RFP) is typically not issued until the DESE proponents have sufficient information on the amount the Commonwealth Legislature will include in the upcoming fiscal year for METCO expenditures to be confident in the school district allocations. This year, the RFP for the FY27 grant was posted on 11 June 2026, with a response deadline of 26 June 26, an earlier posting date than the last several years. This posting date is the earliest date we can be confident of our grant allocation amount. Our application was approved by DESE on 1 July 2026.

I have every reason to believe this pattern will continue in the future. The Committee's last meeting before 30 June 2027 will be on 21 June 2026, and this pattern is likely to continue as well, making the requirement to approve the METCO budget by 30 June difficult but not impossible to guarantee. Perhaps the Committee should review Policy JFBC and determine if the June reporting requirement is necessary or should be changed in some way.

Buckner Creel
Acting Business Director

**JFBC - METCO**

The Sudbury Public Schools, in cooperation with the State Department of Education and the Metropolitan Council for Educational Opportunity, Inc. (METCO), agree to provide instruction in the Sudbury Public Schools for Boston children wishing to pursue their education in Sudbury.

The Sudbury Public Schools support the purposes of METCO, as stated in the METCO Handbook under METCO PROGRAM STANDARDS:

METCO is a state-funded program which provides:

1. An opportunity for an integrated public school education for urban black and other minority children from racially imbalanced schools in Boston by placing them in suburban schools;
2. A new learning experience for suburban children;
3. A closer understanding and cooperation between urban and suburban parents and other citizens in the Metropolitan Boston Area.

In order to gain the fullest benefit from this program, preferably, students will enter at grade K, 1, 2, or 3 on a space available basis. The goal is to evenly distribute students within each school and grade level while avoiding racial isolation.

The School Committee will annually review and approve the proposed METCO budget for the ensuing school year ~~on or before June 30th. By~~ **August 1.**

~~The METCO Program will be in each school.~~

The continuance of the METCO Program in Sudbury is dependent upon State funding.

DRAFT

**RED: redlines in packet BLUE: Considerations**

## JFBC - METCO

~~The Sudbury Public Schools, in cooperation with the State Department of Education and the Metropolitan Council for Educational Opportunity, Inc. (METCO)~~, The Sudbury Public Schools support the purposes of the METCO program, as established under Massachusetts General Laws Chapter 76, Section 12A, and described by the Massachusetts Department of Elementary and Secondary Education (DESE). Through participation in the program, Sudbury Public Schools provides educational opportunities for eligible students from Boston. ~~agree to provide instruction in the Sudbury Public Schools for Boston children wishing to pursue their education in Sudbury.~~

~~The Sudbury Public Schools support the purposes of METCO, as stated in the METCO Handbook under METCO PROGRAM STANDARDS:~~

~~METCO is a state-funded program which provides:~~

~~1. An opportunity for an integrated public school education for urban black and other minority children from racially imbalanced schools in Boston by placing them in suburban schools;~~
~~2. A new learning experience for suburban children;~~
~~3. A closer understanding and cooperation between urban and suburban parents and other citizens in the Metropolitan Boston Area.~~

METCO is a state-funded, voluntary program designed to expand educational opportunities, increase diversity, and reduce racial isolation. The program seeks to:

1. Expand educational opportunities by enabling students from Boston to attend public schools in participating suburban communities.
2. Promote diversity and mutual understanding by providing opportunities for students to learn together in racially, ethnically, and linguistically diverse educational settings.
3. Strengthen connections between communities by fostering cross-cultural understanding, family engagement, and collaboration among students, families, educators, and community

members.

In order to gain the fullest benefit from this program, preferably, students will enter at grade K, 1, 2, or 3 on a space available basis. ~~The goal is to evenly distribute students within each school and grade level while avoiding racial isolation.~~ The District shall seek to provide equitable opportunities for METCO students to participate fully in district schools and programs. Student placements shall be made in accordance with applicable state law, DESE guidance, and METCO program requirements. The District shall provide METCO students with equitable access to educational opportunities, programs, services, and extracurricular activities.

The School Committee will annually review and approve the proposed METCO budget for the ensuing school year ~~on or before June 30th. By~~ by **August 1.**

~~The METCO Program will be in each school.~~

~~The continuance of the METCO Program in Sudbury is dependent upon State funding.~~
The School Committee shall annually review the District's continued participation in the METCO program taking into consideration the availability of state funding, program costs, and the District's financial resources, consistent with applicable program requirements.

Approved by the Sudbury School Committee on DATE.

# *Sudbury Public Schools*

*40 Fairbank Road*
*Sudbury, Massachusetts 01776*
*Phone: (978) 639-3211*

**Annette Doyle**
*Interim Superintendent of Schools*
annette_doyle@sudbury.k12.ma.us


TO: Sudbury School Committee
FROM: Annette Doyle, Interim Superintendent
RE: METCO Policy
DATE: November 12, 2026

When I submitted redline changes to Policy JFBC METCO for the School Committee packet for October 19, 2026, the intention was to update the policy to reflect that we no longer have METCO students in all 5 schools and to correct the School Committee METCO budget approval timeline to August 1.

Since that submission, Karyn Jones has suggested other changes to the METCO policy as reflected in her blue text considerations included in the packet.

I respectfully request you consider potential edits to Karyn's text changes as reflected in orange text and attached to this memo. The section about which I am most concerned is the newly-added last sentence which states that the School Committee will "annually review the District's continued participation in METCO…" The impact of this change is that families cannot be assured that their participation in the program is secure year-to-year.

Given that this would be a substantive policy change, the School Committee may consider inviting feedback from our METCO families and METCO Director before voting on significant changes to the current policy.

**RED**: redlines in packet, original
**BLUE / BLACK CROSS OUTS:** KJ Considerations
**ORANGE / BLUE CROSS OUT:** AD Considerations

**JFBC - METCO**

~~The Sudbury Public Schools, in cooperation with the State Department of Education and the Metropolitan Council for Educational Opportunity, Inc. (METCO)~~, The Sudbury Public Schools support the purposes of the METCO program, as established under Massachusetts General Laws Chapter 76, Section 12A, and described by the Massachusetts Department of Elementary and Secondary Education (DESE). Through participation in the program, Sudbury Public Schools provides educational opportunities for eligible students from Boston. ~~agree to provide instruction in the Sudbury Public Schools for Boston children wishing to pursue their education in Sudbury.~~

~~The Sudbury Public Schools support the purposes of METCO, as stated in the METCO Handbook under METCO PROGRAM STANDARDS:~~

~~METCO is a state-funded program which provides:~~
~~1. An opportunity for an integrated public school education for urban black and other minority children from racially imbalanced schools in Boston by placing them in suburban schools;~~
~~2. A new learning experience for suburban children;~~
~~3. A closer understanding and cooperation between urban and suburban parents and other citizens in the Metropolitan Boston Area.~~

METCO is a state-funded, voluntary program designed to expand educational opportunities, increase diversity, and reduce racial isolation in suburban communities. The program seeks to:

1. Expand educational opportunities by ~~enabling~~ inviting students from Boston to attend public schools in participating suburban communities.
2. Promote diversity and mutual understanding by providing opportunities for students to learn together in racially, ethnically, and linguistically diverse educational settings, preparing them for a multi-racial and multicultural world.
3. ~~Strengthen connections between communities by fostering cross-cultural understanding, family engagement, and collaboration among students, families, educators, and community members.~~

In order to gain the fullest benefit from this program, preferably, students will enter at grade K, 1, 2, or 3 on a space available basis. ~~The goal is to evenly distribute students~~

~~within each school and grade level while avoiding racial isolation.~~ ~~The District shall seek to provide equitable opportunities for METCO students to participate fully in district schools and programs.~~ Student placements shall be made in accordance with applicable state law, DESE guidance, and METCO program requirements. ~~The District shall provide METCO students with equitable access to educational opportunities, programs, services, and extracurricular activities.~~ Students enrolled into the Sudbury Public Schools through the METCO Program enjoy the full rights and privileges afforded all resident students and are expected to adhere to the rules and regulations of the Sudbury Public Schools as set forth for all resident students.

The School Committee will annually review and approve the proposed METCO budget for the ensuing school year ~~on or before June 30th.~~ by August 1.

~~The METCO Program will be in each school.~~

The continuance of the METCO Program in Sudbury is dependent upon State funding. ~~The School Committee shall annually review the District's continued participation in the METCO program taking into consideration the availability of state funding, program costs, and the District's financial resources, consistent with applicable program requirements.~~

Approved by the Sudbury School Committee on DATE.

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 5f - Policy BGB Step 3 (Action Item)

a. JLCD Administration of Medication to Students
b. JLCDC Self Administration and Self-Carry of Medication
c. JKAA Prevention of Physical Restraint of Students

**Recommendation:**

Motion to approve Policy JLCD Administration of Mediation to Students as presented/amended.

Motion to approve Policy JLCDC Self Administration and Self Carry of Medication as presented/amended.

Motion to approve Policy JKAA Prevention of Physical Restraint of Students (or new name) as presented/amended.

**Background / Preparation Information:**

We are on Step 3 of Policy BGB Action item for three policies. The Policy Subcommittee has provided us with a memo and draft policies for Policy JLCD and Policy JLCDC. You will also find information for Policy JKAA: a draft policy drafted by Stephanie Juriansz and our attorneys, a memo from Stephanie Juriansz, and feedback from SEPAC. Please review all the documents and bring any questions, comments or suggestions.

**Attachments:**
**1-Policy JLCD Administration of Medication to Students_ MASC Clarification (1) (1)**
**2-Revised Policy JLCD and JLCDC**
**3-Proposed Policy JKAA**

**Action:** **XX** **Report:** **Discussion:** **XX**

To: Sudbury School Committee
From: Karyn Jones, School Committee Member
Date: November 2, 2026
Re: Policy JLCD Administration of Medication to Students: MASC Clarification

---

Following the Policy Subcommittee's discussion of Policy JLCD, I contacted the Massachusetts Association of School Committees (MASC) to clarify the purpose of the following language, which the district's nursing representative recommended removing:

> If the school district wishes medical personnel to train non- medical staff in the administration of emergency rescue opioid antagonist, the School Committee shall vote to approve such training and the Superintendent shall ensure that medical personnel have a written protocol which complies with medical directives and regulations from the Department of Public Health.

MASC confirmed that "this language came from DPH, 105 CMR 210.00 updates last spring and was vetted by MASC counsel." MASC further emphasized that "there was nothing inserted into the language that was not deemed necessary."

MASC counsel explained that the two paragraphs addressing emergency rescue opioid antagonists are intended to be read together. The first addresses the administration of emergency rescue opioid antagonists by trained medical personnel and first responders, while the second establishes the approval process if the district wishes to train non-medical personnel, including teachers, coaches, or other staff members, to administer these medications.

Counsel clarified that if district medical personnel wish to train non-medical staff to administer emergency rescue opioid antagonists, the School Committee must approve the training. The Superintendent must then ensure that a written medical protocol is in place that complies with applicable Department of Public Health regulations and medical directives.

Importantly, retaining this language does not require the district to implement such training. Rather, it establishes the School Committee's role in approving a training program. The approval would apply to the training program, not each individual staff member.

MASC specifically addressed the rationale for requiring School Committee approval, stating:

> "From my perspective, the reason for the SC approval to train non-medical staff is that these would typically be life or death situations."

MASC recommended retaining the language. Its inclusion is intentional, having originated from DPH regulatory updates and undergone review by MASC counsel. The provision establishes a clear process for School Committee oversight while preserving the district's discretion regarding whether to train non-medical personnel. Removing it would eliminate that explicit approval process from the policy and could require a future policy amendment should the district decide to implement such training.

# *Sudbury Public Schools*

*40 Fairbank Road*
*Sudbury, Massachusetts 01776*
*Phone: (978) 639-3202*
*Fax: (978) 443-9001*

**Stephanie Juriansz**
*Director of Student Services*
Email: stephanie_juriansz@sudbury.k12.ma.us


**To:** School Committee
**From:** Stephanie Juriansz, Director of Student Services and Kiersten Varner, Lead Nurse

**Date:** November 16, 2026
**Subject:** Proposed Revised Policy JLCD, Administration of Medication and JLCDC-Self-Admin-Medications

**Purpose:** The purpose of this memo is to share School District and School Counsel input with the School Committee regarding the changes recommended for Policy JLCD, JLCDC-Self-Admin-Medications, and to request that the School Committee review/update the Administration of Naloxone Policy in accordance with 105 CMR 210.

As shared previously, the current JLCD policy, updated last spring, supports the updated regulations. The revised proposed JLCD provides more clarity, and the District is supportive of the proposed policy if:

- Both Policies: JLCD, Administration of Medication, and JLCDC are approved at the same time.
- If the language in JLCD has a minor adjustment regarding the *"School Committee shall vote to approve such training"*. This language is misleading, as the School Committee *does* need to vote annually to approve the allowance to train unlicensed/non-medical and licensed medical staff. However, the School Committee *does not* need to vote to approve the actual training program. The highlighted language in the regulations below is the District's rationale, and the District's Counsel has supported this clarification of language. The recommended change is attached.
- If the Administration of Naloxone Policy (Narcan) is updated in the future. This contradicts the JLCD proposal.

Included in the Packet: JLCD and JLCDC Previously Proposed, JLCD recommended by the District with Counsel Feedback, and the Current and Proposed Naloxone Policy for future consideration.

**Updated Regulations August 2025: 105 CMR 210.011**

210.011: Administration of Emergency Rescue Opioid Antagonist (A) A public school district or non-public school, as defined by the Massachusetts Department of Elementary and Secondary Education, may register with the Department for the limited purpose of permitting properly trained unlicensed school personnel to administer any available, FDA-approved, pre-dosed form of an emergency rescue opioid antagonist (hereafter, any available, FDA-approved, pre-dosed form of an emergency rescue opioid antagonist will be referred to solely as an emergency rescue opioid antagonist for the purposes of 105 CMR 210.011) in a life-threatening situation during regular school activities when a school nurse is not immediately available, including field trips, provided that the following conditions are met:

(1) the school committee or governing body approves policies developed by the medication program manager governing administration of an emergency rescue opioid antagonist. This approval must be renewed every year;

(2) the school committee or governing body provides an assurance to the Department that the requirements of 105 CMR 210.000 will be met through registration with the Department;

(3) in consultation with the school physician, the medication program manager oversees and has final decision-making authority about the emergency rescue opioid antagonist program;

(4) the unlicensed school personnel authorized to administer an emergency rescue opioid antagonist are trained by the school nurse, or a training provider designated by the school nurse, in accordance with standards established by the Department

(a) the training, at a minimum, shall include:

1. recognition of the symptoms of an opioid overdose; and

2. proper use of the administration method

(b) the medication program manager, or school nurses designated by this person, shall document the training and evaluation of competency.

(c) the school shall maintain and make available upon request by caregivers or staff documentation of those unlicensed school personnel authorized and trained to administer an emergency rescue opioid antagonist when the school nurse is not immediately available.

(5) when an emergency rescue opioid antagonist is administered:

(a) there shall be immediate notification of the local emergency medical services system (generally 911), followed by notification of a student's caregiver as appropriate, the school nurse, and other individuals as warranted and deemed appropriate by the school nurse; and

(b) the medication program manager will report the administration of an emergency rescue opioid antagonist to the Department of Public Health as directed each time an emergency rescue opioid antagonist is administered during regular school activities, in accordance with 105 CMR 210.009(C).

(6) all school staff, regardless of licensure, should follow a medication order for the administration of an emergency rescue opioid antagonist; and

(7) identification of places where the opioid antagonist is to be stored, following consideration of the need for storage:

(a) at one or more places students and visitors are most likely to be located;

(b) in such a manner as to allow rapid access by trained persons, including possession by the student when appropriate; and

(c) in a place that minimizes risk of unintended use. The storage location(s) should be secure but not locked.

(B) Any individual, including unlicensed school personnel, may carry and administer an emergency rescue opioid antagonist on school grounds or at school events, as permitted by the statewide standing order and within M.G.L. c. 94C, §§ 19(d) and 34A(e).

(C) Administration and storage of an emergency rescue opioid antagonist in schools shall be governed by 105 CMR 210.011. 210.015: Waiver of Requirements Imposed on Entities Administering Medications under 105 CMR 210.000

Thank you for your consideration.

Sincerely,

Stephanie Juriansz, Director of Student Services

Kiersten Varner, Lead Nurse

**DRAFT: from Subcommittee: MASC Updated Policy 7/2026: JLCD Admistration of Medication**

**File: JLCD - ADMINISTERING MEDICINES TO STUDENTS**

Medication may not be administered to students during Regular School Activities unless there is a medical administration plan in place for the student. Regular School Activities means all instructional/academic activities, as well as all activities organized or sanctioned by the school including, but not limited to, day and overnight field trips, school-provided transportation, interscholastic sporting events, after school or extracurricular clubs or organizations, and proms or other social events organized as part of the instructional/academic portion of the school.

No one but the school nurse, and those others listed in the medical administration plan may give any medication to any student.

**Exceptions:**

The School Committee, consulting with the Board of Health where appropriate, shall adopt policies and procedures governing the administration of medications and self-administration of medications within the school system, following development of a proposal by medication program manager, in consultation with the school physician. Review and revision of such policies and procedures shall occur as needed but at least every two years.

At a minimum, these policies shall include:

1. designation of a medication program manager supervisor of the medication administration program in a school;

2. documentation of the administration of medications including the requirement that each school maintain a medication administration record for each student who receives medication during regular school activities; The school nurse shall document in the medication administration record significant observations of the prescription medication's effectiveness, as appropriate, and any adverse reactions or other harmful effects, as well as any action taken. All documentation shall be recorded in a manner that prevents alteration or destruction of the record. Documentation shall include but not be limited to a daily log and a medication administration plan.

- The daily log shall contain:

  (a) the dose or amount of medication administered;

  (b) the date and time of administration or omission of administration, including the reason for omission and action taken post omission;

  (c) mechanism for identifying the person administering each dose. including the medication order and caregiver authorization.

- The medication administration plan shall include:

(a) the name of the student;

(b) a medication order from a licensed prescriber, which meets the requirements of 105 CMR 210.005(D)(1);

(c) the signed authorization of the caregiver, which meets the requirements of 105 CMR 210.005(D)(3);

(d) any known allergies to food or medications;

(e) the diagnosis, unless a violation of confidentiality or the caregiver or student requests that it not be documented;

(f) any possible side effects, adverse reactions or contraindications.

(g) the quantity of prescription medication to be received by the school from the caregiver;

(h) the required storage conditions;

(i) the duration of the medication order;

(j) the designation of unlicensed school personnel, if any, who will administer the prescription medication to the student in the absence of the school nurse, and plans for back-up if the designated personnel are unavailable;

(k) plans, if any, for teaching self -administration of the medication;

(l) with caregiver permission, other persons, including teachers, to be notified of medication administration and possible adverse effects of the medication;

(m) when appropriate, the location where the administration of the prescription medication will take place;

(n) a plan for monitoring the effects of the medication;

(o) the school nurse has final decision-making authority for the provision of medication administration in the case of field trips and other short-term special school events, which may include nursing staffing, delegation of medication administration, or a combination of nursing staffing and delegation of medication administration.

3. response to a medication emergency;

4. storage of medications;

5. reporting and documentation of medication errors;

6. dissemination of information to parents/guardians Such information shall include an outline of a school's medication policies and shall be available to parents upon request;

7. procedures for resolving questions between the school and a parent/guardian regarding administration of medications. Such procedures shall provide for and encourage the

participation of the parents/guardians. Existing procedures for resolution of differences may be used whenever appropriate.

The School Committee shall submit these policies and procedures to the Department of Public Health upon request.

The School Nurse/Medication Program Manager, in consultation with the School Physician, may train and delegate responsibility to unlicensed school personnel for medication administration.

1. Neither prescription medication nor over-the-counter medications can be administered by delegation by unlicensed school personnel without student-specific medication orders from a licensed prescriber.

2. The School Nurse/Medication Program Manager has final decision-making authority for the provision of medication administration in the case of field trips and other short-term special school events, which may include nursing staffing, delegation of medication administration, or a combination of nursing staffing and delegation of medication administration.

3. The unlicensed school personnel shall be listed on the medication administration plan, shall be selected by the school nurse, and trained, if they meet criteria established by regulation in the administration of emergency medication to a specific student.

- All unlicensed school personnel administering medication must be properly trained and supervised by a school nurse.

- If epinephrine is administered by unlicensed school personnel, the school nurse, and other individuals as warranted and deemed appropriate by the school nurse, must also be notified.

- If an emergency rescue opioid antagonist is administered there shall be immediate notification of the local emergency medical services (911), followed by notification of a student's parent/guardian as appropriate, and the school nurse.

The school district may, in conjunction with the School Physician and the School Nurse Leader, stock emergency rescue opioid antagonist and trained medical personnel and first responders may administer nasal naloxone to individuals experiencing a life threatening opiate overdose in a school setting

If the school district wishes medical personnel to train non- medical staff in the administration of emergency rescue opioid antagonist the School Committee shall vote to approve such training and the Superintendent shall ensure that medical personnel have a written protocol which complies with medical directives and regulations from the Department of Public Health.

Following consultation with the school nurse, students who fall into the following exceptions may self-administer medications:

1. Students with asthma or other respiratory diseases may possess and administer prescription inhalers.

2. Students with cystic fibrosis may possess and administer prescription enzyme supplements.

3. Students with diabetes may possess and administer glucose monitoring tests and insulin delivery systems.

4. Students with life threatening allergies may possess and administer epinephrine.

All schools/districts where medication is stored or where medication administration is delegated to unlicensed school personnel must obtain a Massachusetts Controlled Substances Registration by registering with the Department of Public Health. At minimum, schools/districts may accomplish this by registering for emergency medication training.

Schools/districts are not authorized to make use of 105 CMR 700.003(C) for the administration of emergency rescue medications during regular school activities.

LEGAL REF.: M.G.L. 71:54B

Dept. of Public Health Regulations: 105 CMR 210.00 & 700.003; 244 CMR 3.0

MDPH Advisory on Application of 105 CMR 210.00 to Field Trips, 2/4/2025

SOURCE: MASC – Updated 2026

# SELF-ADMINISTRATION AND SELF-CARRY OF MEDICATIONS

The school nurse may permit self-carry and self-administration of medication by a student provided that the following requirements are met:

1. the student, school nurse and caregiver, where appropriate, enter into an agreement which specifies the conditions under which medication may be self-administered, which may include the conditions under which a student may self-carry medication for the purpose of administration by another, or whether the medication being self-administered is being taken or applied by the student themselves or with an FDA-approved medical device;

2. the school nurse, as appropriate, develops a medication administration plan pursuant to 105 CMR 210.005(E) which contains only those elements necessary to ensure safe self-administration of medication;

3. the school nurse evaluates the student's health status and abilities and deems self-administration safe and appropriate. As necessary, the school nurse shall observe initial self-administration of the medication;

4. the school nurse is reasonably assured that the student is able to identify the appropriate medication, knows the frequency and time of day for which the medication is ordered, and follows the school self-administration protocols;

5. there is written authorization from the student's caregiver that the student may self-administer medication, unless the student has consented to treatment under M.G.L. c. 112, § 12F or other authority permitting the student to consent to medical treatment without caregiver permission;

6. if requested by the school nurse, the licensed prescriber provides a written order for self-administration;

7. the school nurse establishes a plan for the safe storage of self-administered medication and, as necessary, consults with teachers, the student and caregiver, if appropriate, to determine a safe place for storing the medication for the individual student, while providing for accessibility if the student's health needs require it. This may include self-carry of the medication and this information shall be included in the medication administration plan. In the case of an inhaler or other preventive or emergency medication, whenever possible, a backup supply of the medication shall be kept in the health room or a second readily available location;

8. the school nurse develops and implements a plan to monitor the student's self-administration, based on the student's abilities and health status. Monitoring may include teaching the student the correct way of taking the medication, and notifying the caregiver or licensed prescriber of any side effects, variation from the plan, or the student's refusal or failure to take the medication;

9. with caregiver and student permission, if required by law, as appropriate, the school nurse may inform appropriate teachers and administrators that the student is self-administering and/or self-carrying a medication.

SOURCE: MASC 2026

**DRAFT Replacement: with Legal Feedback/ District Recommended: MASC Updated Policy 7/2026: JLCD Administration of Medication**

**File: JLCD - ADMINISTERING MEDICINES TO STUDENTS**

Medication may not be administered to students during Regular School Activities unless there is a medical administration plan in place for the student. Regular School Activities means all instructional/academic activities, as well as all activities organized or sanctioned by the school including, but not limited to, day and overnight field trips, school-provided transportation, interscholastic sporting events, after school or extracurricular clubs or organizations, and proms or other social events organized as part of the instructional/academic portion of the school.

No one but the school nurse, and those others listed in the medical administration plan may give any medication to any student.

**Exceptions:**

The School Committee, consulting with the Board of Health where appropriate, shall adopt policies and procedures governing the administration of medications and self-administration of medications within the school system, following development of a proposal by medication program manager, in consultation with the school physician. Review and revision of such policies and procedures shall occur as needed but at least every two years.

At a minimum, these policies shall include:

1. designation of a medication program manager supervisor of the medication administration program in a school;

2. documentation of the administration of medications including the requirement that each school maintain a medication administration record for each student who receives medication during regular school activities; The school nurse shall document in the medication administration record significant observations of the prescription medication's effectiveness, as appropriate, and any adverse reactions or other harmful effects, as well as any action taken. All documentation shall be recorded in a manner that prevents alteration or destruction of the record. Documentation shall include but not be limited to a daily log and a medication administration plan.

- The daily log shall contain:

  (a) the dose or amount of medication administered;

  (b) the date and time of administration or omission of administration, including the reason for omission and action taken post omission;

  (c) mechanism for identifying the person administering each dose. including the medication order and caregiver authorization.

- The medication administration plan shall include:

(a) the name of the student;

(b) a medication order from a licensed prescriber, which meets the requirements of 105 CMR 210.005(D)(1);

(c) the signed authorization of the caregiver, which meets the requirements of 105 CMR 210.005(D)(3);

(d) any known allergies to food or medications;

(e) the diagnosis, unless a violation of confidentiality or the caregiver or student requests that it not be documented;

(f) any possible side effects, adverse reactions or contraindications.

(g) the quantity of prescription medication to be received by the school from the caregiver;

(h) the required storage conditions;

(i) the duration of the medication order;

(j) the designation of unlicensed school personnel, if any, who will administer the prescription medication to the student in the absence of the school nurse, and plans for back-up if the designated personnel are unavailable;

(k) plans, if any, for teaching self -administration of the medication;

(l) with caregiver permission, other persons, including teachers, to be notified of medication administration and possible adverse effects of the medication;

(m) when appropriate, the location where the administration of the prescription medication will take place;

(n) a plan for monitoring the effects of the medication;

(o) the school nurse has final decision-making authority for the provision of medication administration in the case of field trips and other short-term special school events, which may include nursing staffing, delegation of medication administration, or a combination of nursing staffing and delegation of medication administration.

3. response to a medication emergency;

4. storage of medications;

5. reporting and documentation of medication errors;

6. dissemination of information to parents/guardians Such information shall include an outline of a school's medication policies and shall be available to parents upon request;

7. procedures for resolving questions between the school and a parent/guardian regarding administration of medications. Such procedures shall provide for and encourage the

participation of the parents/guardians. Existing procedures for resolution of differences may be used whenever appropriate.

The School Committee shall submit these policies and procedures to the Department of Public Health upon request.

The School Nurse/Medication Program Manager, in consultation with the School Physician, may train and delegate responsibility to unlicensed school personnel for medication administration.

1. Neither prescription medication nor over-the-counter medications can be administered by delegation by unlicensed school personnel without student-specific medication orders from a licensed prescriber.

2. The School Nurse/Medication Program Manager has final decision-making authority for the provision of medication administration in the case of field trips and other short-term special school events, which may include nursing staffing, delegation of medication administration, or a combination of nursing staffing and delegation of medication administration.

3. The unlicensed school personnel shall be listed on the medication administration plan, shall be selected by the school nurse, and trained, if they meet criteria established by regulation in the administration of emergency medication to a specific student.

- All unlicensed school personnel administering medication must be properly trained and supervised by a school nurse.

- If epinephrine is administered by unlicensed school personnel, the school nurse, and other individuals as warranted and deemed appropriate by the school nurse, must also be notified.

- If an emergency rescue opioid antagonist is administered, there shall be immediate notification of the local emergency medical services (911), followed by notification of a student's parent/guardian as appropriate, and the school nurse.

The school district may, in conjunction with the School Physician and the School Nurse Leader, stock emergency rescue opioid antagonist and trained medical personnel and first responders may administer nasal naloxone to individuals experiencing a life threatening opiate overdose in a school setting

If the school district wishes medical personnel to train non- medical staff in the administration of emergency rescue opioid antagonist the School Committee shall vote to approve that the District can train unlicensed non-medical staff annually~~such training~~ and the Superintendent shall ensure that medical personnel have a written protocol which complies with medical directives and regulations from the Department of Public Health.

Following consultation with the school nurse, students who fall into the following exceptions may self-administer medications:

1. Students with asthma or other respiratory diseases may possess and administer prescription inhalers.

2. Students with cystic fibrosis may possess and administer prescription enzyme supplements.

3. Students with diabetes may possess and administer glucose monitoring tests and insulin delivery systems.

4. Students with life threatening allergies may possess and administer epinephrine.

All schools/districts where medication is stored or where medication administration is delegated to unlicensed school personnel must obtain a Massachusetts Controlled Substances Registration by registering with the Department of Public Health. At minimum, schools/districts may accomplish this by registering for emergency medication training.

Schools/districts are not authorized to make use of 105 CMR 700.003(C) for the administration of emergency rescue medications during regular school activities.

LEGAL REF.: M.G.L. 71:54B

Dept. of Public Health Regulations: 105 CMR 210.00 & 700.003; 244 CMR 3.0

MDPH Advisory on Application of 105 CMR 210.00 to Field Trips, 2/4/2025

SOURCE: MASC – Updated 2026

# SUDBURY PUBLIC SCHOOLS
## School Health Services

## Current: ADMINISTRATION OF NALOXONE (NARCAN) Policy and Procedure

### Policy

In order to recognize and respond to potential life threatening opioid overdose as part of the MDPH opioid overdose prevention program, the Sudbury Public Schools will maintain a system-wide plan for addressing potentially life-threatening opioid overdose reactions.

Additionally:

- This plan will be supplemented by any building-based medical emergency response plan
- The SPS Lead Nurse, in conjunction with the Board of Health, will have the responsibility for the development and management of the intra-nasal Naloxone administration program in the school setting in accordance with MDPH protocols.
- The School Physician will provide oversight to monitor the program.
- Training per MDPH protocols will be provided for all school nurse responders.

It is the policy of the Sudbury Public Schools that all schools shall provide and maintain on-site in each school facility, Naloxone. Per 105 CMR 210.000 only the school nurse may administer school supplied Naloxone during an emergency to any student, staff, or visitor suspected of having an opioid-related drug overdose, whether or not there is a previous history of opioid abuse.

Any person, however, who in good faith, attempts to render emergency care by administering Naloxone to a person reasonably believed to be experiencing an opiate related overdose, shall not be liable from the attempt to render emergency care pursuant to Massachusetts General Law, Chapter 112, Section 12FF. This immunity does not apply to acts or omissions constituting gross negligence.

### Background

The Massachusetts Department of Public Health launched the Overdose Education and Naloxone Distribution (OEND) prevention program using intra-nasal Naloxone in an attempt to reverse the trend of increasing fatal and non-fatal overdoses from opioids. Naloxone is an opioid antagonist which means it displaces the opioid from receptors in the brain. An overdose occurs because the opioid is on the same receptor site in the brain that is responsible for breathing. Rapid administration of Naloxone may be life-saving in patients with an overdose by allowing slowed or absent breathing to resume. It is both safe and effective and has no potential for

abuse. Naloxone has been used by paramedics in ambulances and by emergency room clinicians for decades.

## Signs and Symptoms of Opioid Overdose:

School nurses may administer Naloxone to a patient (student, staff member, or visitor) in the event of respiratory depression, unresponsiveness or respiratory arrest, when an opioid overdose is suspected. The following are signs of an opioid overdose:

- Blue skin tinge-usually lips and fingertips show first
- Body is very limp
- Face is very pale
- Pulse is slow, erratic or not present
- Vomiting
- Choking sounds, gurgling, snoring/gasping noise
- Breathing is very slow, irregular or has stopped
- Unresponsive

## Procedure

1. **Activate EMS** via Medical Emergency Response Plan. 911 must be called in all potential overdose situations.

2. **Assessment**: When a patient is suspected of an opioid overdose the nurse will conduct an initial assessment of the level of consciousness and respiratory status.

**a**) For individuals with no pulse: initiate CPR per BLS guidelines.

**b**) For individuals with a pulse but who are not breathing: establish an airway and perform rescue breathing using a face mask or shield.

**c**) For individuals who have a pulse and are breathing: assess if there is depression of the respiratory status as evidenced by:

- a very low respiration rate
- interpretation of pulse oximetry measurement, if immediately available

**d**) Assess for decrease in level of consciousness as evidenced by:

- difficult to arouse (responds to physical stimuli but does not communicate or follow commands, may move spontaneously) or
- unable to arouse (minimal or no response to noxious stimuli, does not communicate or follow commands).

**e**) Nurse determines need for Naloxone administration

**3. Administration:** Intranasal administration of Naloxone

**a**. There are exclusion criteria for nasal trauma and epistaxis. Naloxone should not be administered if there is a known hypersensitivity to Naloxone.

**b**. Assemble Naloxone vial and intranasal atomizer:

- Follow manufacturer direction for administration
- Continue rescue breathing or CPR as needed
- If no response, an additional second dose may be administered after 3-5 minutes
- Monitor until EMS arrives
- Place the victim in the recovery position and stay with the victim. The recovery position is when you lay the person on his or her side, his or her body is supported by a bent knee and his or her face is turned to the side.

**4. Additional Considerations**:

**a**. The victim may be angry or combative when he or she wakes up, therefore, it is important to stand back from the victim and, if possible, have a second adult present.

**b**. Potential adverse effects include nausea, diarrhea, abdominal cramping, irritability, restlessness, muscle or bone pain, tearing or nose running, and craving of an opioid.

**c**. Naloxone wears off in thirty (30) to ninety (90) minutes.

**5. Transport** to the nearest hospital via EMS. Students who receive a dose of Naloxone must be sent to the emergency room for follow-up.

**6. Follow-up:** If the administration was to a student, the school nurse will notify student support services and student services will provide substance abuse prevention resources to the student and family, as appropriate.

**7. Documentation:** Record encounter in student/staff school health record. The recording should list the dose, route of administration, and time of delivery. It should include the patient presentation and response to Naloxone.

**8. Training:** The Director of Health Services will provide a training review and informational update annually to ensure that nurses understand this medication, including its uses and side-effects.

**9. Procurement:** The superintendent, principal, school nurse or designee will be responsible for the procurement of Naloxone. The medication will be acquired through the State Office of Pharmacy, a prescription from the District's School Physician, or from a pharmacy with a Naloxone standing order, or from the Sudbury Board of Health.

**10. Storage:** Naloxone will be stored in the health office at each school. The school nurse will regularly inspect the Naloxone to check the expiration date.

**11. Disposal:** The nurse will use proper disposal of used Naloxone administration delivery systems in accordance with any applicable policies of the Massachusetts Department of Public Health, Division of Food and Drugs.

**12. Medication Errors:** All medication errors will be reported pursuant to 105 CMR 210 and Sudbury Public Schools' medication administration plan.

Reference:
Karen Robitaille, Director, MDPH School Health Services 2022, Administration of Naloxone in Schools, Department of Public Health

Jan 25, 2024

# SUDBURY PUBLIC SCHOOLS
## School Health Services

## DRAFT ADMINISTRATION OF NALOXONE (NARCAN)
## Policy ~~and Procedure~~

### Policy

In order to recognize and respond to potential life threatening opioid overdose as part of the MDPH opioid overdose prevention program, the Sudbury Public Schools will maintain a system-wide plan for addressing potentially life-threatening opioid overdose reactions.

Additionally:

- This plan will be supplemented by any building-based medical emergency response plan
- The SPS Lead Nurse, in conjunction with the Board of Health, will have the responsibility for the development and management of the intra-nasal Naloxone administration program in the school setting in accordance with MDPH protocols.
- The School Physician will provide oversight to monitor the program.
- Training per MDPH protocols will be provided for all school nurses~~nurse~~ and unlicensed non-medical responders.

It is the policy of the Sudbury Public Schools that all schools shall provide, train, and maintain on-site in each school facility~~,~~ Naloxone Per 105 CMR 210.000. ~~Per 105 CMR 210.000 only the school nurse may administer school supplied Naloxone during an emergency to any student, staff, or visitor suspected of having an opioid-related drug overdose, whether or not there is a previous history of opioid abuse. ¶~~

Any person, however, who in good faith, attempts to render emergency care by administering Naloxone to a person reasonably believed to be experiencing an opiate related overdose, shall not be liable from the attempt to render emergency care pursuant to Massachusetts General Law, Chapter 112, Section 12FF. This immunity does not apply to acts or omissions constituting gross negligence.

### Background

The Massachusetts Department of Public Health launched the Overdose Education and Naloxone Distribution (OEND) prevention program using intra-nasal Naloxone in an attempt to reverse the trend of increasing fatal and non-fatal overdoses from opioids. Naloxone is an opioid antagonist which means it displaces the opioid from receptors in the brain. An overdose occurs because the opioid is on the same receptor site in the brain that is responsible for breathing. Rapid administration of Naloxone may be life-saving in patients with an overdose by allowing

slowed or absent breathing to resume. It is both safe and effective and has no potential for abuse. Naloxone has been used by paramedics in ambulances and by emergency room clinicians for decades.

**Signs and Symptoms of Opioid Overdose:**

School nurses may administer Naloxone to a patient (student, staff member, or visitor) in the event of respiratory depression, unresponsiveness or respiratory arrest, when an opioid overdose is suspected. The following are signs of an opioid overdose:

- Blue skin tinge-usually lips and fingertips show first
- Body is very limp
- Face is very pale
- Pulse is slow, erratic or not present
- Vomiting
- Choking sounds, gurgling, snoring/gasping noise
- Breathing is very slow, irregular or has stopped
- Unresponsive

**Procedure**

1. **Activate EMS** via Medical Emergency Response Plan. 911 must be called in all potential overdose situations.

2. **Assessment**: When a patient is suspected of an opioid overdose the nurse will conduct an initial assessment of the level of consciousness and respiratory status.

a) For individuals with no pulse: initiate CPR per BLS guidelines.

b) For individuals with a pulse but who are not breathing: establish an airway and perform rescue breathing using a face mask or shield.

c) For individuals who have a pulse and are breathing: assess if there is depression of the respiratory status as evidenced by:

- a very low respiration rate
- interpretation of pulse oximetry measurement, if immediately available

d) Assess for decrease in level of consciousness as evidenced by:

- difficult to arouse (responds to physical stimuli but does not communicate or follow commands, may move spontaneously) or
- unable to arouse (minimal or no response to noxious stimuli, does not communicate or follow commands).

e) Nurse determines need for Naloxone administration

**3. Administration:** Intranasal administration of Naloxone ¶

a. There are exclusion criteria for nasal trauma and epistaxis. Naloxone should not be administered if there is a known hypersensitivity to Naloxone. ¶

b. Assemble Naloxone vial and intranasal atomizer. ¶

- Follow manufacturer direction for administration¶
- Continue rescue breathing or CPR as needed ¶
- If no response, an additional second dose may be administered after 3-5 minutes¶
- Monitor until EMS arrives ¶
- Place the victim in the recovery position and stay with the victim. The recovery position is when you lay the person on his or her side, his or her body is supported by a bent knee and his or her face is turned to the side. ¶

¶

¶

**4. Additional Considerations**: ¶

a. The victim may be angry or combative when he or she wakes up, therefore, it is important to stand back from the victim and, if possible, have a second adult present.¶

b. Potential adverse effects include nausea, diarrhea, abdominal cramping, irritability, restlessness, muscle or bone pain, tearing or nose running, and craving of an opioid.¶

c. Naloxone wears off in thirty (30) to ninety (90) minutes. ¶

¶

**5. Transport** to the nearest hospital via EMS. Students who receive a dose of Naloxone must be sent to the emergency room for follow-up. ¶

¶

**6. Follow-up:** If the administration was to a student, the school nurse will notify student support services and student services will provide substance abuse prevention resources to the student and family, as appropriate. ¶

¶

**7. Documentation:** Record encounter in student/staff school health record. The recording should list the dose, route of administration, and time of delivery. It should include the patient presentation and response to Naloxone. ¶

¶

**8. Training:** The Director of Health Services will provide a training review and informational update annually to ensure that nurses understand this medication, including its uses and side effects. ¶

¶

**9. Procurement:** The superintendent, principal, school nurse or designee will be responsible for the procurement of Naloxone. The medication will be acquired through the State Office of Pharmacy, a prescription from the District's School Physician, or from a pharmacy with a Naloxone standing order, or from the Sudbury Board of Health.¶

¶

**10. Storage:** Naloxone will be stored in the health office at each school. The school nurse will regularly inspect the Naloxone to check the expiration date. ¶

¶

**11. Disposal:** The nurse will use proper disposal of used Naloxone administration delivery systems in accordance with any applicable policies of the Massachusetts Department of Public Health, Division of Food and Drugs. ¶

¶

**12. Medication Errors:** All medication errors will be reported pursuant to 105 CMR 210 and Sudbury Public Schools' medication administration plan.¶

Reference:

Karen Robitaille, Director, MDPH School Health Services 2022, Administration of Naloxone in Schools, Department of Public Health
Jan 25, 2024

# *Sudbury Public Schools*

*40 Fairbank Road*
*Sudbury, Massachusetts 01776*
*Phone: (978) 639-3202*
*Fax: (978) 443-9001*

**Stephanie Juriansz**
*Director of Student Services*
Email: stephanie_juriansz@sudbury.k12.ma.us


**To:** School Committee
**From:** Stephanie Juriansz, Director of Student Services

**Date:** November 16, 2026
**Subject:** Proposed Policy JKAA: Physical Restraint, Seclusion, and Time-Out of Students

**Purpose:** To ensure compliance with the Massachusetts Department of Elementary and Secondary Education (DESE) regulations governing time-out and emergency seclusion, which took effect on August 17, 2026, the District respectfully requests that the School Committee authorize a vote on the proposed replacement of Policy JKAA with the 3rd version, inclusive of all feedback. This proposed policy has been recommended by District Counsel and has the most up-to-date information following the DESE regulations.

Thank you for the thoughtfulness of the Subcommittee and SEPAC; with their partnership, many of the recommendations made this policy read with more clarity and sensitivity, as prevention and alternatives are now captured. Recommendations that were more procedural and that are not aligned with the regulations were encouraged by District Counsel to remain in District procedures and protocols. School Counsel recommends that policy remain broader to align with legal regulations. Since there is limited regulatory language for time-outs and since reporting out on District data to the Committee is procedural, this should not be included in policy. Additionally, specific types of de-escalation training were not included, as these trainings frequently change, and this would require unnecessary updating to policy.

This policy will ensure alignment between School Committee policy, the District's Family Handbook, and the new state regulatory and legal requirements regarding:

> 603 CMR 46.04: Policy and Procedures; Training (1) Procedures. Public education programs shall develop and implement written restraint prevention and behavior support policy and procedures consistent with 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. Such policy and procedures shall be annually reviewed and provided to program staff and made available to parents of enrolled students.

There are three versions of this policy included for reference:

1) The original proposal in Black.
2) The feedback captured from a Policy Subcommittee member is shown in Red & Blue. *(Note: This feedback was not discussed in the Subcommittee or at the October School Committee meeting and was reshared following the meeting.)*
3) The feedback from District Counsel is shown in Pink.

**The District is requesting the School Committee to support the 3rd version, inclusive of all feedback endorsed by District Counsel.**

Approving the policy will support consistent implementation across the district, provide clear guidance to staff and families, and ensure compliance with DESE mandates.

Thank you for your consideration.

Sincerely,

Stephanie Juriansz, Director of Student Services

#1 DRAFT **POLICY JKAA** *(To replace old JKAA)*

## PREVENTION OF PHYSICAL RESTRAINT OF STUDENTS

The Sudbury Public Schools complies with the Massachusetts Department of Elementary and Secondary Education's (hereinafter "MA DESE") regulations governing the use of physical restraint, which can be found at 603 CMR 46.00 et seq. (hereinafter "the Regulations"). According to their terms, the Regulations apply at school and also at school-sponsored events and activities, whether or not on school property. Additional information, including a copy of the Regulations, may be obtained from the Student Services Office or at https://www.doe.mass.edu/lawsregs/603cmr46.html?section=all.

**PURPOSE.** The purpose of this policy is to ensure that every student attending the Sudbury Public Schools is free from the use of physical restraint that is inconsistent with the Regulations. Towards that end, physical restraint shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate, and with extreme caution. School personnel shall use physical restraint with two goals in mind:

a. To administer a physical restraint only when needed to protect a student and/or a member of the school community from assault or imminent, serious, physical harm; and

b. To prevent or minimize any harm to the student as a result of the use of physical restraint.

Consistent with the Regulations, nothing in this policy shall preclude a teacher, employee, or agent of the Sudbury Public Schools from using reasonable force to protect students, other persons or themselves from assault or imminent, serious, physical harm or to implement school-based discipline (such as in school suspension) in accordance with due process and state laws/regulations. In addition, nothing in this Policy or the Regulations prohibits law enforcement or school security personnel from exercising their responsibilities, including physical detainment of an individual alleged to have committed a crime or posing a security risk.

**DEFINITIONS.** (603 CMR 46.02)

Mechanical Restraint: the use of any physical device or equipment to restrict a student's freedom of movement.

- Mechanical restraint does not include devices implemented by trained school personnel, or utilized by a student, which have been prescribed by an appropriate medical or related services professional, and are used for the specific and approved positioning or protective purposes for which such devices were designed. Examples of such devices include: adaptive devices

or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; vehicle safety restraints when used as intended during the transport of a student in a moving vehicle; restraints for medical immobilization; or orthopedically prescribed devices that permit a student to participate in activities without risk of harm.

Medication Restraint: the administration of medication for the purpose of temporarily controlling behavior.

- Medication prescribed by a licensed physician and authorized by the parent for administration in the school setting is not medication restraint.

Physical Escort: a temporary touching or holding, without the use of force, of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is agitated to walk to a safe location.

Physical Restraint: direct physical contact that prevents or significantly restricts a student's freedom of movement.

The following are not physical restraints:

- Brief physical contact to promote student safety.
- Providing physical guidance or prompting when teaching a skill;
- Redirecting attention
- Providing comfort
- Physical escort (as defined above)

Principal: the instructional leader of a public education school program or designee.

Prone Restraint: a physical restraint in which a student is placed face down on the floor or another surface, and physical pressure is applied to the student's body to keep the student in the face-down position. Sudbury Public Schools does not use prone restraints.

Seclusion: involuntary confinement of a student alone in a room or area, with or without adult supervision, from which the student is not permitted to leave. Seclusion occurs when a student is alone in a space and not permitted to leave.

The following are not seclusion:

- A classroom or school environment where, as a general rule, all students need permission to leave the room or area, such as to use the restroom;

- Placing a student in a separate location within a classroom with others or with an instructor, so long as the student has the same opportunity to receive and engage in instruction;
- Time-out as a behavioral support strategy (as defined below)

Time-Out: a behavioral support strategy in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. During time-out, a student must be continuously observed by a staff member in an unlocked setting from which the student is permitted to leave. Staff shall be with the student or immediately available to the student at all times. Time-out shall cease as soon as the student has calmed.

## PHYSICAL RESTRAINT PROCEDURES

### Use of Restraint (603 CMR 46.03)

**Physical restraint is an emergency procedure of last resort** and shall be prohibited in public education programs, including all Sudbury programs, **except when** the student's behavior poses a threat of assault, or imminent, serious, physical harm to self and/or others, and the student is not responsive to verbal directives or other lawful and less intrusive behavior interventions, or such interventions are deemed to be inappropriate under the circumstances.

Physical restraint shall be limited to the use of such reasonable force as is necessary to protect a student or another member of the school community from assault or imminent, serious, physical harm. The staff member administering physical restraint shall use the safest method available and appropriate to the situation, subject to the safety requirements set forth in 603 CMR 46.05.

### Prohibitions

Physical restraint shall not be used:

a. as a means of discipline or punishment;
b. when the student cannot be safely restrained because it is medically contraindicated for reasons including, but not limited to, asthma, seizures, cardiac conditions, obesity, bronchitis, communication-related disabilities, or risk of vomiting;
c. as a response to property destruction, disruption of school order, a student's refusal to comply with a policy or directive, or verbal threats when those actions do not constitute a threat of assault, or imminent, serious, physical harm; or
d. as a standard response for any individual student. No written individual behavior plan or Individualized Education Program (IEP) may include use of physical

restraint as a standard response to any behavior. *Physical restraint is only an emergency procedure of last resort.*

Mechanical restraint, medication restraint, prone restraint, seclusion (unless permitted under the conditions described below) and the use of physical restraint in a manner inconsistent with 603 CMR 46.00 are strictly prohibited in the Sudbury Public Schools.

**Prone restraints** as defined by state regulations are not used in Sudbury programs.

**Seclusion** is prohibited in a public education program except in an emergency situation as a last resort on an individual student basis, called an emergency seclusion, where a student's behavior poses an imminent threat of assault, or imminent serious physical harm to self or others, but only if all of the following conditions, which require specific, advance documentation, are met:

a. The student has a documented history of repeatedly causing serious self-injuries and/or injuries to other students or staff;
b. The student is not responsive to directives or other less intrusive behavior interventions, or such interventions are deemed to be inappropriate under the circumstances;
c. Other forms of intervention have failed to ensure the safety of the student and/or others;
d. There are no medical contraindications, as documented by a licensed physician;
e. There is psychological or behavioral justification for the use of seclusion and no psychological or behavioral contraindications, as documented by a licensed mental health professional;
f. The program has obtained consent from the student's parent and, if appropriate, the student, to use seclusion in an emergency situation and such use has been approved in writing by the Principal;
g. Any individual using seclusion has received training about alternative behavior interventions and management techniques; and
h. The program has documented compliance with (a) and (d) through (g) above in advance of the use of seclusion and maintains the documentation.

No written individual behavior plan or Individualized Education Program (IEP) may include use of seclusion as a standard response to any behavior. At all times during the emergency use of seclusion, a staff member must continuously and actively monitor and observe the student who must be observable in all parts of the room or area being used, be immediately available to the student, and continue to use de-escalation and calming strategies with the student, unless it is unsafe or counterproductive for the purpose of calming the student. The emergency use of seclusion must cease as soon as the student's behavior no

longer poses a threat of assault or immediate serious physical harm to the student or others, or if the student is observed to be in severe distress such as having difficulty breathing. The Principal's approval must be obtained if the emergency seclusion is used for a period longer than 30 minutes.

Any program of the Sudbury Public Schools that uses the emergency intervention of seclusion, consistent with the requirements above, must examine and adopt alternatives and strategies for reducing and eliminating its use no later than 3 years from the effective date of the Regulations (Regulations effective date is August 17, 2026).

**Proper Administration of Physical Restraint**

Only Sudbury Public Schools personnel who have received training pursuant to 603 CMR 46.04(2) or 603 CMR 46.04(3) (i.e., required annual training for all staff or In-depth staff training, respectively) shall administer physical restraint on students. Whenever possible, the administration of a restraint shall be witnessed by at least one adult who does not participate in the restraint. As stated explicitly in the Regulations, however, the training requirements contained in 603 CMR 46.00 - and described in this policy - shall not preclude a teacher, employee or agent of a public education program from using reasonable force to protect students, other persons or themselves from assault or imminent, serious, physical harm.

When administering a physical restraint, trained staff shall comply with the requirements regarding use of force, method, duration of the restraint, and safety, as set forth in the Regulations. A person administering a physical restraint shall use only the amount of force necessary to protect the student or others from physical injury or harm, as well as the safest method available and appropriate to the situation, subject to the safety requirements in the Regulations. In terms of duration of restraint, all physical restraint must be terminated as soon as the student is no longer an immediate danger to himself or others, or the student indicates that he or she cannot breathe, or if the student is observed to be in severe distress, such as having difficulty breathing, or sustained or prolonged crying or coughing.

Additional safety requirements for the use of physical restraint include:

a. No restraint shall be administered in such a way that the student is prevented from breathing or speaking. During the administration of a restraint, a staff member shall continuously monitor the physical status of the student, including skin temperature and color, and respiration.
b. Restraint shall be administered in such a way so as to prevent or minimize physical harm. If, at any time during a physical restraint, the student expresses or

demonstrates significant physical distress, including, but not limited to, difficulty breathing, the student shall be released from the restraint immediately, and school staff shall take steps to seek medical assistance.

c. If a student is restrained for a period longer than 20 minutes, program staff shall obtain the approval of the Principal. The approval shall be based upon the student's continued agitation during the restraint, justifying the need for continued restraint.
d. Program staff shall review and consider any known medical or psychological limitations, known or suspected trauma history, and/or behavioral intervention plans regarding the use of physical restraint on an individual student.
e. After the release of a student from a restraint, program staff shall implement follow-up procedures. These procedures shall include reviewing the incident with the student to address the behavior that precipitated the restraint, reviewing the incident with the staff person(s) who administered the restraint to discuss whether proper restraint procedures were followed; and consideration of whether any follow-up is appropriate for students who witnessed the incident.

## Staff Training

All school staff must receive annual training regarding the Sudbury Public Schools' Restraint Policy. Staff training must occur within the first month of each school year and, for employees hired after the school year begins, within a month of their employment. The schools should maintain documentation of the training.
Training shall include:

- Information on the role of the student, family, and staff in preventing restraint;
- Sudbury's Restraint Prevention and Behavior Support procedures, including the use of time-out as a behavior support strategy distinct from seclusion;
- Interventions that may preclude the need for restraint, including de-escalation techniques and other alternatives to restraint in emergency circumstances;
- Types of permitted physical restraints and related safety considerations, including information about the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration;
- Administering physical restraint in accordance with medical or psychological limitations, known or suspected trauma history, and/or behavioral intervention plans applicable to an individual student; and
- Identification of program staff who have received in-depth training in the use of physical restraint and who may serve as school-wide resources to assist in ensuring proper administration of physical restraint and implementation of the Regulations.

## Reporting Requirements

Staff must report the use of **any** physical restraint as specified in the Regulations as well as the use of an emergency seclusion.

**Reporting to Principal**: The staff member who administered the restraint/emergency seclusion shall verbally inform the principal of the restraint/emergency seclusion as soon as possible and by written report no later than the next school working day. If the principal administered the restraint/emergency seclusion, the principal shall prepare the written report and submit it to the individual or team that the superintendent designates for review.

- **Maintain Ongoing Record:** The principal shall maintain an ongoing record of all reported instances of physical restraint and emergency seclusion, if any (the "Physical Restraint Log" and "Seclusion Log"), which must be made available for review by the parent consistent with the student record regulations or the Massachusetts Department of Elementary and Secondary Education (MA DESE) upon request.
- **Weekly Review:** The principal shall conduct **a weekly review** of the Physical Restraint Log and Seclusion Log to identify students who have been restrained/emergency secluded multiple times during the week.
    - If such students are identified, the principal shall convene one or more review teams, as the principal deems appropriate, to assess each student's progress and needs. If the principal directly participated in a restraint/emergency seclusion, a duly qualified person designated by the superintendent shall lead the review team's discussion.
    - The review team's assessment shall include at least the following:
        - review and discussion of the written reports submitted in accordance with the Regulations and any comments the student and parent provided about the reports and the use of the restraints/emergency seclusion;
        - an analysis of the circumstances leading up to each restraint/emergency seclusion, including factors such as time of day, day of the week, antecedent events, and individuals involved;
        - consideration of factors that may have contributed to escalation of behaviors, consideration of alternatives to restraint/emergency seclusion, including de-escalation techniques and possible interventions, and such other strategies and decisions as appropriate, with the goal of reducing or eliminating the use of restraint in the future; and agreement on a written plan of action by the program.
    - The principal shall ensure that a record of each individual student review team is maintained and made available for review by MA DESE or the parent, upon request.
- **Monthly Review:** The principal shall conduct **a monthly review** of the Physical Restraint Log and Seclusion Log. This review shall consider

patterns of use of restraints/emergency seclusion by similarities in the time of day, day of week, or individuals involved; the number and duration of restraints/emergency seclusions school-wide and for individual students; the number and type of injuries, if any, resulting from use of restraint. The principal shall determine whether it is necessary or appropriate to modify the school district's policy, conduct additional training on restraint reduction/prevention strategies (e.g., positive behavioral interventions and supports) or take such other appropriate action necessary or appropriate to reduce or eliminate restraints.

**Reporting to Parents**: The principal shall make reasonable efforts to inform the student's parent of the restraint/emergency seclusion within 24 hours of the event and shall notify the student's parent by written report sent within three school working days of the restraint/emergency seclusion either to an email address provided by the parent for communication about the student or by regular mail postmarked no later than three school working days of the restraint/emergency seclusion. The written report must contain the information set forth in 603 CMR 46.06(4). The principal must ensure that the written restraint/emergency seclusion report provided to the student's parent is provided to the parent in the language in which report cards and other necessary school-related information are customarily provided to the parent. The principal shall provide the student and the parent an opportunity to comment orally and in writing on the use of the restraint/emergency seclusion and on information in the written report.

**Reporting to MA DESE:** When a physical restraint or emergency seclusion has resulted in an injury to either a student or staff member, the Sudbury Public Schools shall send a copy of the written report of that restraint/emergency seclusion to MA DESE no later than three (3) school working days of the administration of the restraint/emergency seclusion, along with a copy of Physical Restraint Log and Seclusion Log, if any, for the 30-day period before the reported restraint/emergency seclusion.

Additionally, the Sudbury Public Schools must collect and annually report data to the MA DESE regarding the use of physical restraints and emergency seclusion. Sudbury shall report the data in the manner and form the MA DESE directs.

## TIME-OUT USE PROCEDURES

**Time-out** is a behavioral support strategy in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. During time-out, a student must be continuously observed by a staff member in an unlocked setting from which the student is permitted to leave. Staff shall

be with the student or immediately available to the student at all times. Time-out shall cease as soon as the student has calmed.

If a program uses time-out as a behavioral support strategy, the program must have a procedure for the use of time-out that includes a process for obtaining principal approval of time-out for more than 30 minutes based on the individual student's continuing agitation. Time-out strategies and usage shall be used in accordance with DESE guidance and regulations. Each school that utilizes time-out as a behavioral strategy will have written procedures consistent with state laws and regulations.

## Safeguards for Areas Used for Time-Out or Emergency Seclusion

Any room or area used for time-out must be clean, safe, and sanitary; appropriate for the purpose of calming students, including, but not limited to, being of appropriate size for the age and the needs of the student; appropriately lighted, ventilated, and heated or cooled (consistent with the remainder of the building); free of objects or fixtures that are inherently dangerous to the student; and in compliance with any applicable local fire and building code requirements and any other standards listed by the MA DESE in guidance.

Any room or space used for emergency seclusion as permitted under the conditions enumerated in 603 CMR 46.07(2) must meet the same physical space safeguards set forth in the paragraph above that are required for a time-out space. Sudbury Public Schools must ensure that school administration has inspected any room or space for compliance with these physical space safeguards at a minimum of one time per week during which the room or area is used for emergency seclusion.

## Preventing Student Violence, Self-Injurious Behavior, and Suicide

As set forth in the Regulations, the Sudbury Public Schools shall develop methods for preventing student violence, self-injurious behavior, and suicide, including individual crisis planning and de-escalation of potentially dangerous behavior occurring among groups of students or with an individual student.

## Parent Engagement

In accordance with the Regulations, the Sudbury Public Schools shall engage parents in discussions about restraint prevention and the use of restraint solely as an emergency procedure of last resort. Sudbury Public Schools will post this policy regarding the Prevention of Physical Restraint of Students on the school district's website and will include the policy in school handbooks. Sudbury Public Schools welcomes parents to request a meeting with their child's principal or IEP Team Chair to discuss any individual

use of physical restraint or emergency seclusion or physical restraint, time-out procedures, and emergency seclusion in general.

**Complaint Procedure**

The Sudbury Public Schools will consider and investigate any complaints that the school district receives regarding the school district's physical restraint practices, including, but not limited to, complaints related to time-out and emergency seclusion practices.

Sudbury has developed a complaint form to assist individuals with sharing their concerns (**Complaint Form**). Sudbury accepts online submissions of this complaint form as well as complaints submitted via fax, email, US mail, and in-person. Anyone who prefers or needs a paper copy of the complaint form, has difficulty accessing the online form, has additional questions or requires assistance with submitting a complaint may contact the Sudbury Public Schools' Student Services office at:

*Sudbury Public Schools*
*Director of Student Services*
40 Fairbank Road
Sudbury, MA 01776
(978) 639-3202 Fax: (978) 443-9001
Student_Services@sudbury.k12.ma.us

Complaints must be filed within sixty (60) school days of the event giving rise to the complaint.

The District will investigate the complaint, including interviewing any witnesses deemed necessary and appropriate and reviewing relevant written documentation and data related to the concern. The District's investigation generally will be completed within twenty (20) school days of receiving the complaint. If this general timeline is not met, the District will document the reason(s) for not meeting the timeline. If the complainant is dissatisfied with the determination following the investigation, the complainant may appeal to the Superintendent of Schools who may be reached at 40 Fairbank Road, Sudbury, MA 01776.

#2 DRAFT **POLICY JKAA (To replace old JKAA) with Subcommittee Feedback**

JKAA - ~~PREVENTION OF PHYSICAL RESTRAINT OF STUDENTS~~ Physical Restraint, Time-Out & Seclusion of Students

The Sudbury Public Schools complies with the Massachusetts Department of Elementary and Secondary Education's (hereinafter "MA DESE") regulations governing the use of physical restraint, which can be found at 603 CMR 46.00 et seq. (hereinafter "the Regulations"). According to their terms, the Regulations apply at school and also at school-sponsored events and activities, whether or not on school property. Additional information, including a copy of the Regulations, may be obtained from the Student Services Office or at https://www.doe.mass.edu/lawsregs/603cmr46.html?section=all.

## PURPOSE

The purpose of this policy is to ensure that every student attending the Sudbury Public Schools is free from the use of physical restraint that is inconsistent with the Regulations. Towards that end, physical restraint shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate, and with extreme caution. School personnel shall use physical restraint with two goals in mind:

a) To administer a physical restraint only when needed to protect a student and/or a member of the school community from assault or imminent, serious, physical harm; and
b) To prevent or minimize any harm to the student as a result of the use of physical restraint.

Consistent with the Regulations, nothing in this policy shall preclude a teacher, employee, or agent of the Sudbury Public Schools from using reasonable force to protect students, other persons or themselves from assault or imminent, serious, physical harm or to implement school-based discipline (such as in school suspension) in accordance with due process and state laws/regulations. In addition, nothing in thisPolicy or the Regulations prohibits law enforcement or school security personnel from exercising their responsibilities, including physical detainment of an individual alleged to have committed a crime or posing a security risk.

## DEFINITIONS

**Mechanical Restraint:** the use of any physical device or equipment to restrict a student's freedom of movement.

· Mechanical restraint does not include devices implemented by trained school personnel, or utilized by a student, which have been prescribed by an appropriate medical or related services professional, and are used for the specific and approved positioning or protective purposes for which such devices were designed. Examples of such devices include: adaptive devices or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; vehicle safety restraints when used as intended during the transport of a student in a moving vehicle; restraints for medical immobilization; or orthopedically prescribed devices that permit a student to participate in activities without risk of harm.

**Medication Restraint:** the administration of medication for the purpose of temporarily controlling

behavior.

· Medication prescribed by a licensed physician and authorized by the parent/guardian for administration in the school setting is not medication restraint.

**Physical Escort:** a temporary touching or holding, without the use of force, of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is agitated to walk to a safe location.

**Physical Restraint:** direct physical contact that prevents or significantly restricts a student's freedom of movement.

The following are **not** physical restraints:

- Brief physical contact to promote student safety (such as guiding a student or re-directing a student).
- Providing physical guidance or prompting when teaching a skill;
- Redirecting attention
- Providing comfort by touch (such as a shoulder or torso)
- Physical escort (as defined above)

**Principal:** the instructional leader of a public education school program or designee.

**Prone Restraint:** a physical restraint in which a student is placed face down on the floor or another surface, and physical pressure is applied to the student's body to keep the student in the face-down position. Sudbury Public Schools does not use prone restraints.

**Seclusion:** involuntary confinement of a student alone in a room or area, with or without adult supervision, from which the student is not permitted to leave. ~~Seclusion occurs when a student is alone in a space and not permitted to leave.~~

The following are **not** seclusion:

- A classroom or school environment where, as a general rule, all students need permission to leave the room or area, such as to use the restroom; o Placing a student in a separate location within a classroom with others or with an instructor, so long as the student has the same opportunity to receive and engage in instruction;
- Time-out ~~as a behavioral support strategy~~ (as defined below)

**Time-Out:** a behavioral support strategy in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. During time-out, a student must be continuously observed by a staff member in an unlocked setting from which the student is permitted to leave. Staff shall be with the student or immediately available to the student at all times. Time-out shall cease as soon as the student has calmed.

## PHYSICAL RESTRAINT PROCEDURES

### *Use of Restraint (603 CMR 46.03)*

**Physical restraint is an emergency procedure of last resort** and shall be prohibited in public education programs, including all Sudbury programs, **except** when the student's behavior poses a threat of assault, or imminent, serious, physical harm to self and/or others, and the student is not responsive to verbal directives or other lawful and less intrusive behavior interventions, or such interventions are deemed to be inappropriate under the circumstances.

Physical restraint shall be limited to the use of such reasonable force as is necessary to protect a

student or another member of the school community from assault or imminent, serious, physical harm. The staff member administering physical restraint shall use the safest method available and appropriate to the situation, subject to the safety requirements set forth in 603 CMR 46.05.

**Prohibitions**

Physical restraint **shall not** be used:

a. as a means of discipline or punishment;
b. when the student cannot be safely restrained because it is medically contraindicated for reasons including, but not limited to, asthma, seizures, cardiac conditions, obesity, bronchitis, communication-related disabilities, or risk of vomiting;
c. as a response to property destruction, disruption of school order, a student's refusal to comply with a policy or directive, or verbal threats when those actions do not constitute a threat of assault, or imminent, serious, physical harm; or
*d.* as a standard response for any individual student. No written individual behavior plan or Individualized Education Program (IEP) may include use of physical restraint as a standard response to any behavior. *Physical restraint is only anemergency procedure of last resort.*

Mechanical restraint, medication restraint, prone restraint, seclusion (unless permitted under the conditions described below) and the use of physical restraint in a manner inconsistent with 603 CMR 46.00 are strictly prohibited in the Sudbury Public Schools.
**Prone restraints** as defined by state regulations are not used in Sudbury programs.

**Seclusion** is prohibited ~~in a public education program~~ except in an emergency situation as a last resort on an individual student basis, called an emergency seclusion, where a student's behavior poses an imminent threat of assault, or imminent serious physical harm to self or others, but only if all of the following conditions, which require specific, advance documentation, are met:

a. The student has a documented history of repeatedly causing serious self-injuries and/or injuries to other students or staff;
b. The student is not responsive to directives or other less intrusive behavior interventions, or such interventions are deemed to be inappropriate under the circumstances;
c. Other forms of intervention have failed to ensure the safety of the student and/or others;
d. There are no medical contraindications, as documented by a licensed physician; e. There is psychological or behavioral justification for the use of seclusion and no psychological or behavioral contraindications, as documented by a licensed mental health professional;
f. The program has obtained consent from the student's parent/guardian and, if appropriate, the student, to use seclusion in an emergency situation and such use has been approved in writing by the Principal;
g. Any individual using seclusion has received training about alternative behavior interventions and management techniques; and
h. The program has documented compliance with (a) and (d) through (g) above in advance of the use of seclusion and maintains the documentation.

No written individual behavior plan or Individualized Education Program (IEP) may include use of seclusion as a standard response to any behavior. At all times during the emergency use of seclusion, a staff member must continuously and actively monitor and observe the student who must be observable in all parts of the room or area being used, be immediately available to the student, and continue to use de-escalation and calming strategies with the student, unless it is unsafe or counterproductive for the purpose of calming the student. The emergency use of

seclusion must cease as soon as the student's behavior no longer poses a threat of assault or immediate serious physical harm to the student or others, or if the student is observed to be in severe distress such as having difficulty breathing. The Principal's approval must be obtained if the emergency seclusion is used for a period longer than 30 minutes.

Any program of the Sudbury Public Schools that uses the emergency intervention of seclusion, consistent with the requirements above, must examine and adopt alternatives and strategies for reducing and eliminating its use no later than 3 years from the effective date of the Regulations ~~(Regulations effective date is August 17, 2026)~~.

**Proper Administration of Physical Restraint AND SAFETY REQUIREMENTS**

Only Sudbury Public Schools personnel who have received training in Non-Violent Crisis Intervention (NVCI) through the Crisis Prevention Institute (CPI) or Crisis, Aggression, Limitation, Management (CALM) through New England Center for Children (NECC) pursuant to 603CMR 46.04(2) or 603 CMR 46.04(3) (i.e., required annual training for all staff or In-depth staff training, respectively) shall administer physical restraint on students.

Whenever possible, the administration of a restraint shall be witnessed by at least one adult who does not participate in the restraint. As stated explicitly in the Regulations, however, the training requirements contained in 603 CMR 46.00 - and described in this policy – shall not preclude a teacher, employee or agent of a public education program from using reasonable force to protect students, other persons or themselves from assault or imminent, serious, physical harm.

When administering a physical restraint, trained staff shall comply with the requirements regarding use of force, method, duration of the restraint, and safety, as set forth in theRegulations. A person administering a physical restraint shall use only the amount of force necessary to protect the student or others from physical injury or harm, as well as the safest method available and appropriate to the situation, subject to the safety requirements in the Regulations. In terms of duration of restraint, all physical restraint must be terminated as soon as the student is no longer an immediate danger to himself or others, or the student indicates that he or she cannot breathe, or if the student is observed to be in severe distress, such as having difficulty breathing, or sustained or prolonged crying or coughing.

Additional safety requirements for the use of physical restraint include:

a. No restraint shall be administered in such a way that the student is prevented from breathing or speaking. During the administration of a restraint, a staff member shall continuously monitor the physical status of the student, including skin temperature and color, and respiration.
b. Restraint shall be administered in such a way so as to prevent or minimize physical harm. If, at any time during a physical restraint, the student expresses or demonstrates significant physical distress, including, but not limited to, difficulty breathing, the student shall be released from the restraint immediately, and school staff shall take steps to seek medical assistance.
c. If a student is restrained for a period longer than 20 minutes, program staff shall obtain the approval of the Principal. The approval shall be based upon the student's continued agitation during the restraint, justifying the need for continued restraint.
d. Program staff shall review and consider any known medical or psychological limitations, known or suspected trauma history, and/or behavioral intervention plans regarding the use of physical restraint on an individual student.

e. After the release of a student from a restraint, program staff shall implement follow-up procedures. These procedures shall include reviewing the incident with the student to address the behavior that precipitated the restraint, reviewing the incident with the staff person(s) who administered the restraint to discuss whether proper restraint procedures were followed; and consideration of whether any follow-up is appropriate for students who witnessed the incident.

**Staff Training**

All school staff must receive annual training regarding the Sudbury Public Schools' Restraint Policy. Staff training must occur within the first month of each school year and, for employees hired after the school year begins, within a month of their employment. The schools should maintain documentation of the training. Training shall include:

- Information on the role of the student, family, and staff in preventing restraint;
- Sudbury's Restraint Prevention and Behavior Support procedures, including the use of time-out as a behavior support strategy distinct from seclusion;
- Interventions that may preclude the need for restraint, including de-escalation techniques and other alternatives to restraint in emergency circumstances;
- Types of permitted physical restraints and related safety considerations, including information about the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration;
- Administering physical restraint in accordance with medical or psychological limitations, known or suspected trauma history, and/or behavioral intervention plans applicable to an individual student; and
- Identification of program staff who have received in-depth training in the use of physical restraint and who may serve as school-wide resources to assist in ensuring proper administration of physical restraint and implementation of the Regulations.

**Reporting Requirements**

Staff must report the use of **any** physical restraint as specified in the Regulations as well as the use of an emergency seclusion.

**Reporting to Principal:** The staff member who administered the restraint/emergency seclusion shall verbally inform the principal of the restraint/emergency seclusion as soon as possible and by written report no later than the next school working day. If the principal administered the restraint/emergency seclusion, the principal shall prepare the written report and submit it to the individual or team that the superintendent designates for review.

- **Maintain Ongoing Record:** The principal shall maintain an ongoing record of all reported instances of physical restraint and emergency seclusion, if any (the "Physical Restraint Log" and "Seclusion Log"), which must be made available for review by the parent/guardian consistent with the student record regulations or the Massachusetts Department of Elementary and Secondary Education (MADESE) upon request.
- **Weekly Review:** The principal shall conduct **a weekly review** of the Physical Restraint Log and Seclusion Log to identify students who have been restrained/emergency secluded multiple times during the week.
- If such students are identified, the principal shall convene one or more review teams, as the principal deems appropriate, to assess each student's progress and needs. If the principal directly participated in a restraint/emergency seclusion, a duly qualified person designated by

the superintendent shall lead the review team's discussion.

- The review team's assessment shall include at least the following: · review and discussion of the written reports submitted in accordance with the Regulations and any comments the student and parent/guardian provided about the reports and the use of the restraints/emergency seclusion;
  - an analysis of the circumstances leading up to each restraint/emergency seclusion, including factors such as time of day, day of the week, antecedent events, and individuals involved;
  - consideration of factors that may have contributed to escalation of behaviors, consideration of alternatives to restraint/emergency seclusion, including de-escalation techniques and possible interventions, and such other strategies and decisions as appropriate, with the goal of reducing or eliminating the use of restraint in the future; and agreement on a written plan of action by the program.
- The principal shall ensure that a record of each individual student review team is maintained and made available for review by MA DESE or the parent/guardian, upon request.
- **Monthly Review:** The principal shall conduct a **monthly review** of the Physical Restraint Log and Seclusion Log. This review shall consider patterns of use of restraints/emergency seclusion by similarities in the time of day, day of week, or individuals involved; the number and duration of restraints/emergency seclusions school-wide and for individual students; the number and type of injuries, if any, resulting from use of restraint. The principal shall determine whether it is necessary or appropriate to modify the school district's policy, conduct additional training on restraint reduction/prevention strategies (e.g., positive behavioral interventions and supports) or take such other appropriate action necessary or appropriate to reduce or eliminate restraints.

**Reporting to Parents/Guardians:** The principal or designee shall make reasonable efforts to verbally notify the student's parent/guardian as soon as possible following the use of physical restraint or emergency seclusion, with the goal of providing notification on the same day the incident occurred. If circumstances prevent same-day notification, reasonable efforts shall be made to provide notification as soon as possible, and, in all cases, within 24 hours of the event, consistent with 603 CMR 46.06(4). Notifications should be made through a method reasonably calculated to provide timely, direct communication with the parent/guardian.
~~The principal shall make reasonable efforts to inform the student's parent of the restraint/emergency seclusion within 24 hours of the event~~
~~and~~ In addition to verbal notification, the principal shall notify the student's parent/guardian by written report sent within three school working days of the restraint/emergency seclusion either to an email address provided by the parent/guardian for communication about the student or by regular mail postmarked no later than three school working days of the restraint/emergency seclusion. The written report must contain the information set forth in 603 CMR 46.06(4). The principal must ensure that the written restraint/emergency seclusion report provided to the student's parent/guardian is provided to the parent/guardian in the language in which report cards and other necessary school-related information are customarily provided to the parent/guardian. The principal shall provide the student and the parent/guardian an opportunity to comment orally and in writing on the use of the restraint/emergency seclusion and on information in the written report.

**Reporting to MA DESE:** When a physical restraint or emergency seclusion has resulted in an injury to either a student or staff member, the Sudbury Public Schools shall send a copy of the written report of that restraint/emergency seclusion to MADESE no later than three (3) school working days of the administration of the restraint/emergency seclusion, along with a copy of Physical Restraint Log

andSeclusion Log, if any, for the 30-day period before the reported restraint/emergency seclusion.

Additionally, the Sudbury Public Schools must collect and annually report data to theMA DESE regarding the use of physical restraints and emergency seclusion. Sudbury shall report the data in the manner and form the MA DESE directs.

**PREVENTION AND ALTERNATIVES TO PHYSICAL RESTRAINT** Students, families/caregivers, school staff, and administrators each play an important role in preventing the need for physical restraint and supporting the safety and well being of the school community.

School staff shall use appropriate positive behavioral supports, de-escalation strategies, and other lawful and less intrusive interventions whenever feasible before physical restraint is considered. Such strategies may include, as appropriate to the individual student and circumstances, verbal redirection, offering choices, movement or sensory breaks, opportunities to communicate needs or take a break, reducing demands when appropriate, access to supportive school personnel, and other positive behavioral interventions.

When a student has an individualized behavior support plan, behavior intervention plan, safety plan, or other applicable individualized plan, staff shall consider and implement the interventions identified in that plan, as appropriate to the circumstances.

**TIME-OUT USE PROCEDURES**

Time-out is a behavioral support strategy in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. During time-out, a student must be continuously observed by a staff member in an unlocked setting from which the student is permitted to leave. Staff shall be with the student or immediately available to the student at all times. Time-out shall cease as soon as the student has calmed.
~~If a program uses time-out as a behavioral support strategy, the program must have a procedure for the use of time-out that includes a process for obtaining principal approval of time-out for more than 30 minutes based on the individual student's continuing agitation. Time-out strategies and usage shall be used in accordance with DESEguidance and regulations. Each school that utilizes time-out as a behavioral strategy will have written procedures consistent with state laws and regulations.~~

Whenever practicable and safe, a staff member should be physically present with the student during time-out. If remaining with the student would be unsafe or counterproductive to the purpose of calming, staff shall remain immediately available and continuously observe the student.

A student's readiness to end time-out shall be based on the individual student's presentation and observable signs that the student has calmed. A student shall not be required to complete a specific task, checklist, or other predetermined requirement as a condition of ending time-out.

If a time-out lasts longer than 30 minutes, staff shall obtain approval from the principal or designee to continue the time-out. Any such approval shall be based on careful consideration of the individual student's presentation and continuing level of agitation. If the student has calmed, the time-out shall cease.

For any time-out approaching or exceeding 30 minutes, staff shall consider appropriate follow-up with the student, including debriefing the incident at a later time, and whether the student's

behavior warrants convening the student's Team, reviewing or modifying an existing behavior support plan, or developing additional behavioral supports.

Staff shall make reasonable efforts to notify the student's parent/guardian on the same day as the extended time-out and, in all cases, within 24 hours, and shall offer the parent/guardian an opportunity to discuss the circumstances of the extended time-out. Time-out does not include routine activities or changes in a student's location that are not for the purpose of separating the student from a learning activity or classroom for the purpose of calming. Examples may include visits to the school nurse or administrator, participation in individual or small-group instruction outside the classroom, or performing a school-related errand.

Time-out also does not include calming strategies used within the classroom when the student remains part of the classroom environment and has the opportunity to receive and engage in instruction, such as providing the student with a different location within the classroom.

**DOCUMENTATION OF TIME-OUT**

School staff shall document any time-out approaching or exceeding 30 minutes. Documentation shall include, as applicable, the date; location; beginning time and duration; circumstances and behavior preceding the time-out; staff member initiating the time-out; less restrictive or de-escalation strategies attempted; staff member(s) present or monitoring the student; strategies used to support the student in calming; principal or designee approval if the time-out exceeded 30 minutes; and efforts to notify the student's parent/guardian.

The principal or designee shall maintain and periodically review documentation of extended time-outs to identify patterns, consider whether additional supports or interventions are appropriate, and identify opportunities to reduce the frequency or duration of extended time-outs.

**Safeguards for Areas Used for Time-Out or Emergency Seclusion**

Any room or area used for time-out must be clean, safe, and sanitary; appropriate for the purpose of calming students, including, but not limited to, being of appropriate size for the age and the needs of the student; appropriately lighted, ventilated, and heated or cooled (consistent with the remainder of the building); free of objects or fixtures that are inherently dangerous to the student; and in compliance with any applicable local fire and building code requirements and any other standards listed by the MA DESE inguidance.

Any room or space used for emergency seclusion as permitted under the conditions enumerated in 603 CMR 46.07(2) must meet the same physical space safeguards set forth in the paragraph above that are required for a time-out space. Sudbury PublicSchools must ensure that school administration has inspected any room or space for compliance with these physical space safeguards at a minimum of one time per week during which the room or area is used for emergency seclusion.

**Preventing Student Violence, Self-Injurious Behavior, and Suicide**

As set forth in the Regulations, the Sudbury Public Schools shall develop methods for preventing student violence, self-injurious behavior, and suicide, including individual crisis planning and de-escalation of potentially dangerous behavior occurring amonggroups of students or with an individual student.

**Parent/Guardian Engagement**

In accordance with the Regulations, the Sudbury Public Schools shall engage parents/guardians in discussions about restraint prevention and the use of restraint solely as an emergency procedure of last resort. Sudbury Public Schools will post this policy regarding the ~~Prevention of Physical Restraint of Students~~ Physical Restraint, Time-Out & Seclusion of Students on the school district's website and will include the policy in school handbooks. Sudbury Public Schools welcomes parents/guardians to request a meeting with their child's principal or IEP Team Chair to discuss any individual use of physical restraint or emergency seclusion or physical restraint, time-out procedures, and emergency seclusion in general.

The District's written procedures implementing this policy, including procedures governing physical restraint, time-out, emergency seclusion, and parent/guardian notification, shall be made available to parents/guardians and members of the public upon request.

**Complaint Procedure**

The Sudbury Public Schools will consider and investigate any complaints that the school district receives regarding the school district's physical restraint practices, including, but not limited to, complaints related to time-out and emergency seclusion practices.

Sudbury has developed a complaint form to assist individuals with sharing their concerns (Complaint Form). Sudbury accepts online submissions of this complaint form as well as complaints submitted via fax, email, US mail, and in-person. Anyone who prefers or needs a paper copy of the complaint form, has difficulty accessing the online form, has additional questions or requires assistance with submitting a complaint may contact the Sudbury Public Schools' Student Services office at:

Sudbury Public Schools
Director of Student Services
40 Fairbank Road
Sudbury, MA 01776
(978) 639-3202 Fax: (978) 443-9001
Student_Services@sudbury.k12.ma.us

Complaints must be filed within sixty (60) school days of the event giving rise to the complaint.

The District will investigate the complaint, including interviewing any witnesses deemed necessary and appropriate and reviewing relevant written documentation and data related to the concern. The District's investigation generally will be completed within twenty (20) school days of receiving the complaint. If this general timeline is not met, the District will document the reason(s) for not meeting the timeline. If the complainant is dissatisfied with the determination following the investigation, the complainant may appeal to the Superintendent of Schools who may be reached at 40 Fairbank Road, Sudbury, MA 01776.

**School Committee Oversight**

At least annually, the Superintendent shall provide the School Committee with an aggregate report regarding implementation of this policy. The report shall include, to the

extent available and appropriate, District-wide data and trends regarding physical restraint and emergency seclusion, the number of restraints lasting more than 20 minutes, the number of emergency seclusions lasting more than 30 minutes, restraint or seclusion-related injuries required to be reported to MA DESE, patterns or repeated use identified through District review, and actions taken to reduce or eliminate the need for physical restraint and emergency seclusion. All reporting shall protect student confidentiality and shall not identify individual students.

To the extent the District maintains aggregate data regarding extended or repeated use of time-out, the annual report shall also include relevant District-wide trends regarding time-out.

The aggregate annual report shall also be made available to the Sudbury Special Education Parent Advisory Council (SEPAC).

**LEGAL REFS.:**
M.G.L. c. 71, § 37G
603 CMR 46.00 – Prevention of Physical Restraint and Requirements If Used

**SOURCE/ADDITIONAL GUIDANCE:**
Massachusetts Department of Elementary and Secondary Education, *Special Education Policy Memo SY2025-2026 — 1: Amendments to DESE's Regulations at 603 CMR 46.00 and 603 CMR 18.00 (Use of Time-Out Practices)*
Massachusetts Department of Elementary and Secondary Education, *Special Education Policy Memo SY2025-2026 — 5: Guidance on Time-Out Practices and Implementation of Amendments to 603 CMR 46.00 and 603 CMR 18.00*

Policy adopted by the Sudbury School Committee on DATE.

#3 DRAFT With Legal and SPS and Subcommittee Feedback

**POLICY JKAA (To replace old JKAA)**

JKAA - ~~PREVENTION OF PHYSICAL RESTRAINT OF STUDENTS~~ Physical Restraint, Seclusion and ~~-~~Time-Out ~~& Seclusion~~ of Students

The Sudbury Public Schools complies with the Massachusetts Department of Elementary and Secondary Education's (hereinafter "MA DESE") regulations governing the use of physical restraint, which can be found at 603 CMR 46.00 et seq. (hereinafter "the Regulations"). According to their terms, the Regulations apply at school and also at school-sponsored events and activities, whether or not on school property. Additional information, including a copy of the Regulations, may be obtained from the Student Services Office or at https://www.doe.mass.edu/lawsregs/603cmr46.html?section=all.

## PURPOSE

The purpose of this policy is to ensure that every student attending the Sudbury Public Schools is free from the use of physical restraint and seclusion that is inconsistent with the Regulations. Towards that end, physical restraint and seclusion shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate, and with extreme caution. School personnel shall use physical restraint or seclusion with two goals in mind:

a) To administer ~~a physical restraint~~ only when needed to protect a student and/or a member of the school community from assault or imminent, serious, physical harm; and
b) To prevent or minimize any harm to the student as a result of the use of physical restraint/seclusion.

Consistent with the Regulations, nothing in this policy shall preclude a teacher, employee, or agent of the Sudbury Public Schools from using reasonable force to protect students, other persons or themselves from assault or imminent, serious, physical harm or to implement school-based discipline (such as in-school suspension) in accordance with due process and state laws/regulations. In addition, nothing in this Policy or the Regulations prohibits law enforcement or school security personnel from exercising their responsibilities, including physical detainment of an individual alleged to have committed a crime or posing a security risk.

## DEFINITIONS

**Mechanical Restraint:** the use of any physical device or equipment to restrict a student's freedom of movement.

· Mechanical restraint does not include devices implemented by trained school personnel, or utilized by a student, which have been prescribed by an appropriate medical or related services professional, and are used for the specific and approved positioning or protective purposes for which such devices were designed. Examples of such devices include: adaptive devices or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; vehicle safety restraints when used as intended during the transport

of a student in a moving vehicle; restraints for medical immobilization; or orthopedically prescribed devices that permit a student to participate in activities without risk of harm.

**Medication Restraint:** the administration of medication for the purpose of temporarily controlling behavior.

· Medication prescribed by a licensed physician and authorized by the parent/guardian for administration in the school setting is not medication restraint.

**Physical Escort:** a temporary touching or holding, without the use of force, of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is agitated to walk to a safe location.

**Physical Restraint:** direct physical contact that prevents or significantly restricts a student's freedom of movement.

The following are **not** physical restraints:

- Brief physical contact to promote student safety (such as guiding a student or re-directing a student).
- Providing physical guidance or prompting when teaching a skill;
- Redirecting attention
- Providing comfort by touch (such as a shoulder or torso)
- Physical escort (as defined above)

**Principal:** the instructional leader of a public education school program or designee.

**Prone Restraint:** a physical restraint in which a student is placed face down on the floor or another surface, and physical pressure is applied to the student's body to keep the student in the face-down position. Sudbury Public Schools does not use prone restraints.

**Seclusion:** involuntary confinement of a student alone in a room or area, with or without adult supervision, from which the student is not permitted to leave. ~~Seclusion occurs when a student is alone in a space and not permitted to leave.~~ Seclusion occurs when a student is alone in a space and not permitted to leave.

The following are **not** seclusion:

- A classroom or school environment where, as a general rule, all students need permission to leave the room or area, such as to use the restroom;
- Placing a student in a separate location within a classroom with others or with an instructor, so long as the student has the same opportunity to receive and engage in instruction;
- Time-out ~~as a behavioral support strategy~~ as a behavioral support strategy (as defined below)

**Time-Out:** a behavioral support strategy in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. During time-out, a student must be continuously observed by a staff member in an unlocked setting from which the student is permitted to leave. Staff shall be with the student or immediately available to the student at all times. Time-out shall cease as soon as the student has calmed.

## PHYSICAL RESTRAINT PROCEDURES

### *Use of Restraint (603 CMR 46.03)*

**Physical restraint is an emergency procedure of last resort** and shall be prohibited in public education programs, including all Sudbury programs, **except** when the student's behavior poses a threat of assault, or imminent, serious, physical harm to self and/or others, and the student is not responsive to verbal directives or other lawful and less intrusive behavior interventions, or such interventions are deemed to be inappropriate under the circumstances.

Physical restraint shall be limited to the use of such reasonable force as is necessary to protect a student or another member of the school community from assault or imminent, serious, physical harm. The staff member administering physical restraint shall use the safest method available and appropriate to the situation, subject to the safety requirements set forth in 603 CMR 46.05.

## Prohibitions

Physical restraint **shall not** be used:

a. as a means of discipline or punishment;
b. when the student cannot be safely restrained because it is medically contraindicated for reasons including, but not limited to, asthma, seizures, cardiac conditions, obesity, bronchitis, communication-related disabilities, or risk of vomiting;
c. as a response to property destruction, disruption of school order, a student's refusal to comply with a policy or directive, or verbal threats when those actions do not constitute a threat of assault, or imminent, serious, physical harm; or
*d.* as a standard response for any individual student. No written individual behavior plan or Individualized Education Program (IEP) may include use of physical restraint as a standard response to any behavior. *Physical restraint is only an emergency procedure of last resort.*

Mechanical restraint, medication restraint, prone restraint, seclusion (unless permitted under the conditions described below), and the use of physical restraint in a manner inconsistent with 603 CMR 46.00 are strictly prohibited in the Sudbury Public Schools.

**Prone restraints** as defined by state regulations are not used in Sudbury programs.

**Seclusion** is prohibited ~~in a public education program~~ in a public education program except in an emergency situation as a last resort on an individual student basis, called an emergency seclusion, where a student's behavior poses an imminent threat of assault, or imminent serious physical harm to self or others, but only if all of the following conditions, which require specific, advance documentation, are met:

a. The student has a documented history of repeatedly causing serious self-injuries and/or injuries to other students or staff;
b. The student is not responsive to directives or other less intrusive behavior interventions, or such interventions are deemed to be inappropriate under the circumstances;
c. Other forms of intervention have failed to ensure the safety of the student and/or others;
d. There are no medical contraindications, as documented by a licensed physician;
e. There is psychological or behavioral justification for the use of seclusion and no psychological or behavioral contraindications, as documented by a licensed mental health professional;
f. The program has obtained consent from the student's parent/guardian and, if appropriate, the student, to use seclusion in an emergency situation and such use has been approved in

writing by the Principal;

g. Any individual using seclusion has received training about alternative behavior interventions and management techniques; and
h. The program has documented compliance with (a) and (d) through (g) above in advance of the use of seclusion and maintains the documentation.

No written individual behavior plan or Individualized Education Program (IEP) may include use of seclusion as a standard response to any behavior. At all times during the emergency use of seclusion, a staff member must continuously and actively monitor and observe the student who must be observable in all parts of the room or area being used, be immediately available to the student, and continue to use de-escalation and calming strategies with the student, unless it is unsafe or counterproductive for the purpose of calming the student. The emergency use of seclusion must cease as soon as the student's behavior no longer poses a threat of assault or immediate serious physical harm to the student or others, or if the student is observed to be in severe distress such as having difficulty breathing. The Principal's approval must be obtained if the emergency seclusion is used for a period longer than 30 minutes.

Any program of the Sudbury Public Schools that uses the emergency intervention of seclusion, consistent with the requirements above, must examine and adopt alternatives and strategies for reducing and eliminating its use no later than 3 years from the effective date of the Regulations ~~(Regulations effective date is August 17, 2026)~~.

**Proper Administration of Physical Restraint, Seclusion, AND SAFETY REQUIREMENTS**

Only Sudbury Public Schools personnel who have received training ~~in Non-Violent Crisis Intervention (NVCI) through the Crisis Prevention Institute (CPI) or Crisis, Aggression, Limitation, Management (CALM) through New England Center for Children (NECC)~~ pursuant to 603CMR 46.04(2) or 603 CMR 46.04(3) (i.e., required annual training for all staff or In-depth staff training, respectively) shall administer physical restraint on students.

Whenever possible, the administration of a restraint shall be witnessed by at least one adult who does not participate in the restraint. As stated explicitly in the Regulations, however, the training requirements contained in 603 CMR 46.00 - and described in this policy – shall not preclude a teacher, employee or agent of a public education program from using reasonable force to protect students, other persons or themselves from assault or imminent, serious, physical harm.

When administering a physical restraint, trained staff shall comply with the requirements regarding use of force, method, duration of the restraint, and safety, as set forth in the Regulations. A person administering a physical restraint shall use only the amount of force necessary to protect the student or others from physical injury or harm, as well as the safest method available and appropriate to the situation, subject to the safety requirements in the Regulations. In terms of duration of restraint, all physical restraint must be terminated as soon as the student is no longer an immediate danger to himself or others, or the student indicates that he or she cannot breathe, or if the student is observed to be in severe distress, such as having difficulty breathing, or sustained or prolonged crying or coughing.

Additional safety requirements for the use of physical restraint include:

a. No restraint shall be administered in such a way that the student is prevented from breathing or speaking. During the administration of a restraint, a staff member shall continuously monitor the physical status of the student, including skin temperature and

color, and respiration.

b. Restraint shall be administered in such a way so as to prevent or minimize physical harm. If, at any time during a physical restraint, the student expresses or demonstrates significant physical distress, including, but not limited to, difficulty breathing, the student shall be released from the restraint immediately, and school staff shall take steps to seek medical assistance.

c. If a student is restrained for a period longer than 20 minutes, program staff shall obtain the approval of the Principal. The approval shall be based upon the student's continued agitation during the restraint, justifying the need for continued restraint.

d. Program staff shall review and consider any known medical or psychological limitations, known or suspected trauma history, and/or behavioral intervention plans regarding the use of physical restraint on an individual student.

e. After the release of a student from a restraint, program staff shall implement follow-up procedures. These procedures shall include reviewing the incident with the student to address the behavior that precipitated the restraint, reviewing the incident with the staff person(s) who administered the restraint to discuss whether proper restraint procedures were followed; and consideration of whether any follow-up is appropriate for students who witnessed the incident.

## Staff Training

All school staff must receive annual training regarding the Sudbury Public Schools' Restraint Policy. Staff training must occur within the first month of each school year and, for employees hired after the school year begins, within a month of their employment. The schools should maintain documentation of the training. Training shall include:

- Information on the role of the student, family, and staff in preventing restraint;
- Sudbury's Restraint Prevention and Behavior Support procedures, including the use of time-out as a behavior support strategy distinct from seclusion;
- Interventions that may preclude the need for restraint, including de-escalation techniques and other alternatives to restraint in emergency circumstances;
- Types of permitted physical restraints and related safety considerations, including information about the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration;
- Administering physical restraint in accordance with medical or psychological limitations, known or suspected trauma history, and/or behavioral intervention plans applicable to an individual student; and
- Identification of program staff who have received in-depth training in the use of physical restraint and who may serve as school-wide resources to assist in ensuring proper administration of physical restraint and implementation of the Regulations.

## Reporting Requirements

Staff must report the use of **any** physical restraint as specified in the Regulations as well as the use of an emergency seclusion.

**Reporting to Principal:** The staff member who administered the restraint/emergency seclusion shall verbally inform the principal of the restraint/emergency seclusion as soon as possible and by written report no later than the next school working day. If the principal administered the restraint/emergency seclusion, the principal shall prepare the written report and submit it to the

individual or team that the superintendent designates for review.

- **Maintain Ongoing Record:** The principal shall maintain an ongoing record of all reported instances of physical restraint and emergency seclusion, if any (the "Physical Restraint Log" and "Seclusion Log"), which must be made available for review by the parent/guardian consistent with the student record regulations or the Massachusetts Department of Elementary and Secondary Education (MADESE) upon request.
- **Weekly Review:** The principal shall conduct **a weekly review** of the Physical Restraint Log and Seclusion Log to identify students who have been restrained/emergency secluded multiple times during the week.
- If such students are identified, the principal shall convene one or more review teams, as the principal deems appropriate, to assess each student's progress and needs. If the principal directly participated in a restraint/emergency seclusion, a duly qualified person designated by the superintendent shall lead the review team's discussion.
- The review team's assessment shall include at least the following:
  - review and discussion of the written reports submitted in accordance with the Regulations and any comments the student and parent/guardian provided about the reports and the use of the restraints/emergency seclusion;
  - an analysis of the circumstances leading up to each restraint/emergency seclusion, including factors such as time of day, day of the week, antecedent events, and individuals involved;
  - consideration of factors that may have contributed to escalation of behaviors, consideration of alternatives to restraint/emergency seclusion, including de-escalation techniques and possible interventions, and such other strategies and decisions as appropriate, with the goal of reducing or eliminating the use of restraint in the future; and agreement on a written plan of action by the program.
- The principal shall ensure that a record of each individual student review team is maintained and made available for review by MA DESE or the parent/guardian, upon request.
- **Monthly Review:** The principal shall conduct a **monthly review** of the Physical Restraint Log and Seclusion Log. This review shall consider patterns of use of restraints/emergency seclusion by similarities in the time of day, day of week, or individuals involved; the number and duration of restraints/emergency seclusions school-wide and for individual students; the number and type of injuries, if any, resulting from use of restraint. The principal shall determine whether it is necessary or appropriate to modify the school district's policy, conduct additional training on restraint reduction/prevention strategies (e.g., positive behavioral interventions and supports) or take such other appropriate action necessary or appropriate to reduce or eliminate restraints.

**Reporting to Parents/Guardians:** The principal or designee shall make reasonable efforts to verbally notify the student's parent/guardian as soon as possible following the use of physical restraint or emergency seclusion, with the goal of providing notification on the same day the incident occurred. If circumstances prevent same-day notification, reasonable efforts shall be made to provide notification as soon as possible, and, in all cases, within 24 hours of the event, consistent with 603 CMR 46.06(4). Notifications should be made through a method reasonably calculated to provide timely, direct communication with the parent/guardian.
~~The principal shall make reasonable efforts to inform the student's parent of the restraint/emergency seclusion within 24 hours of the event~~
~~and~~ In addition to initial verbal/written notification, the principal shall notify the student's parent/guardian by written report sent within three school working days of the restraint/emergency seclusion either to an email address provided by the parent/guardian for communication about the

student or by regular mail postmarked no later than three school working days of the restraint/emergency seclusion. The written report must contain the information set forth in 603 CMR 46.06(4). The principal must ensure that the written restraint/emergency seclusion report provided to the student's parent/guardian is provided to the parent/guardian in the language in which report cards and other necessary school-related information are customarily provided to the parent/guardian. The principal shall provide the student and the parent/guardian an opportunity to comment orally and in writing on the use of the restraint/emergency seclusion and on information in the written report.

**Reporting to MA DESE:** When a physical restraint or emergency seclusion has resulted in an injury to either a student or staff member, the Sudbury Public Schools shall send a copy of the written report of that restraint/emergency seclusion to MA DESE no later than three (3) school working days of the administration of the restraint/emergency seclusion, along with a copy of Physical Restraint Log and Seclusion Log, if any, for the 30-day period before the reported restraint/emergency seclusion.

Additionally, the Sudbury Public Schools must collect and annually report data to the MA DESE regarding the use of physical restraints and emergency seclusion. Sudbury shall report the data in the manner and form the MA DESE directs.

**PREVENTION AND ALTERNATIVES TO PHYSICAL RESTRAINT** Students, families/caregivers, school staff, and administrators each play an important role in preventing the need for physical restraint and supporting the safety and well being of the school community.

School staff shall use appropriate positive behavioral supports, de-escalation strategies, and other lawful and less intrusive interventions whenever feasible before physical restraint is considered. Such strategies may include, as appropriate to the individual student and circumstances, verbal redirection, offering choices, movement or sensory breaks, opportunities to communicate needs or take a break, reducing demands when appropriate, access to supportive school personnel, and other positive behavioral interventions.

When a student has an individualized behavior support plan, behavior intervention plan, safety plan, or other applicable individualized plan, staff shall consider and implement the interventions identified in that plan, as appropriate to the circumstances.

**TIME-OUT USE PROCEDURES**

Time-out is a behavioral support strategy in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. During time-out, a student must be continuously observed by a staff member in an unlocked setting from which the student is permitted to leave. Staff shall be with the student or immediately available to the student at all times. Time-out shall cease as soon as the student has calmed.

~~If a program uses time-out as a behavioral support strategy, the program must have aprocedure for the use of time-out that includes a process for obtaining principal approval of time-out for more than 30 minutes based on the individual student's continuingagitation. Time-out strategies and usage shall be used in accordance with DESEguidance and regulations. Each school that utilizes time-out as a behavioral strategywill have written procedures consistent with state laws and regulations.~~

If a program uses time-out as a behavioral support strategy, the program must have a procedure for the use of time-out that includes a process for obtaining principal approval of time-out for more than 30 minutes based on the individual student's continuing agitation. Time-out strategies and

usage shall be used in accordance with DESE guidance and regulations. Each school that utilizes time-out as a behavioral strategy will have written procedures consistent with state laws and regulations.

~~Whenever practicable and safe, a staff member should be physically present with the student during time-out. If remaining with the student would be unsafe or counterproductive to the purpose of calming, staff shall remain immediately available and continuously observe the student.~~ ¶

~~A student's readiness to end time-out shall be based on the individual student's presentation and observable signs that the student has calmed. A student shall not be required to complete a specific task, checklist, or other predetermined requirement as a condition of ending time-out.~~

~~If a time-out lasts longer than 30 minutes, staff shall obtain approval from the principal or designee to continue the time-out. Any such approval shall be based on careful consideration of the individual student's presentation and continuing level of agitation. If the student has calmed, the time-out shall cease.~~

~~For any time-out approaching or exceeding 30 minutes, staff shall consider appropriate follow-up with the student, including debriefing the incident at a later time, and whether the student's behavior warrants convening the student's Team, reviewing or modifying an existing behavior support plan, or developing additional behavioral supports.~~ ¶

~~Staff shall make reasonable efforts to notify the student's parent/guardian on the same day as the extended time-out and, in all cases, within 24 hours, and shall offer the parent/guardian an opportunity to discuss the circumstances of the extended time-out. Time-out does not include routine activities or changes in a student's location that are not for the purpose of separating the student from a learning activity or classroom for the purpose of calming. Examples may include visits to the school nurse or administrator, participation in individual or small-group instruction outside the classroom, or performing a school-related errand.~~ ¶

~~Time-out also does not include calming strategies used within the classroom when the student remains part of the classroom environment and has the opportunity to receive and engage in instruction, such as providing the student with a different location within the classroom.~~¶

~~**DOCUMENTATION OF TIME-OUT**~~ ¶

~~School staff shall document any time-out approaching or exceeding 30 minutes. Documentation shall include, as applicable, the date; location; beginning time and duration; circumstances and behavior preceding the time-out; staff member initiating the time-out; less restrictive or de-escalation strategies attempted; staff member(s) present or monitoring the student; strategies used to support the student in calming; principal or designee approval if the time-out exceeded 30 minutes; and efforts to notify the student's parent/guardian.~~

The principal or designee shall maintain and periodically review documentation of extended time-outs to identify patterns, consider whether additional supports or interventions are appropriate, and identify opportunities to reduce the frequency or duration of extended time-outs.

## Safeguards for Areas Used for Time-Out or Emergency Seclusion

Any room or area used for time-out must be clean, safe, and sanitary; appropriate for the purpose of calming students, including, but not limited to, being of appropriate size for the age and the needs of the student; appropriately lighted, ventilated, and heated or cooled (consistent with the remainder of the building); free of objects or fixtures that are inherently dangerous to the student; and in compliance with any applicable local fire and building code requirements and any other standards listed by the MA DESE guidance.

Any room or space used for emergency seclusion as permitted under the conditions enumerated in 603 CMR 46.07(2) must meet the same physical space safeguards set forth in the paragraph above that are required for a time-out space. Sudbury Public Schools must ensure that school administration has inspected any room or space for compliance with these physical space safeguards at a minimum of one time per week during which the room or area is used for emergency seclusion.

## Preventing Student Violence, Self-Injurious Behavior, and Suicide

As set forth in the Regulations, the Sudbury Public Schools shall develop methods for preventing student violence, self-injurious behavior, and suicide, including individual crisis planning and de-escalation of potentially dangerous behavior occurring among groups of students or with an individual student.

## Parent/Guardian Engagement

In accordance with the Regulations, the Sudbury Public Schools shall engage parents/guardians in discussions about restraint and seclusion prevention and the use of restraint solely as an emergency procedure of last resort. Sudbury Public Schools will post this policy regarding the ~~Prevention of Physical Restraint of Students~~ Physical Restraint, ~~Time-Out &~~ Seclusion & Time-Out of Students on the school district's website and will include the policy in school handbooks. Sudbury Public Schools welcomes parents/guardians to request a meeting with their child's principal or IEP Team Chair to discuss any individual use of physical restraint or emergency seclusion or physical restraint, time-out procedures, and emergency seclusion in general.

The District's written procedures implementing this policy, including procedures governing physical restraint, time-out, emergency seclusion, and parent/guardian notification, shall be made available to parents/guardians and members of the public upon request.

## Complaint Procedure

The Sudbury Public Schools will consider and investigate any complaints that the school district receives regarding the school district's physical restraint practices, including, but not limited to, complaints related to time-out and emergency seclusion practices.

Sudbury has developed a complaint form to assist individuals with sharing their concerns (Complaint Form). Sudbury accepts online submissions of this complaint form as well as complaints submitted via fax, email, US mail, and in-person. Anyone who prefers or needs a paper copy of the complaint form, has difficulty accessing the online form, has additional questions or requires assistance with submitting a complaint may contact the Sudbury Public Schools' Student Services office at:

Sudbury Public Schools
Director of Student Services
40 Fairbank Road
Sudbury, MA 01776
(978) 639-3202 Fax: (978) 443-9001
Student_Services@sudbury.k12.ma.us

Complaints must be filed within sixty (60) school days of the event giving rise to the complaint.

The District will investigate the complaint, including interviewing any witnesses deemed necessary and appropriate and reviewing relevant written documentation and data related to the concern. The District's investigation generally will be completed within twenty (20) school days of receiving the complaint. If this general timeline is not met, the District will document the reason(s) for not meeting the timeline. If the complainant is dissatisfied with the determination following the investigation, the complainant may appeal to the Superintendent of Schools who may be reached at 40 Fairbank Road, Sudbury, MA 01776.

~~**School Committee Oversight** ¶~~

~~At least annually, the Superintendent shall provide the School Committee with an aggregate report regarding implementation of this policy. The report shall include, to the ¶ extent available and appropriate, District-wide data and trends regarding physical restraint and emergency seclusion, the number of restraints lasting more than 20 minutes, the number of emergency seclusions lasting more than 30 minutes, restraint or seclusion-related injuries required to be reported to MA DESE, patterns or repeated use identified through District review, and actions taken to reduce or eliminate the need for physical restraint and emergency seclusion. All reporting shall protect student confidentiality and shall not identify individual students. ¶~~

~~To the extent the District maintains aggregate data regarding extended or repeated use of time-out, the annual report shall also include relevant District-wide trends regarding time-out. ¶~~

~~The aggregate annual report shall also be made available to the Sudbury Special Education Parent Advisory Council (SEPAC). ¶~~

**LEGAL REFS.:**
M.G.L. c. 71, § 37G
603 CMR 46.00 – Prevention of Physical Restraint and Requirements If Used

**SOURCE/ADDITIONAL GUIDANCE:**
Massachusetts Department of Elementary and Secondary Education, *Special Education Policy Memo SY2025-2026 — 1: Amendments to DESE's Regulations at 603 CMR 46.00 and 603 CMR 18.00 (Use of Time-Out Practices)*
Massachusetts Department of Elementary and Secondary Education, *Special Education Policy Memo SY2025-2026 — 5: Guidance on Time-Out Practices and Implementation of Amendments to 603 CMR 46.00 and 603 CMR 18.00*

Policy adopted by the Sudbury School Committee on DATE.

**Sudbury Public Schools**
**School Committee Meeting**

**Date:** **November 16, 2026**

**Agenda Item:** 6 - Future Agenda Items

**Recommendation:**

**Background / Preparation Information:**

This portion of the meeting is an opportunity for members to ask the chair to add items to the rolling agenda. Per OML, there cannot be discussion of any item being requested or any item currently on the rolling agenda. It is also not a discussion of when items might be placed on the agenda. Items requested at a meeting or via email are added to the table. The rolling agenda is not a final version of the agenda items for the year and is subject to change based on conversations between the Chair and the Superintendent.

**Attachments:**
**'26-'27 Committee Rolling Agenda (3) (1)**

**Action:** **Report:** **XX** **Discussion:**

# ‘26-’27 Committee Rolling Agenda

## November 30, 2026 (Remote) - BUDGET REVIEW

Review of Community Input Sessions
SC Budget Priorities
School Improvement Plans
Antisemitism Prevention and Support PAC
Review of Task Force Charge
Step 3 Policy JFBC METCO
School Calendar
Bus RFP final approval
Minutes
Presentations from Principals
**SEA Rep:**

## December 7, 2026 (Hybrid) - BUDGET REVIEW

Student Services Report - ESY and SEPAC report
FY28 Budget Planning

- TM Budget Guidance
- Review Budget Drivers
- SC Budget Timeline

Liaison Reports
**SEA Rep:**

## December 14, 2026 (Hybrid) - BUDGET HEARING

Budget Hearing (Special Matter)
FY28 Budget Workshop and Review
Superintendent’s Recommended FY28 Budget Workshop (with principals)
Superintendent’s FY28 Recommended Budget Vote

Future Agenda Items
Monthly Accounts Payable and Payroll Warrants Submission
Minutes
**SEA Rep:**

## January 11, 2027 (Remote)

Executive Session - review any ES minutes and determine release
FY28 Budget Workshop and Review
FY28 Capital Updates and Town Meeting Warrant Articles
At-A-Glance
Liaison Reports
Minutes
**SEA Rep:**

## January 25, 2027 (Remote)

CASE  Collaborative Q2 Report
ACCEPT Collaborative Q2 Report
Budget Book Approval
FY28 Q2 YTD Budget Update
Superintendent Mid-Year Report
SPS Town Report (2026)

Future Agenda Items
Monthly Accounts Payable and Payroll Warrants Submission
Minutes
**SEA Rep:**

## February 8, 2027 (Remote)

SC Goal Review
SC Self Assessment
March Tri-District Meeting Planning
Legislative Forum Discussion
Student Fees for FY28
FY27 Capital Updates and Town Meeting Warrant Articles
Monthly Accounts Payable and Payroll Warrants Submission

Liaison Reports

## March 1, 2027 (Hybrid)

SC Meeting Schedule for FY28
PBC Appointment (term ends 5/5)
Per Policy Handbook page 13 - PAC liaison written memo for packet

Future Agenda Items
Minutes
**SEA Rep:**

## March 15, 2027 (Remote)

Legislative Forum
Hearing on School Choice

Liaison Reports
Monthly Accounts Payable and Payroll Warrants Submission
Minutes
**SEA Rep:**

## March 29, 2027 (in person) In Boston

Needs to start at 6:00 p.m. as the Kroc Center closes at 8:00 p.m.
Special Matters - METCO Yearly Report

**SEA Rep: None**

## April 12, 2027 (Hybrid)

Special Matters - Academic Benchmarking (Wellness, ELA and Math)
CASE Q3 report
Accept Q3 Report
School Committee Self Evaluation

Future Agenda Items
Monthly Accounts Payable and Payroll Warrants Submission
Minutes
**SEA Rep:**

## May 3, 2027 (Annual Town Meeting)

Liaison Reports
Minutes

## May 24, 2027 (Hybrid)

FY27 Q3 YTD Budget Update
PACs end of year update
School Committee Reorganization
Discuss & approve charge of subcommittees: Policy, Communication, Calendar, etc.

Superintendent Annual Report (Summative)

Future Agenda Items
Monthly Accounts Payable and Payroll Warrants Submission
Minutes
**SEA Rep:**

## June 7, 2027 (Remote)

Special Matters - School AIM Reports - Principals
DC Trip Approval
FY27 Superintendent Evaluation
At-A-Glance Newsletter

Liaison Reports
Minutes
**SEA Rep:**

## June 21, 2027 (Hybrid)

Review ES minutes for release to public if requested - put on meeting in July and January
Draft Superintendent Goals
School Committee Goals

Future Agenda Items
Monthly Accounts Payable and Payroll Warrants Submission
Minutes

## July 19, 2027 (Hybrid) - WORKSHOP

FY27 End of Year Annual Budget Report
CASE Q4 Report
Accept Q4 Report
School Committee Goals
Superintendent Goals

Liaison Reports
Monthly Accounts Payable and Payroll Warrants Submission
Minutes

| Date Requested | Requested by | Item Requested | Date added to Agenda |
|---|---|---|---|
| May 2026 | Community member | Jewish PAC | August 3<br>August 17 |
| 05/24/26 | Karyn | Follow up to equity audit | |
| 06/01/26 | Julie and Ellen | Jewish PAC | August 3<br>August 17 |
| 06/03/26 | Karyn | METCO goals | |
| 06/09/26 | Karyn | Sandra and Victor attend meeting for project timeline | Potentially Sept 28 |
| 06/14/26 | Jessica | SC banner/supplies for community events | |
| 06/15/26 | Karyn | District Process regarding student behavior | Handled by Task Force<br>Aug 17 (SC) |
| 06/01/26 | Jessica/Andy | Continue MOA work | August 3 |
| 06/15/26<br>9/14/26 | Karyn<br>Ellen | Executive Session to Discuss contract renewals | |
| 07/16/26 | Karyn | Continue MOA work | August 3 |
| 08/03/26 | Ellen and Julie | Task Force Presentation on Jewish PAC | August 17 |
| 08/03/26 | Julie | Setting up criteria for PAC | |
| 08/03/26 | Committee | Thank Carmine Gentile for his donation | Sept 14 |
| 08/07/26 | Community member | Reopen calendar/religious observance discussion | Sept 28 |
| 08/09/26 | Karyn | Review of Policy IHGB Homeschooling | Tasked to Policy Subcommittee |
| 08/10/26<br>8/19/26<br>8/21/26 | Ellen<br>Betsy<br>Karyn | Presentation from Sudbury for Digital Balance | |
| 8/21/26 | Karyn | Artificial Intelligence Guidelines | |
| 8/27/26 | Karyn/MASC/Attorney | Policy ACL PROTECT Act | Sept 14 |

| | | | |
|---|---|---|---|
| 9/14/26 | Ellen | Jewish PAC discussion | 9/28/26 |
| 9/14/26 | Ellen | Set up a Tech Task Force | |
| 9/14/26 | Ellen | Review Tech Policies | |
| 9/29/26 | Betsy | Review support needs to fulfill financial responsibilities | |
| 10/8/26 | Budget Subcommittee | Review of Policy GCBA | |
| 10/8/26 | Budget Subcommittee | Review all of D policies | |
| 10/15/26 | Karyn/MASC | Send policies to policy sub IJ, IJL, IJLA, IJLA-R | Nov 2 |
| 10/21/26 | Ellen | Review New PAC draft | Nov 30 |
| 10/24/26 | Budget Sub | Review Policy JJF Activity Accounts | Nov 2 |
| 10/28/26 | Karyn | Student Council Rep | |
| 11/2/26 | Sudbury Educators Association (SEA) | Review School Committee Goals | |
| 11/8/26 | Policy Subcommittee | Policy ECAB, EAEA, JFBB-1, BDF, BDFB, BDFB-R, BDFC | |