Northland Pines School District Policy 5534 - Drug And Alcohol Testing of Students with Parent/Guardian Permission and Voluntary Student Participation

The Board of Education, in an effort to deter students from the use of illegal drugs and/or alcohol, to promote student wellness and health, and in order to provide an opportunity for intervention and treatment, establishes a program of consensual random drug and alcohol testing to identify students who are using illegal drugs and/or alcohol, for Northland Pines School District ("District") students with parent(s)/guardian(s) permission and with voluntary student participation.

This policy will be effective for students in grades 9-12 beginning with the 2016-17 school year. Beginning with the 2017-18 school year and each year thereafter, this policy will include students in grades 7-12. A permission slip will be mailed home to each parent/guardian and to students before the school year begins. Parents/guardians and students have the option to sign and return the form to the school office. No student will be subject to random drug testing without a signed parent/guardian permission slip on file. Parents/guardians and students are under no obligation to grant drug testing permission to the District. Once parent(s)/guardian(s) and student(s) sign and date the permission form allowing their child(ren) to be tested, the form will remain in effect for the remainder of the student(s) NPSD career; however, parents/guardians and/or students may opt out in writing at the end of each semester should they wish to revoke the permission form. Permission forms will be maintained in the middle and high school office.

The district will assume all responsibilities for the random drawing of student names as well as for administering the drug and alcohol testing. The Northland Pines School District will determine what percentage of the students will be randomly tested during each random test period. Each student included in the testing pool will be eligible to be chosen for all random testing dates. The sample collection testing will be conducted at the middle & high school by a Registered Nurse. If a student is selected, he/she will be called to the middle & high school office where he/she will go to the designated collection area. The collector will check the specimen bottle for temperature and any sign of tampering. If tampering is suspected, a second sample will immediately be requested. A second tampered specimen will be considered refusal to test; a student's refusal to test will be reported to the parent/guardian.

7-12 Administration will be designated as the primary contact/communicator between the testing company and the Northland Pines School District. Drug test results will be disclosed by the testing company to 7-12 Administration. 7-12 Administration will share the results of the analysis with the student(s), parent(s)/guardian(s), and the District Administrator. 7-12 Administration will maintain the confidential drug and alcohol testing information received from the testing company.

Students will be tested for the following drugs: Amphetamines. Marijuana, Cocaine, Opiates, Barbiturates, Benzodiazepines, Methadone, Oxycodone, Buprenorphine, Alcohol/Ethanol Metabolites (EtG). Drugs may be exempted if a legal and current prescription for use is confirmed by the Medical Review Officer within forty-eight (48) hours. As circumstances warrant, the District may add to or delete from the list of drugs being tested. The testing company will maintain and provide proof of being a certified lab, assuring that drug testing services are confidential and in full compliance with the prevailing standards.

All testing results will be considered a confidential record and will not be disclosed to non-school officials by 7-12 Administration, District Administrator or by the testing company, and then only when necessary to the health and safety of any student or in order to comply with Federal or State law, or School Board policy, except that results may be disclosed as otherwise authorized by the student, student's parent, or as legally required.

Retesting

Students will have an opportunity within twenty-four (24) hours of notification of the first positive test result to have a split specimen test challenge conducted in a certified laboratory at the family's expense. 7-12 Administration and/or administrative designee may consult with medical professionals to evaluate the results of the split specimen test challenge, taking into consideration any evidence offered by the student and/or family. Should the second test confirm a positive result, and there is not a satisfactory explanation for the positive results, all consequences specified below will apply.

Positive Results/Consequences

- A. Parents/Guardians will be contacted by phone immediately after the test has been completed to inform them that the test was done; they will also receive a copy of the lab test results.
- B. Co-Curricular Activities Code of Conduct consequences a positive test will be treated as a self-report per our student handbook and co-curricular handbook.
- C. Referral to school Social Worker for AODA recommendations.

Reporting

Annually the administration will report to the Board the number of total students tested during the school year, the number of positive tests and the number of negative tests.

Adopted: September 26, 2016 Revised: July 31, 2017 Revised: July 29, 2019

Parent(s)/Guardian(s) and Student Permission Form

<u>Parent(s)/Guardian(s)</u> Acknowledgement and Permission: I acknowledge receiving the policy concerning student random drug and alcohol testing procedures, and I give my permission for my child to be entered in to the random student drug and alcohol testing pool of names for the Northland Pines Middle & High School beginning with the 2019-20 school year, and each year of his/her entire high school career, unless I opt out and withdraw this permission in writing with the middle & high school office at the end of the semester, with the knowledge that all drug and alcohol testing is to be conducted by the testing company, and that I will receive a copy of the results.

Student Name _____

Parent/Guardian Signature

Date signed by Parent/Guardian

<u>Student Acknowledgement and Permission:</u> I acknowledge receiving the policy concerning student random drug and alcohol testing procedures, and I consent to be entered in to the random student drug and alcohol testing pool of names for the Northland Pines Middle & High School beginning with the 2019-20 school year, <u>unless I opt out and withdraw this permission in writing with the middle & high school office at the end of the semester</u>, with the knowledge that all drug and alcohol testing is to be conducted by the testing company, and that I will receive a copy of the results.

Student Signature