Guidance for Providing Educational Resources to Address Substance Use

A COLLABORATION OF

THE NEW YORK STATE EDUCATION DEPARTMENT

AND

THE NEW YORK STATE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES

THE UNIVERSITY OF THE STATE OF NEW YORK

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Introduction

Schools can serve as a protective factor in providing substance use prevention education, as outlined in the Health Education Standards Modernization Supplemental Guidance Docum

Acknowledgements

NYSED would like to extend its appreciation to its State partner, OASAS, for providing leadership and expertise to inform the work of this priority. Together, both agencies have engaged in many initiatives to educate and serve our schools, youth, families, and communities to enhance wellness. This document and resources have been developed with assistance from the following:

Legislative Background

New Education Law § 3038 (Attachment A) requires the Superintendent of each school district, in consultation with Board of Cooperative Educational Services (BOCES) District Superintendent (DS), where applicable, to identify an employee as a designee of the school district or BOCES to provide materials and/or resources to any student, parent or staff regarding where and how to find available substance use related services. Where possible the designated employee shall be a school social worker, school counselor, or any other health practitioner (i.e., school psychologist, school nurse). Information provided by a student, parent or staff to the designated employee shall be confidential, not be used in school disciplinary proceedings, and as related to other applicable privilege, be confidential pursuant to section 4508 of the civil practice law and rules. Nothing in this section can relieve the designated employee of a legal duty to otherwise report such information. The designated employee, or employees, are to undergo necessary training as may be required by the Commissioner.

Additionally, NYS Mental Hygiene Law §19.07 (Attachment B) was amended requiring OASAS to consult with NYSED to utilize existing educational materials, or develop new ones, to support school districts and BOCES to use in addition to, or in conjunction with current drug and alcohol curricula. Materials are to be age-appropriate and include information or resources for parents to identify the warning signs and address the risks of substance use. Topics are to include misuse and abuse of alcohol, tobacco, prescription medication and other drugs with an increased focus on substances most prevalent among school aged youth as defined in Education Law section 804. Accordingly, NYSED

Emotional and Behavioral (MEB) Disorders offer more information about substance use trends at the National and NYS levels, respectively.

2$6$6 RYHUVHHV RQH RI Addiction Services System with approximately 1,600 prevention, treatment and recovery programs. OASAS chemical dependence treatment programs have an average daily enrollment of nearly 100,000 people and serve approximately 234,000 individuals every year. During the 2017-18 school year, OASAS-funded prevention providers reached youth in 1,701 public and non-public schools. This represents about 26% of NYS schools. Recurring direct (face-to-face) prevention services were delivered to approximately 454,000 youth. Of these, 80% received services through an evidence-based program that prevention research shows results in lower levels of youth problem behaviors.

Alcohol, tobacco, vaping, marijuana, synthetic cannabinoids, prescription pills, heroin, cocaine, amphetamines and fentanyl are some of the common substances of focus. No one ever anticipates they will become addicted, but gateway drugs can lead to other substances resulting in addiction and death. By raising awareness, educating about addiction, ensuring people engage in prevention efforts, knowing how to access care, and removing the shame and stigma associated with addiction, we can all be a part of the solution and help to combat addiction.

substance use, which impedes many from seeking and obtaining assistance for themselves or a loved one.

7 K H S O D Q Q L Q J S U R F H V V I R U H Q V X U L Q J W K D W D d d r e s s e R O G procedures for addressing student use and staff use is non-discriminatory, is not punitive, yet is supportive of wellness and is current as related to Education Law §3038 may include:

- Development of a written policy to guide licensed personnel that are consistent with State and Federal Guidelines and NYS Licensure Requirements and Scope of Practice Guidelines;
- Any written protocols and procedures on substance use should be detailed to ensure consistency of practice within the entire school district;
- Substance use policy, protocols, and procedures should be evaluated, reviewed and revised periodically as determined by best practice and in alignment with NYS Laws (i.e., Modernization of Health Education Curriculum; Providing Educational Resources in the School Setting);
- Identification and provision of professional development and education needs for both licensed and unlicensed personnel; and
- Communication to students, parent/guardians, and the community about related information, resources, district policy and protocols, along with any required forms.

Notation: School districts are recommended to have Board of Education approved best practice substance use policies in place addressing student and staff substance use and refer to their approved policy when a substance use situation occurs.

Obligations of

fashion on the OASAS Combat Addiction website at https://combataddiction.ny.gov/schools for use by the designee and multiple stakeholder groups.

School district employees designated under section 3038 are required to provide students, parents, or staff seeking assistance with information related to addiction and where to find available substance use related services. A central component of that obligation for the school district employee who is the designee is collaboration with field experts from community-based

the designated school employee. Education Law §3038 prohibits the fact that a request was made for information regarding substance abuse from use in any disciplinary proceeding.

When developing protocols, it should be ensured that the protocols are consistent with the GHVFULSWLRQ RI WKH VHUYLFHV DQG DFWLYLWLHV RI WKH 3 GHILQLWLRQV RI SUDFWLFH $OO 336 VFKHRRO SUDFWLFHV DGVR F known when referring to licensed professionals. Some definitions of practice for PPS employees are in Civil Service Law, not otherwise. School district administration will need to be aware of assistance that may be needed by PPS school employees, should they be the designated employee to provide substance use information. Such needs may include but not be limited to:

- An area where the designee can meet to have a confidential discussion with a student, staff member, or parent/guardian requesting information;
- Accessing, printing, collating, displaying and storing of educational materials on substance use;
- Providing time and resources to engage in professional development opportunities, webinars, and subscribing to professional journals to keep practice current;
- Providing opportunities and support for networking with CBOs to build upon already existing resources and, if needed, tailor specific ones; and
- Offering additional opportunities to develop sustainable partnerships.

Questions related to NYS Licensed Professionals ¶licensure and scope of practice should be directed to the 1<6('¶V 2IILFH RI 3UR/HVVLRQV (http://www.op.nysed.gov/.) Questions related to staff with PPS certificates should be directed to the NYSED Office of Teaching Initiatives (http://www.highered.nysed.gov/tcert/).

School and Community-Based Organization Partnerships

This section below has been adapted from the July 2018 Mental Health Education Literacy in Schools: Linking to a Continuum of Well-Being Comprehensive Guide.

Facilitating the relationship between schools and community agencies is critical to positively impact school climate and connecting more students and families with the help they or a loved one need. A school and community-based organization (CBO) is a partnership where initiative is taken by all involved on behalf of students, families and staff. Before all else, such partnerships should ensure that all required confidentiality required for students, parents/guardians, and staff is maintained. Initially, it is recommended to conduct a needs assessment to determine what school and community partnerships currently exist related to substance use, and where if any gaps may

based

Evaluation

NYSED and OASAS recommend that BOCES DSs, school district superintendents, school district boards of education, school administrators, pertinent certified and licensed professional school employees, students, parents/guardians and CBOs review and evaluate the implementation of NYS Education Law §3038. School districts must

Appendix A

McKinney's Education Law § 3038

§ 3038. [Designation of employee to provide information of substance use related services.][1]

Effective: March 5, 2019
Currentness

<[Eff. March 5, 2019.]>

The superintendent of each school district, in consultation with the district superintendent of a board of cooperative educational services, where applicable, shall designate an employee who is a member of the school district staff or an employee of the board of cooperative educational services staff to provide information to any student, parent, or staff regarding where and how to find available substance use related services. Where possible, such designated individual shall be a school social worker, school guidance counselor or any other health practitioner or counselor employed by the school. Any information provided by a student, parent or teacher to such designated individual shall be confidential, shall not be used in any school disciplinary proceeding and shall, in addition to any other applicable privilege, be considered confidential in the same manner as information provided pursuant to section forty-five hundred eight of the civil

civil

Appendix B

McKinney's Mental Hygiene Law § 19.07

§ 19.07 Office of alcoholism and substance abuse services; scope of responsibilities

Effective: August 1, 2014
Currentness

(a) The office of alcoholism and substance abuse services is charged with the responsibility for assuring the development of comprehensive plans, programs, and services in the areas of research, prevention, care, treatment, rehabilitation, including relapse prevention and recovery maintenance, education and training of persons who abuse or are dependent on alcohol and/e W*4(ho)-16(l)] TJ ET Q q 5000912 dng relapse

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(i) The office shall establish procedures for issuing, directly or through contract, credentials to counselors who meet minimum qualifications, including the establishment of appropriate fees, and shall further establish procedures to suspend, revoke, or annul such credentials for good cause. Such procedures shall be promulgated by the commissioner by rule or regulation.

(ii) The commissioner shall establish a credentialing board which shall provide advice concerning the credentialing process.

(2) The establishment, with the advice of the advisory council on alcoholism and substance abuse services, of minimum qualifications for counselors in all phases of delivery of services to those suffering from alcoholism, substance and/or chemical abuse and/or dependence and/or compulsive gambling and their families that shall include, but not be limited to, completion of approved courses of study or equivalent on-the-job experience in counseling for alcoholism, substance and/or chemical abuse and/or dependence and/or compulsive gambling, and issue credentials to counselors who meet minimum qualifications and suspend, revoke, or annul such credentials for good cause in accordance with procedures promulgated by the commissioner by rule or regulation.

(3) For the purpose of this title, the term ³ F U H G H Gdentialed Alcoholism and Substance Abuse F R X Q Vhor &RXQVHORU´ 6 $ & ´ means an official designation identifying an individual as one who holds a currently registered and valid credential issued by the office of alcoholism and substance abuse services pursuant to this section which documents an individual's qualifications to provide alcoholism and substance abuse counseling. The term ³ J D P E OLQJ Addiction F R X Q Vhor &RXQVHORU´ means an official designation identifying an individual as one who holds a currently registered and valid credential issued by the office of alcoholism and substance abuse services pursuant to this section which documents an individual's qualifications to provide compulsive gambling counseling.

(i) No person shall use the title credentialed alcoholism and substance abuse counselor or ³ & $ 6 $ or &gambling addiction counselor unless authorized pursuant to this title.

(ii) Failure to comply with the requirements of this section shall constitute a violation as defined in the penal law.

(4) All persons holding previously issued and valid alcoholism or substance abuse counselor credentials on the effective date of amendments to this section shall be deemed C.A.S.A.C. designated.

(e) Consistent with the requirements of subdivision (b) of section 5.05 of this chapter, the office shall carry out the provisions of article thirty-two of this chapter as such article pertains to regulation and quality control of chemical dependence services, including but not limited to the establishment of standards for determining the necessity and appropriateness of care and services provided by chemical dependence providers of services. In implementing this subdivision, the commissioner, in consultation with the commissioner of health, shall adopt standards including but not limited to those for determining the necessity or appropriate

including

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(k) Heroin and opioid addiction awareness and education program. The commissioner, in cooperation with the commissioner of the department of health, shall develop and conduct a public awareness and educational campaign on heroin and opioid addiction. The campaign shall utilize public forums, social media and mass media, including, but not limited to, internet, radio, and print advertising such as billboards and posters and shall also include posting of materials and information on the office website. The campaign shall be tailored to educate youth, parents, healthcare professionals and the general public regarding: (1) the risks associated with