



# United States Department of the Interior

BUREAU OF INDIAN AFFAIRS  
Washington, D.C. 20240



## National Policy Memorandum

### Bureau of Indian Affairs Office of Indian Education Programs

**Number: NPM-EDUC-2**

**Effective: November 2, 2004**

**Expires: November 2, 2005**

**Title: Alcohol, Tobacco, Other Drugs And Inhalants Policy and Procedures**

#### 1. Purpose

The presence and use of alcohol, tobacco other drugs and inhalants pose a serious threat to the health, safety and well-being of students and personnel in schools funded by the Bureau of Indian Affairs (BIA). The Office of Indian Education Programs is committed to promoting and providing a drug-free academic and residential environment for all students. Therefore, the Office of Indian Education Programs prohibits the use of alcohol, tobacco, other drugs and inhalants on or at school-related activities

The Office of Indian Education Programs recognizes that the use of alcohol, tobacco other drugs (ATODs) and inhalants can interfere with a student's academic, physical, emotional and social development. Further, the Office of Indian Education Programs is committed to continuing efforts to improve programs designed to educate students as to the physical, psychological, and social/legal consequences of alcohol, tobacco, other drug and inhalant use [that] requires a cooperative approach between many entities, including parents to support enforcement of this policy. The Bureau of Indian Affairs will use prevention and intervention strategies as tools to curtail the use or possession of ATODs and inhalants.

All school and residential personnel shall report all violations of this policy according to established school procedures. It is the intent of this policy to be sensitive to students, staff and parents while guaranteeing the right to due process and adhering to confidentiality laws.

#### 2. Scope

This policy applies to all Bureau of Indian Affairs (BIA) funded or operated schools.

#### 3. Policy and Procedures

Students can realize their potential and successfully achieve their academic and social goals in an environment that is free of alcohol, tobacco, other drugs and inhalants. Bureau of Indian Affairs funded schools will create and support a climate in which students will receive help when they have used or are in possession of alcohol, tobacco, other drugs and inhalants.

Bureau of Indian Affairs funded schools are responsible for the following:

Developing and implementing written policies and procedures that

1. Describe how alcohol and other drug abuse information, expectations and procedures will be disseminated to students, personnel, parents and others
2. Identify, plan, schedule and implement annual training for all personnel related to alcohol, tobacco other drugs and inhalants
3. Describe a support and referral system
4. Establish and utilize a Student Assistance Team (or something similar to assess, refer, assist, implement and monitor students in need of help)
5. Define alcohol, tobacco, other drug and inhalant violations and their consequences— supportive and disciplinary
6. Define procedures for handling emergencies including notification
7. Require an annual school board review, with Education Line Officer signature (BIA-operated schools)
8. Ensure that Memorandums of Agreement with Law Enforcement, Indian Health Service or other medical clinics are developed and updated

### **3. (A) PROCEDURE FOR SUSPECTED ALCOHOL/DRUG INTOXICATION**

1. When a student is suspected of using alcohol, other drugs and inhalants, an initial screening will be completed at the site by personnel who detained the student to determine if 911 or the local emergency contact number should be called. Documentation of the intervention **MUST** start at the time of the initial contact with the student.
2. Initial assessment includes:
  - A breathalyzer administered by trained personnel
  - A student screening form must be completed and signed (**Attachment A**)
  - Completed Referral form (**Attachment B**)
  - Parent notification
3. The student screening form must be completed before a student is transported to hospital. At any time during the process, call 911 if the situation calls for immediate health care. The following would suggest an immediate medical emergency:  
Highly intoxicated      Not breathing      Unconscious      Sexual assault  
Profuse bleeding      Secretions from mouth/vomiting      Out of control
4. **BE SURE SOMEONE STAYS WITH STUDENT AT ALL TIMES.**
5. When 911 has been called, give specific and clear directions to the location of the student. If feasible, have someone meet the ambulance.
6. Before a student can be returned to the custody of the school, a signed medical release form must be completed by the emergency room, Indian Health Service or any other medical clinic providing care to the student.
7. Students that are combative or threatening physical violence to self or others will **not** be placed in the sickbay, Transition Dorm or dorm of origin. Law enforcement will be called to handle the situation.
8. Upon return to campus, the student will be admitted to sickbay, Transition Dorm or dorm of origin.
9. When the student is admitted to sickbay, Transition Dorm or returned to dorm of origin, the observation form (**Attachment C**) will be used to document staff monitoring of physical condition. Staff must have current First Aid certification.
10. If the student's condition worsens, 911 is to be called and the student is to be sent to the emergency room.
11. If there is a reason for personnel to leave, another staff member must be present before the staff is released. Any documentation/paperwork started must be followed up with the new worker. This is to include, but not limited to, passing on necessary paperwork to replacement staff.

### **3. (B) NOTIFICATION**

- A. The Principal will annually notify all students, staff and parents that alcohol, drugs and inhalant use are prohibited on school grounds and at school-related activities. Notification may include

1. Published in student/parent handbooks
  2. Published in the school newsletter
  3. Published in faculty handbooks
  4. Posted for students and staff on bulletin boards in the school and dorm, teacher's lounge, dorm offices, main office and other commonly used areas
  5. Provided to students through the registration process
  6. Posted signs declaring the campus a drug-free zone
- B. The Principal will document that the policy on alcohol, other drugs and inhalant use has been reviewed with staff and students via staff and student meetings. The documentation is to include, agenda, sign-in sheet and any hand-outs distributed.
- C. The Principal of the school will:
1. Notify law enforcement (local or BIA) and Indian Health Service of this policy.
  2. Coordinate efforts with local/BIA law enforcement and Indian Health Service to:
    - A. Prevent alcohol, other drug and inhalant use by students
    - B. Detect and report policy violators
    - C. Adopt procedures for investigating suspected policy/law violators
    - D. Adopt procedures for seizing and storing confiscated alcohol, drugs and inhalants
    - E. Adopt procedures for screening intoxicated students
    - F. Adopt procedures for intervention, follow-up and if necessary, referral to treatment

### **3. (C) VIOLATION OF POLICY**

A school that has a "no tolerance" policy will implement their consequences according to the student/parent handbook that must contain provisions for:

- A. Documenting student assessment and referral, including counseling, Transition Dorm placement or treatment.
- B. Investigating any suspected policy violations by designated personnel. The alleged offender and his/her parents shall be notified if a violation is found and a mandatory referral will be immediately implemented.

### **3. (D) PROCEDURE FOR REFERRING STUDENTS FOR ASSESSMENT**

If any student is suspected of being under the influence of alcohol or their behavior arouses suspicion that they might be using alcohol or have an alcohol or other drug problem, immediate intervention steps will be implemented by school personnel. Written procedures will include

- A. Completion of a referral checklist form to a Student Assistance Team (or similar entity)
- B. Once the Student Assistance Team receives the form, they will
  - Immediately schedule a meeting with the student to discuss the policy violation
  - Review the "no tolerance" policy with the student
  - Develop, implement and monitor a student aftercare plan
- C. The Student Assistance Team must include an administrator, guidance counselor or social worker, teacher, residential staff member and behavioral health representative, if available. The Student Assistance Team must schedule weekly meetings to monitor aftercare plans and activities.

### **3. (E) CONFIDENTIALITY OF STUDENT RECORDS**

The Bureau of Indian Affairs, Office of Indian Education Programs recognizes that information contained in a student's record is confidential and precautions will be taken to ensure compliance with federal confidentiality laws.

#### **4. Roles and Responsibilities**

Director, Office of Indian Education Programs (OIEP) The Director, OIEP is responsible for final approval, consistent with the delegated authority identified in 230 DM 1, and submission of final policy to Deputy Director, OIEP.

Deputy Director, OIEP The Deputy Director, OIEP is responsible for the annual reviews of the policy for over all improvement of school environments. The Deputy Director, OIEP is also responsible for monitoring the Education Line Offices, Division of Residential [Life] for policy implementation.

Education Line Offices The Education Line Offices, is responsible for ensuring that the policy is in place at the schools and the annual notification is adhere too by the principals.

#### **5. Approvals**

<u>(signed) Edward Parisian</u>	<u>11/2/04</u>
Director, Office of Indian Education Programs	Date

**UNITED STATES DEPARTMENT OF INTERIOR  
BUREAU OF INDIAN AFFAIRS  
STUDENT SCREENING FORM  
ATTACHMENT A**

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

General medical information will be in the student's school medical file. This screening form is to be filled out by the staff making initial contact with a student that appears intoxicated.

**Answer the following questions and record breathalyzer results:**

1. Does the student appear to be under the influence of alcohol or drugs? Yes\_\_\_ No\_\_\_
  
2. Is the student carrying any medication? Yes\_\_\_ No\_\_\_
  
3. Did you ask the student if they were on any medication? Yes\_\_\_ No\_\_\_
  
4. Does the student have any signs of physical injury? Yes\_\_\_ No\_\_\_
  
5. Is the student out of control or physically violent to self and others? Yes \_\_\_No\_\_\_
  
6. Breathalyzer results \_\_\_\_\_

If you detect/observe any other health problems, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Check result of student screening assessment:**

1. \_\_\_ student was transported to the emergency room
2. \_\_\_ student was accompanied by staff member to sick bay, Transition Dorm or dorm of origin
3. \_\_\_ other, explain \_\_\_\_\_
4. \_\_\_ Referral form (Attachment B) completed and forwarded

Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF INDIAN AFFAIRS  
REFERRAL CHECKLIST  
ATTACHMENT B**

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

- \_\_\_\_\_ 1. Student has possession of alcohol or drugs.
- \_\_\_\_\_ 2. Student displays visible signs of alcohol or drugs use.
- \_\_\_\_\_ 3. Student "sleeping off" alcohol or drugs.
- \_\_\_\_\_ 4. Student self referred for alcohol or drugs use.

Describe in a short written narrative what symptoms the student demonstrated or what activities lead to this student's referral:

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If other students were involved in this activity, please list them:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

Signature of staff or student making referral: \_\_\_\_\_  
Date: \_\_\_\_\_

**THE STUDENT ASSISTANCE TEAM WILL RECEIVE A COPY OF THIS COMPLETED AND SIGNED REFERRAL CHECKLIST THE NEXT DAY.**



**ALCOHOL, TOBACCO, OTHER DRUGS AND INHALENT POLICY**  
**DEFINITIONS**

1. **Alcohol** – A depressant and includes beer, wine, whiskey, rum, gin or other fermented liquor.
2. **Blood Alcohol Concentration (BAC)** - The ratio between alcohol and blood. For example: a 0.10% BAC means there is one drop of alcohol for every 999 drops of blood or 1 part per thousand.
3. **Distribution** – The sale, trade, transfer, giving, exchanging in any manner of any drug, alcohol, controlled substance or an inhalant by a student to any person whether a student or not, when such distribution takes place in a setting which students are responsible to school authority and/or supervision.
4. **Drugs** – Includes controlled substances like narcotics, stimulants, depressants, hallucinogens and marijuana; the illegal use of alcohol and tobacco; and the harmful, abusive or addictive use of substances, including inhalants and anabolic steroids.
5. **Drug paraphernalia** – All equipment, products and materials of any kind which are used in planning, propagating, storing, concealing, ingesting, inhaling, packing, processing, testing, manufacturing or otherwise introducing into the human body a controlled dangerous substance.
6. **Inhalants**- Breathable chemicals used to produce psychoactive (mind-altering) vapors, and/or cause conditions of intoxication, inebriation, excitement, or dulling of the brain or nervous system. They include fingernail polish, model airplane glue, solvents, aerosols, some anesthetics and other chemicals producing the effects described in this definition.
7. **Intent to distribute** – Possession of a drug, an alcoholic beverage, or inhalant on the person of a student, in or on any item or belonging under the control of the student or owned by the student, in such quantity and under circumstances, observed or discovered, indicating the strong likelihood of distribution
8. **Intoxicated** – Not having the normal use of mental and physical faculties by reason of the introduction of alcohol, a drug, inhalant into the body or having a blood alcohol concentration (BAC) of .08 or .10 (depending on state definition). Behavioral and physical abnormalities may include: slurred speech (too fast or too slow); staggering or the inability to walk; confusion; loss of memory; disorientation; and lack of coordination.
9. **Possession** – Presence of a drug, or alcoholic beverage, or inhalant on the person of a student regardless of the amount, in or on any item or belonging under the control of the student or owned by the student, in any setting in which students are responsible to school authority and/or supervision.
10. **Use** – 1) Ingestion, injection or inhalation of any drug, alcoholic beverage, controlled substance or inhalant.  
2) A condition or state of being under the influence of a drug or alcoholic beverage, non-controlled substance or inhalant.

SOURCE: Controlled Substance Act/In the KnowZone/Public Law 107-110 (20 USC 7161)