**Policy Committee Monthly Report – December 2021**

12/1/2021– 4pm; Virtual Google Hangout

1. Committee Meeting Attendance:  Kari Schwab, Josie Spreher, Elizabeth Uzzell, Chris Morton, Kim Elliott, Lan Zhu

**Agenda/Discussion:**

1. Athletics Program at SMAC Policy (Soccer): Josie and staff are still looking into the league rules. One rule which may hinder our ability to start just with a soccer program is the need to have more then 1 sport to be eligible to join the league. Also need to survey families of rising 6th and 7th graders for level on interest.

Will add to January agenda

1. COVID Leave for employees has expired. Policy and finance stated that once it expired staff will use their leave days and we will try to work with staff as we can. Policy needs to work on an update for COVID leave plan for staff.
   1. Emergency paid sick leave expired on 9/30/21. There is no longer a covid leave policy at a federal level. Discussed creating a shared leave policy specifically for covid related absences however COVID-19 is a medical diagnosis eligible under our current shared leave policy. Concerned it is too early in the year for people to be donating to the shared leave policy, so there may not be any shared leave available.
   2. Policy does not recommend any additional policies specifically for COVID-19 related abscesses and employees can apply for shared leave per current policy guidelines.
2. Suicide Intervention policy- in our last update we removed the need for mandatory assessment from an outside resource. Josie has some concerns about removing this language and would like to include a line that states, “we reserve the right to require a mental health professional note to return to school”
   1. The assessing “high risk or low risk” was removed, but spoke to Donna, legal consult, she stated that the school has a right to require an assessment from a medical professional prior to returning to school.
   2. Currently Danielle has used her own judgement on whether a student was required to see a mental health professional to determine if they can return to school.
   3. Josie will bring the updated language to policy to our January meeting.
3. Field Trip Assistance Form updates. Recommend more general language as currently the form states assistance is limited to 1 field trip however that isn’t equitable.
   1. Current language limits field trip assistance to ONE trip per year however these may not be equitable for all since some CH or LE students field trips may be $8 vs UE or MS it may be $250
   2. Working on each level standardizing number of field trips per year.
   3. Amount of assistance available will depend on development which has a Field trip assistance “bucket” however this includes busing fees for field trips.
   4. Concluded that the language on the Field Trip Assistance form should be changed from “ONE” trip per year to provide assistance for all field trips as long as funds are available. Currently this is automatically offered to all free/reduce lunch eligible families. This does not need to be approved by the full board, just an fyi.
4. Sibling bundle policy: Infosnap cannot have one unique lottery number for all children in a family as they had previously stated they could. Need to change the language to our admission policy to: Once a child in a family is enrolled at Sterling Montessori Charter School, any siblings applying for admission will receive priority enrollment status for the current school year. If there are no openings for their respective grade level, they will be placed at the bottom of the sibling waitlist. If Sterling is not able to offer a seat to a sibling for the current school year, the sibling will receive priority enrollment status when they apply for the following year’s lottery.
5. Discussion on creating a policy regarding pronouns/name preference for students while at school,
   1. Briefly discussed Title IX and how it relates to this question.
   2. DEI will research further
   3. Kari will ask UNC risk management about any policies at UNC that may address confidentiality for minor patients and their health care providers.