Cyber Bullying and Internet Safety Fact Sheet

People can be bullied in lots of ways, including through cyber bullying. Cyber bullying is when someone sends or posts things (words, pictures, recordings) that are mean, embarrassing or make people feel scared, embarrassed or uncomfortable. Even if they don't do this at school sometimes cyber bullying makes things at school hard. No student is allowed to disrupt school through cyber bullying.

Cyber bullies work in lots of ways, but here's some of their most common:

- Send or post mean messages
- Make up websites or accounts with stories, cartoons, pictures or "jokes" that are mean to others
- Take embarrassing pictures or recordings (without asking first)
- Send or post stuff to embarrass others
- Hack into other people's accounts or read their stuff
- Hack into other people's accounts and send or post their private stuff
- Pretend to be somebody else to get someone to give them private info
- Send threats

If you're a cyber bully knock it off! Ask your principal/counselor how you can make things right.

If someone is cyber bullying you, there's something you can do about it:

- Don't respond to and don't ignore a cyber bully. Instead, tell an adult you trust. If cyber bullying follows you to school, tell your teacher, counselor or principal.
- Even if what the bully does is embarrassing, don't delete it. Instead, get a copy so you can prove what happened.
- Have an adult help you contact a company representative (cell phone company, Yahoo, Facebook, Twitter, etc.) about blocking or removing the bad stuff.

You can't always stop people from being mean, but there are ways to help yourself:

- Don't give out your personal info in electronic or digital communications
- Don't tell anyone but your parents what your login name, password or PIN number is
- Don't post or send embarrassing pics or recordings (even on your own sites) bullies love to copy your stuff

Suggestions for Parents:

- Help your child understand how permanent electronic or digital communications are
- Talk to your child about understanding, preventing and responding to cyber bullying
- * Contact your student's school for help if you suspect your child is being cyber bullied -- or if you suspect your child is engaging in cyber bullying





Sudden Cardiac Arrest Information Sheet for Student Athletes and Parents/Guardians

What is Sudden Cardiac Arrest?

Sudden Cardiac Arrest (SCA) is the sudden onset of an abnormal and lethal heart rhythm, causing the heart to stop pumping adequately. When this happens, blood stops flowing to the brain and other vital organs, and, if left untreated, can quickly result in death.

How common is Sudden Cardiac Arrest?

While SCA in student athletes is rare, it is the leading medical cause of death in young athletes. The chance of SCA occurring to any individual student athlete is estimated to be about one in 80,000 to 100,000 per year.

What causes Sudden Cardiac Arrest in student athletes?

SCA is caused by several structural and electrical conditions of the heart. These conditions predispose an individual to have an abnormal heart rhythm. SCA is more likely during exercise or physical activity, placing student athletes with undiagnosed heart conditions at greater risk. Some of these conditions are listed below.

- > Inherited conditions present at birth of the heart muscle (passed on from family): Hypertrophic Cardiomyopathy (HCM), Arrhymogenic Right Ventricular Cardiomyopathy (ARVC), and Marfan Syndrome
- > Inherited conditions present at birth of the electrical system: Long QT Syndrome (LQTS), Catecholaminergic Polymorphic Ventricular Tachycardia, and Brugada Syndrome (BrS)
- NonInherited conditions (not passed on from the family, but still present at birth): Coronary artery abnormalities, Aortic valve abnormalities, Non-compaction Cardiomyopathy, and Wolff-Parkinson-White Syndrome (occurs from an extra conducting fiber in the heart's electrical system)
- > Conditions not present at birth but acquired later in life: Commotio Cordis (occurs from a direct blow to the chest), Myocarditis (infection or inflammation of the heart), and Recreational/Performance Drug Use
- Idiopathic: Sometimes the underlying cause of Sudden Cardiac Arrest is unknown, even after autopsy.

What are the warning signs that Sudden Cardiac Arrest may occur?

- > Fainting, passing out, or seizure especially during or right after exercise
- Chest pain or discomfort especially with exercise
- > Excessive Shortness of breath with exercise
- Racing heart or irregular heartbeat with no apparent reason
- > Dizziness or lightheadedness especially with exercise
- Unusual Fatigue/Weakness with exercise
- > Fainting from emotional excitement, emotional distress, or being startled
- > Family history of sudden cardiac arrest prior to the age of 50

While a heart condition may have no warning signs, in more than a third of sudden cardiac deaths, there were warning signs that were not reported to an adult or taken seriously. If any of the above warning signs are present, a cardiac evaluation by a qualified health care provider such as a physician, physician assistant, or advanced practice nurse is recommended. If the health care provider has concerns, a referral to a pediatric cardiologist is recommended.

What are the risks of practicing or playing after experiencing SCA warning signs?

Ignoring such signs and continuing to play could be catastrophic and result in sudden cardiac death. Taking these warning symptoms seriously and seeking timely appropriate medical care can prevent serious and possibly fatal consequences.

When is a student athlete required to be removed from play?

Any student who collapses or faints while participating in an athletic activity is required by law to be removed by the coach from participation at that time.

What is required for a student athlete to return to play?

Any student who is removed or prevented from participating in an athletic activity is not allowed to return to participation until evaluated and cleared for return to participation in writing by a qualified health care provider such as a physician, physician assistant, or advanced practice nurse is recommended. If the health care provider has concerns, a referral to a pediatric cardiologist is recommended.

What are the current recommendations for screening student athletes?

A complete annual sports preparticipation examination based on recommendations from the American Heart Association (AHA), American Academy of Pediatrics (AAP) and American College of Cardiology (ACC) is the cornerstone of screening for preventable causes of SCA. Each year student athletes in Oklahoma are required to have a Sports Preparticipation Physical Examination based on these recommendations completed by a health care provider such as a physician, physician's assistant, or advanced nurse practitioner and filed with the student athlete's school prior to beginning practice. The Sports Preparticipation Examination includes a personal and family health history to screen for risk factors or warning signs of SCA and measurement of blood pressure and a careful listening to the heart, especially for murmurs and rhythm abnormalities.

Noninvasive testing such as an electrocardiogram (ECG) or echocardiogram (ECHO) may be utilized by your health care provider if the sports preparticipation examination reveals an indication for these tests. Screening using an ECG and/or and ECHO is available to student athletes as an option from their personal health care provider, but is not mandatory, and is generally not routinely recommended by either the AHA, AAP or ACC.

What is the treatment for Sudden Cardiac Arrest?

RECOGNIZE Sudden Cardiac Arrest

- Collapsed and unresponsive
- Abnormal breathing
- Seizure-like activity

➤ CALL 9-1-1

Call for help and for an AED

▶ CPR

- Begin chest compressions
- Push hard/fast (100/min)

> AED

Use an AED as soon as possible

> CONTINUE CARE

Continue CPR and AED until EMS arrives

All schools and teams should be prepared to respond to a cardiac emergency. Young athletes who suffer SCA are collapsed and unresponsive and may appear to have brief seizure-like activity or abnormal breathing (gasping). Time is critical and an immediate response is vital. An AED should be placed in a location that is readily accessible. AEDs are safe, portable devices that read and analyze the heart rhythm and provide an electric shock (if necessary) to restart a normal heart rhythm.

Remember, to save a life: recognize SCA, call 9-1-1, begin CPR, and use an AED as soon as possible!



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Meningococcal Disease

What is meningococcal disease?

Meningococcal disease is a disease caused by the bacteria *Neisseria meningitidis*, also called meningococcus. This bacteria can infect the blood, causing septicemia. It can also infect the covering of the brain and spinal cord, causing meningitis.

How is this disease spread?

Meningococcal disease spreads by direct contact with the saliva or with respiratory droplets from the nose and throat of an infected person.

Who is at risk of getting this disease?

Some groups of people have a higher risk of meningococcal disease, such as first year college students living in dormitories or new military recruits living in barracks. Other persons at increased risk include household contacts of a person known to have had this disease, immunocompromised people, people without a spleen, and people traveling to parts of the world where meningococcal disease is more common. Exposure to tobacco smoke and having a concurrent upper respiratory infection also increase the risk of meningococcal disease. Infants are at highest risk, but rates decrease after infancy and then increase in adolescence and young adulthood.

What are the symptoms?

Ten percent or more of people are thought to be carrying *Neisseria meningitidis* in their nose and throat without being ill, which is called "asymptomatic carriage". Of these people, about 1% can develop illness, which may be meningitis or a bloodstream infection called septicemia or meningococcemia. As described above, some people can carry the bacteria in their nose and throat without ever becoming ill. Signs of illness may include fever, severe headache, nausea, vomiting, and a rash. People who develop meningitis can have fever, intense headache, nausea, vomiting, stiff neck, and extreme sensitivity to light. It is important to seek care from a healthcare provider as soon as possible if these symptoms appear. Meningococcal disease has a 15% risk of death if it is not treated promptly.

How soon do the symptoms appear?

The symptoms may appear two to ten days after infection, but usually within three to four days.

What is the treatment for meningococcal disease?

Antibiotics, such as penicillin or a cephalosporin such as ceftriaxone, are used to treat meningococcal disease.

Should people who have been around a person infected with meningococcal disease receive treatment? When meningococcal disease occurs in one person, only the people who have had recent close contact with that person's respiratory secretions are recommended to receive antibiotics. These include household members, intimate contacts, health care personnel performing mouth-to-mouth resuscitation, day care center playmates, etc. Such people are usually advised to obtain a prescription for a specific antibiotic (rifampin, ciprofloxacin, ceftriaxone, or azithromycin) from their physician. The health department will contact the individuals who are recommended to receive antibiotics, and advise them of options to obtain antibiotics. Casual contacts including classmates, co-workers, or those in a factory setting are not at increased risk of disease when a single person has meningococcal illness. When clusters or outbreaks occur, the health department may expand the recommendations for which groups need to receive antibiotics to prevent possible spread. Antibiotics do not protect people from future exposure to *Neisseria meningitidis*.

Is there a vaccine to prevent meningococcal disease?

Three types of meningococcal vaccines are available in the United States. They are effective against four of the five most common disease-causing types of meningococcal disease: A, C, Y, and W-135. An additional vaccine is now available that protects against serogroup B, but is currently only licensed for high-risk children over ten years of age. Consult with your healthcare provider or the local health department about receiving the vaccine.

For more information call or visit us on the web:
Phone: 405-271-4060 http://ads.health.ok.gov

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Important Information for Parents About Meningococcal Disease and Meningococcal Vaccines from the Oklahoma State Department of Education and the Oklahoma State Department of Health

What is meningitis?

Meningitis is an infection of the tissue lining and fluid that surround the spinal cord and the brain. Meningitis is usually caused by a virus or a bacterium. Meningitis caused by a virus is usually less severe and goes away without any special treatment, while meningitis caused by bacteria can be severe and may cause:

- Brain damage,
- Hearing loss,
- Amputation of arms or legs,
- · Learning disabilities, or
- Death.

What types of bacteria cause meningitis?

There are several types of bacteria that may cause meningitis, including:

- Neisseria meningitidis
- Streptococcus pneumoniae,
- Group B streptococcal disease, and
- Haemophilus influenzae type B (Hib).

This information sheet will focus on the disease caused by *Neisseria meningitidis* (Nay-sear-e-a men-in-git-it-dis), which is rare but especially risky for people of certain ages. Disease caused by *Neisseria meningitidis* is usually referred to as "meningococcal disease" (men-IN-jo-kok-ul disease). Many persons are exposed to *Neisseria meningitidis* and carry the bacteria in their nose and throat for weeks or months and spread the bacteria to others, but do not become sick themselves. If the meningococcal bacteria invade the body, they may cause a rapidly spreading infection of the blood, lung infection, or meningitis. More information about the other kinds of bacteria that cause meningitis can be found at the web sites listed in the box at the end of this information sheet.

Who is at risk from meningococcal disease?

Babies less than a year old have the highest risk for meningococcal disease, but no vaccine is available for babies. The risk of meningococcal disease increases for teenagers and young adults 15 through age 21 years of age, because of behaviors that spread the disease. On average, two or three people in this age group get meningococcal disease every year in Oklahoma. More than half of these could be prevented by vaccine.

College students, military personnel, and other people living in close quarters or dormitory-style housing have a greater chance of contracting the disease than other persons their age. Other persons at increased risk include smokers or persons frequently exposed to second-hand smoke, those with immune system

problems, those without a spleen, or international travelers going to countries where the disease is more common.

How is the disease spread?

The disease is spread by respiratory droplets produced by a person harboring the bacteria and expelled a short distance by laughing, singing, coughing, or sneezing. The bacteria may also be spread by direct contact with the respiratory fluids of someone who is infected. That includes kissing, or sharing a water bottle, food item, cigarettes, lipstick, lip balm, mouth guard or anything an infected person touches with his or her nose or mouth.

Why is meningococcal disease dangerous?

Meningococcal disease is relatively uncommon with about 2,500 people affected every year in the United States. However, the infection can spread very quickly and 300 of those people die in spite of treatment with antibiotics. Of those who live, about 400 a year lose their arms or legs, become deaf, have problems with their nervous systems, become mentally retarded, or suffer seizures or strokes.

For this reason, it is best to prevent the disease from occurring. Signs and symptoms of meningococcal disease may be confused with other infectious diseases. If your child has symptoms of meningococcal disease, contact your healthcare provider immediately.

Signs and Symptoms of Meningitis

- Headache
- Fever
- Chills
- Stiff neck
- Extreme tiredness
- Vomiting
- Sensitivity to light
- Rash of purplish black-red dots or splotches
- Confusion
- Seizures

How can meningococcal disease be prevented?

Vaccines can prevent approximately two-thirds of the meningococcal disease cases. There are two types of meningococcal vaccine available in the United States (MCV4 and MPSV4) that protect against four of the five most common disease-causing strains of the meningococcal bacteria.

MCV4 stands for meningococcal conjugate vaccine and MPSV4 stands for meningococcal polysaccharide vaccine. Two doses of, MCV4 are recommended for:

- All adolescents 11-18 years of age, and
- Other people at high risk 2 through 55 years of age.

MCV4 should be given to all adolescents at age 11 or 12 years, unless they have received it before. A booster dose is due at age 16 years. For adolescents who receive the first dose at age 13 through 15 years, a one-time booster dose should be given at age 16 through 18 years.

Children 2 years of age and older and adults who are at high risk for meningococcal disease should receive 2 doses spaced 2 months apart. People at high risk include individuals who:

- Do not have a spleen,
- · Have terminal complement deficiencies,
- HIV infection, or
- Will be traveling to countries with high rates of meningococcal disease.

Teens and young adults age 16 through 21 years who receive(d) their first dose of MCV at 16 years of age or older do not need a booster dose.

MPSV4 protects against the same types of meningococcal bacteria as MCV4 and is indicated for use in adults over 55 years of age who are at risk for meningococcal disease.

Teenagers and young adults can also reduce their risk by taking good care of themselves, by eating a balanced diet, getting enough sleep and exercise, as well as avoiding cigarettes and alcohol.

Is this vaccine required to attend school in Oklahoma?

Meningococcal vaccine is required for students who are enrolling for the first time in colleges and post-high school educational programs and who will live in dormitories or on-campus student housing. This vaccine is not required for children in elementary or high school in Oklahoma, even though it is recommended for all adolescents 11 years and older.

Is the meningococcal vaccine safe?

Yes, both types of vaccine are safe; however, there are small risks associated with any vaccine. About half of the people who receive a meningococcal vaccine will have pain and redness where the shot was given, but because the vaccine is not made from the whole bacteria, it cannot cause bloodstream infections or meningitis. A small percentage of people who get the vaccine develop

a fever. Vaccines, like all medicines, carry a risk of an allergic reaction, but this risk is very small.

A few cases of Guillain-Barré Syndrome (GBS), a serious nervous system disorder, have been reported among people who received MCV4. However, GBS is such a rare disease that it is not possible right now to tell if the vaccine is a part of the cause or simply due to chance alone because a number of cases of GBS will occur every year even without the use of MCV4 vaccine.

Does the meningococcal vaccine work?

Yes. A single dose of MCV4 meningococcal vaccine protects about 90 percent of the people who are immunized against meningococcal disease caused by types A, C, Y, and W-135. These types cause almost two-thirds of all meningococcal disease among teenagers in the United States. It does not prevent type B, which causes about one third of the cases in teenagers.

Does the meningococcal vaccine prevent all cases of meningitis?

No, it cannot provide protection against other causes of bacterial meningitis or type B meningococcal disease. Scientists have not been able to make a vaccine that will protect against type B.

Where can I get the vaccine for my son or daughter?

If your child has health insurance, you can obtain the meningococcal vaccine from your regular healthcare provider. All county health departments in Oklahoma have the vaccine available at no charge for children 11 through 18 years of age who:

- · Have no health insurance,
- Are Medicaid eligible,
- · Are Native American, or
- Have health insurance that does not pay for vaccines or does not pay for meningococcal vaccine;

<u>and</u> for children 2 through 18 years of age who are at high risk from meningococcal disease.

Where can I find more information?

For more information, contact your healthcare provider or local county health department or visit these web sites:

National Meningitis Association at www.nmaus.org

Centers for Disease Control and Prevention at http://www.cdc.gov/meningitis/index.htm





INFORMATION FOR PARENTS



IF YOUR FAMILY LIVES IN ANY OF THE FOLLOWING SITUATIONS:

In a shelter



In a motel or campground due to the lack of an alternative adequate accommodation



In a car, park, abandoned building, or bus or train station



Doubled up with other people due to loss of housing or economic hardship

Your school-age children may qualify for certain rights and protections under the federal McKinney-Vento Act.

Your eligible children have the right to:

- · Receive a free, appropriate public education.
- Enroll in school immediately, even if lacking documents normally required for enrollment.
- Enroll in school and attend classes while the school gathers needed documents.
- Enroll in the local school; or continue attending their school of origin (the school they attended when permanently housed or the school in which they were last enrolled), if that is your preference.
 - * If the school district believes that the school you select is not in the best interest of your children, then the district must provide you with a written explanation of its position and inform you of your right to appeal its decision.
- Receive transportation to and from the school of origin, if you request this.
- Receive educational services comparable to those provided to other students, according to your children's needs.

If you believe your children may be eligible, contact the local liaison to find out what services and supports may be available. There also may be supports available for your preschool-age children.





Local Liaison
Kristen Cottrell

Oaks School 918-868-2499 ext=1

State Coordinator

Tammy Smith OKSDE 405-522-3260

Oaks Mission Public School District Foster Care Plan

Under the requirements of the federal Every Student Succeeds Act (ESSA) Section 1112(c)(5)(B) Title I educational stability provisions take effect on December 10, 2016. By such date, each school district shall have a Foster Care Plan developed and disseminated to all stakeholders.

In Section 1111(c)(5) of ESSA, the school district must collaborate with the Child Welfare Agency and Tribal Child Welfare Agencies (CWA) to implement the Title I educational stability provisions. Therefore, each school district and develop a clear, written Foster Care Plan. As such, the Foster Care Plan for Oaks Massion Public School District shall be as follows:

1. LEA Point of Contact and responsibilities.

The superintendent will designate at least one person to serve as the Foster Care Point of Contact (POC). The POC will also be the homeless student coordinator. The name of this person will be turned in to the OSDE through the online Grants Management System by September 30th of each year. If additional staff members are needed to meet the requirements, the superintendent will make assignments as deemed necessary. The POC will work in the best interest of the child to ensure that all educational requirements are being met.

The POC will work closely with the CWA to:

- Coordinate with the corresponding child welfare agency POC to implement Title I provisions;
- Lead the development of a process for making the best interest determination;
- · Document the best interest determination;
- Facilitate the transfer of records and immediate enrollment;
- Facilitate data sharing with the child welfare agencies, consistent with FERPA and other privacy protocols;
- Develop and coordinate local transportation procedures;
- Manage best interest determinations and transportation cost disputes;
- Ensure that children in foster care are enrolled in and regularly attending school; and
- Provide professional development and training to school staff on the Title I provisions and educational needs of children in foster care, as needed.

2. Decision-making process.

A committee will meet to determine if the school of origin is not in the best interest of each foster care child and the appropriate placement of the child. The committee will be comprised of the site administrator or representative, the LEA's POC, and a member of the CWA. In

emergency circumstances the CWA has the authority to make an immediate decision regarding the school placement, and then consult with the LEA and revisit the best interest determination of the child.

In the event of a disagreement regarding school placement for a child in foster care, the CWA will be considered the final decision maker in making the best interest determination. The CWA is uniquely positioned to assess vital non-educational factors such as safety, sibling placements, the child's permanency goal, and other components of the case plan. The CWA also has the authority, capacity, and responsibility to collaborate with and gain information from multiple parties including parents, children, schools and the court in making these decisions.

3. The type of documentation or records that should be shared between parties.

Foster care parents, social workers or other legal guardians will be allowed to immediately enroll children in foster care in the school district without having the necessary paperwork (birth certificates, shot records, academic records, special education records, etc.) This is to help aid the student with a smooth transition into the district. The receiving school district will contact the school district of origin for the records and make adaptations as needed. After enrollment, the following guardianship or legal custody documents shall be provided for verification by the foster family or CWA:

- Power of attorney
- _ Affidavit
- Court Order

Oaks Mission Public School District will share education records with the CWA that are allowed by the Family Educational Rights and Privacy Act (FERPA) and other state privacy laws. This allows educational agencies to disclose without parental consent educational records, including IDEA, of students in foster care to the CWA.

4. Collaborative structure, such as regularly scheduled meetings, in which relevant individuals can participate in a particular process.

The POC will meet with the site administrator, school counselor, classroom teacher, and foster parent as needed to discuss the progress of the child in foster care and will document the results of meetings. All decisions will be made utilizing a collaborative team approach to determine what will be in the best interest of the child.

5. The best interest determination document regarding the child's school placement (school of origin or the receiving school).

Oaks Mission Public School District shall utilize the following sample form from the Oklahoma State Department of Education in making a "best interest" determination for each child in foster care. The final determination as to what is in the best interest of the child will be made by the CWA.

Print on School Letterhead and Individualized for Each Student Best Interest Determination Evaluation

Child's Name Birthday. Age: Grade: Dates: Current District. Current Site: Student will remain in the current school unless consideration of the following placement is in the child's best interest (check all that apply.)	factors ind	新州公共 2003年	e of school
	7	Receiving School (B)	Other Previous School Attended (C)
Which school will better meet the relational needs of the child? Select all that apply: Siblings Relationships with peers Relationships with staff Describe the relationship connections at current school:			
List strategies for maintaining important connections should other best interest determination be made:			
Which school will better meet the individual academic needs and challenges of the child? Select all that apply: o IEP o 504 Plan o Gifted Program o Career Tech o EL Services			
Which school will better meet the social/emotional needs and challenges of the child? Select all that apply: Social Emotional Safety		=	
Which school will better meet the unique needs and interests of the child? Select all that apply: Extracurricular Activities Sports Other			

Student will describe the areas of desired school involvement:		M	
Which school will best meet the permanency goal and likelihood of reunification with parents or siblings?			
Which school is more appropriate for the child's age and length of travel? Explain:			
Describe the child's transfer history.			
Which school does the student prefer to attend? Explain:			
Which school does the caregiver or current placement provider recommends the student attend? Explain:			
Identify strategies for successful transition to new school and/or support in current school:			
Supporting Documentation Attach any supporting documentation used to determine best interest of child: o Report Gards o Progress Reports o Achievement Data (test scores) o Attendance Data o IEP or Section 504 Plans o Other			
Determination Based on the information provided and considering the best interest of the obligationing school is the most appropriate educational placement for the	ld, the team	has determine	ed the
ALTO THE RESERVE OF THE PROPERTY OF THE PROPER	Signatur	A SAME AND S	
Printed name* Education Decision Maker	Signatur Signatur		
Other; Printed name Printed name	Signatur		

6. Transportation procedures.

Children in foster care will be entitled to transportation services in the same manner as all other children in the school district. In addition to regular transportation routes, the school district will collaborate with the CWA when transportation is required to maintain children placed in foster care in a school of origin outside their usual attendance area or district when it is in the best

interest of the student. Under the supervision of the superintendent, the POC will invite appropriate district officials, the CWA, and officials from other districts or agencies to promptly arrange cost-effect transportation for the student.

7. Responsibilities and costs related to student transportation.

Oaks Mission Public School District will collaborate with the CWA to develop and implement clear, written procedures governing how transportation is provided to maintain children in foster care in their schools of origin. The school district will also work with the CWA to reach an agreement in regards to covering the transportation costs. The agreement will cover how the transportation will be provided, arranged, and funded for the duration of the child's time in foster care. Each agreement can/will vary greatly because the unique needs of each child should be considered in making the decision on transportation.

8. Clear, written policies that will remove barriers to immediate enrollment and record transfers for children in foster care.

Oaks Mission Public School Board of Education has modified existing board policy to eliminate any barriers to enrollment and/or transfer of educational records for children in foster care.

OAKS-MISSION PUBLIC SCHOOL

357 W. MAIN ST. OAKS, OK 74359 ph.918.868.2499 fax 918.868.5012

Dear Parents and Guardians:

In accordance with Parents Right-to-Know requirement under Every Student Succeeds Act - ESSA, Section1112 (e)(1)(A) this is a notification from Oaks Mission School to every parent/guardian of a student in a Title I school that you have the right to request and receive in a timely manner:

a) information regarding the professional qualifications of your student's classroom teachers. The information regarding the professional qualifications of your student's classroom teachers shall include the following:

If the teacher has met state qualification and licensing criteria for the grade level and subject areas taught;

If the teacher is teaching under emergency or temporary status in which the state qualifications and licensing criteria are waived;

The teachers baccalaureate degree major, graduate certification, and field of discipline; and

Whether the student is provided services by paraprofessionals, and if so, their qualifications [ESSA, Section 1112(e)(1)(A)(i)-(ii)]

b) information regarding any State or local educational agency policy regarding student participation in any assessments mandated by section 1111(b)(2) and by the State or local educational agency, which shall include a policy, procedure, or parental right to opt the child out of such assessment, where applicable. [ESSA, Section 1112(e)(2)(A)]

c) upon request, parents of an English learner may:

have the child immediately removed from an English Learner (EL) program; [ESSA 1112(e)(3)(A)(viii)(i)]

decline the child's enrollment in an EL program, or choose another program or method of instruction, if available; [ESSA, Section 1112(e)(3)(A)(viii)(ii)]

receive assistance in selecting among various programs and methods of instruction, if more than 1 program or method is offered by the eligible entity. [ESSA 1112(e)(3)(A)(viii)(iii)]

d) In addition to the above information you will be notified if your student has been taught for four or more consecutive weeks by a teacher who does not meet the applicable state certification for licensure requirements at the grade level and subject area in which the teacher has been assigned.

[ESSA, Section 1112(e)(1)(B)(ii)]

If you have questions or concerns, please feel free to contact me at 918-868-2499

Bruce Davis

Superintendent
Oaks Mission School

Dear Families,

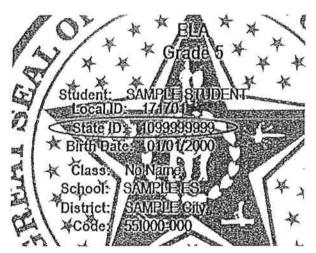
It is important to remember that your student's strengths, abilities and potential cannot be measured by a single test score. Each student grows at different rates, both physically and academically. State tests help gauge how your student is growing in the knowledge and skills outlined in the Oklahoma Academic Standards. State test results, when combined with other information (i.e., report card grades, teacher feedback, classroom performance and local tests), can help you and your local school support your student's growth.

Your student's state test results will be available at the end of May in the OSTP Student/Family Portal.

The portal can be found here:

https://okparentportal.emetric.net/login

If you have not already set up an account, you will need your student's 10-digit State ID (STN) number and date of birth. If you have last year's OSTP results, the 10-digit State ID (STN) can be found on the front page of the report. It is labeled <u>State ID</u> and is located beneath your student's name and local ID number.



If you do not currently have access to your student's 10-digit State ID (STN), please contact us at 918-868-2499.

Information provided in the portal helps you know:

- How your student performed in each key academic area
- Where your student is doing well and where they may need additional support at home and at school
- How your student performed compared to others

If you have questions, please contact us at: Oaks Mission School, Principal: Ryan Cottrell or Holly Davis.

OAKS MISSION SCHOOL TITLE I PARENT INVOLVEMENT

PART I. GENERAL EXPECTATIONS

Oaks Mission School District agrees to implement the following statutory requirements:

- The school district will put into operation programs, activities and procedures for the involvement of parents in all of its schools with Title I, Part A programs, consistent with section 1118 of the Elementary and Secondary Education Act (ESEA). Those programs, activities and procedures will be planned and operated with meaningful consultation with parents of participating children.
- Consistent with section 1118, the school district will work with its schools to ensure that the required school-level parental involvement policies meet the requirements of section 1118(b) of the ESEA, and each include, as a component, a school-parent-student compact consistent with section 1118(d) of the ESEA.
- ❖ The school district will incorporate this district wide parental involvement policy into its LEA plan developed under section 1112 of the ESEA.
- ❖ In carrying out the Title I, Part A parental involvement requirements, to the extent practicable, the school district and its schools will provide full opportunities for the participation of parents with limited English proficiency, parents with disabilities, and parents of migratory children, including providing information and school reports required under section 1111 of the ESEA in an understandable and uniform format and, including alternative formats upon request, and, to the extent practicable, in a language parents understand.
- ❖ If the LEA plan for Title I, Part A, developed under section 1112 of the ESEA, is not satisfactory to the parents of participating children, the school district will submit any parent comments with the plan when the school district submits the plan to the State Department of Education.
- The school district will involve the parents of children served in Title I, Part A schools in decisions about how the 1 percent of Title I, Part A funds reserved for parental involvement is spent, and will ensure that not less than 95 percent of the one percent reserved goes directly to the schools.
- ❖ The school district will be governed by the following statutory definition of parental involvement, and expects that its Title I schools will carry out programs, activities, and procedures in accordance with this definition:

Parental involvement means the participation of parents in regular, two-way meaningful communication involving student academic learning and other school activities, including ensuring—

- (A) that parents play an intregal role in assisting their child's learning;
- (B) that parents are encouraged to be actively involved in their child's education at school;
- (C) that parents are full partners in their child's education and are included, as appropriate, in decision-making and on advisory committees to assist in the education of their child;
- (D) the carrying out of other activities, such as those described in Section 1118 of the ESEA.

PART II. DESCRIPTION OF HOW DISTRICT WILL IMPLEMENT REQUIRED DISTRICT WIDE PARENTAL INVOLVEMENT POLICY COMPONENTS.

- 1. Oaks Mission School District will take the following actions to involve parents in the joint development of its district wide parental involvement plan under section 1112 of the ESEA:
 - a. The LEA will provide each student with a copy of the District Wide Parental Involvement Policy when the school year begins or when their child enrolls at Oaks Mission School for the first time.
 - b. At the end of the 3rd 9 weeks, surveys will be sent home with each student to assess the effectiveness of the district's parental involvement.
 - c. School-Parent-Student Compacts will be given to each child at the beginning of the school year or when they enroll for the first time at Oaks Mission School.
 - d. Parents will be notified when the local parent-teacher conferences are scheduled to establish positive parental involvement.
 - e. Parents will be encouraged to volunteer and participate in their child's class and to observe classroom activities.
 - f. The teachers will call the parents monthly to give positive reports to the parents and to address any concerns the parent may have.
- 2. Oaks Mission School District will coordinate and integrate parental involvement strategies in Title I, A with parental involvement strategies in other programs by working with the programs to coordinate and align the Oklahoma Academic Standards.

PART II: DESCRIPTION OF HOW DISTRICT WILL IMPLEMENT REQUIRED DISTRICTWIDE PARENT AND FAMILY ENGAGEMENT POLICY COMPONENTS

- 1) The Oaks Mission Elementary School will take the following actions to involve parents and family members in the joint development of its district-wide parental engagement plan under section 1112 of ESEA as amended by ESSA:
 - a) Establishing a district-wide Parent Advisory Team to provide advice on matters related to parental involvement. This Team will jointly develop, with district staff, the district parental engagement plan, which will be reviewed annually and revised as needed.
 - b) Assist all schools and their teams in developing school level plans that increase parent and family engagement.
- 2) The Oaks Mission Elementary School will take the following actions to involve parents in the process of school support and improvement under section 1111(d) of the ESEA as amended by ESSA:
 - a) Ensuring that an Annual Title I meeting is hosted for all parents early in the school year at each school building. Parents will meet with classroom teachers, Title I teachers, and itinerant staff to learn about curriculum, annual objectives, and teacher expectations.
 - b) Require each school to have meetings in addition to the required Annual Title I meeting.
- 3) The Oaks Mission Elementary School will provide the following necessary coordination, technical assistance, and other support to assist Title I, Part A schools in planning and implementing effective parental and family engagement activities to improve student academic achievement and school performance:
 - a) Providing timely support, information, and services to staff in participating Title I programs
 - b) Designating a Parent and Family Liaison to encourage and support parent and family engagement activities.
 - c) Developing a committee, which includes parents, to develop, monitor and revise program activities.
 - d) Hosting meetings, events, celebrations, and conferences that invite parents and community members to learn more about program goals and activities.
 - e) Offering parent workshops on a variety of topics specific to each program such as literacy, child development, drug and alcohol issues, arts education, and technology integration.
- 4) The Oaks Mission Elementary School will take the following actions to conduct, with the engagement of parents, an annual evaluation of the content and effectiveness of this parent and family engagement policy in improving the quality of the Title I, Part A schools. The evaluation will include identifying barriers to greater participation by parents in parental engagement activities (with particular attention to parents who are

economically disadvantaged, and disabled, have limited English proficiency, have limited literacy, or are of any racial or ethnic minority background). The school district will use the findings of the evaluation about its parent and family engagement policy and activities to design strategies for more effective parental engagement, and to revise, if necessary (and with the involvement of parents) its parent and family engagement policies.

- a) Conducting annual surveys of parents to evaluate the effectiveness of parental engagement activities provided by each school and the district.
- b) Utilizing survey results in the strategic planning process for each school and the district. The Parent and Family Liaison will assist in the evaluation and planning process.
- c) Offering each parent in the district the opportunity to provide feedback to the school and district staff on program activities and parental engagement plans.
- 5) The Oaks Mission Elementary School will build the schools' and parents' capacity for strong parental engagement, in order to ensure effective engagement of parents and to support a partnership among the school involved, parents and the community to improve student academic achievement, through the following activities specifically described below. The school district will, with the assistance of its Title I, Part A schools, provide assistance to parents of children served by the school district or school, as appropriate, in understanding topics such as the following—
 - (1) Oklahoma's academic content standards,
 - (2) Oklahoma's and the local academic assessments including alternate assessments,
 - (3) The requirements of part A
 - (4) How to monitor a child's progress,
 - (5) How to work with educators.

The Oaks Mission Elementary School will provide assistance on these topics by undertaking the actions described below:

- a) Providing appropriate training for parents in appropriate settings so that parents can learn about child development, state and district academic standards and assessments, and show parents how to work with their children to improve their children's achievement including monitoring a child's progress and working with teacher/school staff.
- b) Arranging meetings at flexible times to maximize the opportunities for parents to participate.
- c) Coordinating workshops and classes and provide information on statewide and out of-state conferences that focus on improving parental engagement in their child's education.
- d) Providing, with the assistance of its schools, materials and training to help parents work with their children to improve their children's academic achievement, such as literacy training, and using technology, as appropriate, to foster parental engagement, by sponsoring programs for parents and community members on a

- variety of topics such as literacy, child development, drug and alcohol issues, and technology throughout the school year.
- e) Educating teachers, pupil services personnel, principals, and other staff, in how to reach out to, communicate with, and work with parents as equal partners, in the value and utility of contributions of parents, and in how to implement and coordinate parent programs and build ties between parents and schools, by:
 - (1) Sponsoring programs for parents and community members on a variety of topics such as early childhood development, literacy, child psychology and proper healthcare throughout the school year.
 - (2) Offering programs to parents of preschool age children in collaboration with local and state services.
- f) Sending information related to the school and parent-programs, meetings, and other activities to the parents of participating children in an understandable and uniform format, including alternative formats upon request, and to the extent practicable, in a language the parents can understand by:
- g) (1) Providing documents of a professional quality,
 - (2) Complying with all federal requirements for parents with limited English proficiency, parents with disabilities, and parents of migratory children.

PART II: DESCRIPTION OF HOW DISTRICT WILL IMPLEMENT REQUIRED HIGH SCHOOL PARENT AND FAMILY ENGAGEMENT POLICY COMPONENTS

- 1) The Oaks Mission High School will take the following actions to involve parents and family members in the joint development of its district-wide parental engagement plan under section 1112 of ESEA as amended by ESSA:
 - a) Establishing a district-wide Parent Advisory Team to provide advice on matters related to parental involvement. This Team will jointly develop, with district staff, the district parental engagement plan, which will be reviewed annually and revised as needed.
 - b) Assist all schools and their teams in developing school level plans that increase parent and family engagement.
- 2) The Oaks Mission High School will take the following actions to involve parents in the process of school support and improvement under section 1111(d) of the ESEA as amended by ESSA:
 - a) Ensuring that an Annual Title I meeting is hosted for all parents early in the school year at each school building. Parents will meet with classroom teachers, Title I teachers, and itinerant staff to learn about curriculum, annual objectives, and teacher expectations.
 - b) Require each school to have meetings in addition to the required Annual Title I meeting.
- 3) The Oaks Mission High School will provide the following necessary coordination, technical assistance, and other support to assist Title I, Part A schools in planning and implementing effective parental and family engagement activities to improve student academic achievement and school performance:
 - a) Providing timely support, information, and services to staff in participating Title I programs
 - b) Designating a Parent and Family Liaison to encourage and support parent and family engagement activities.
 - c) Developing a committee, which includes parents, to develop, monitor and revise program activities.
 - d) Hosting meetings, events, celebrations, and conferences that invite parents and community members to learn more about program goals and activities.
 - e) Offering parent workshops on a variety of topics specific to each program such as literacy, child development, drug and alcohol issues, arts education, and technology integration.
- 4) The Oaks Mission High School will take the following actions to conduct, with the engagement of parents, an annual evaluation of the content and effectiveness of this parent and family engagement policy in improving the quality of the Title I, Part A schools. The evaluation will include identifying barriers to greater participation by parents in parental engagement activities (with particular attention to parents who are

economically disadvantaged, and disabled, have limited English proficiency, have limited literacy, or are of any racial or ethnic minority background). The school district will use the findings of the evaluation about its parent and family engagement policy and activities to design strategies for more effective parental engagement, and to revise, if necessary (and with the involvement of parents) its parent and family engagement policies.

- a) Conducting annual surveys of parents to evaluate the effectiveness of parental engagement activities provided by each school and the district.
- b) Utilizing survey results in the strategic planning process for each school and the district. The Parent and Family Liaison will assist in the evaluation and planning process.
- c) Offering each parent in the district the opportunity to provide feedback to the school and district staff on program activities and parental engagement plans.
- 5) The Oaks Mission High School will build the schools' and parents' capacity for strong parental engagement, in order to ensure effective engagement of parents and to support a partnership among the school involved, parents and the community to improve student academic achievement, through the following activities specifically described below. The school district will, with the assistance of its Title I, Part A schools, provide assistance to parents of children served by the school district or school, as appropriate, in understanding topics such as the following—
 - (1) Oklahoma's academic content standards,
 - (2) Oklahoma's student ACT standards,
 - (3) Oklahoma's and the local academic assessments including alternate assessments.
 - (4) The requirements of part A
 - (5) How to monitor a child's progress,
 - (6) How to work with educators.

The Oaks Mission High School will provide assistance on these topics by undertaking the actions described below:

- a) Providing appropriate training for parents in appropriate settings so that parents can learn about child development, state and district academic standards and assessments, and show parents how to work with their children to improve their children's achievement including monitoring a child's progress and working with teacher/school staff.
- b) Arranging meetings at flexible times to maximize the opportunities for parents to participate.
- c) Coordinating workshops and classes and provide information on statewide and out of-state conferences that focus on improving parental engagement in their child's education.
- d) Providing, with the assistance of its schools, materials and training to help parents work with their children to improve their children's academic achievement, such as literacy training, and using technology, as appropriate, to foster parental

- engagement, by sponsoring programs for parents and community members on a variety of topics such as literacy, child development, drug and alcohol issues, and technology throughout the school year.
- e) Educating teachers, pupil services personnel, principals, and other staff, in how to reach out to, communicate with, and work with parents as equal partners, in the value and utility of contributions of parents, and in how to implement and coordinate parent programs and build ties between parents and schools, by:
 - (1) Sponsoring programs for parents and community members on a variety of topics such as literacy, child psychology and proper healthcare throughout the school year.
 - (2) Offering programs to assist parent in post high school education with local vocational programs and state college services.
- f) Sending information related to the school and parent-programs, meetings, and other activities to the parents of participating children in an understandable and uniform format, including alternative formats upon request, and to the extent practicable, in a language the parents can understand by:
- g) (1) Providing documents of a professional quality,
 - (2) Complying with all federal requirements for parents with limited English proficiency, parents with disabilities, and parents of migratory children.

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Home / DAKS MISSION / DAKS MISSION CS

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2017 - 2018

OAKS-MISSION ES

PK - 08 Grades

ATSI Designation

PRINCIPAL

SHARILYN VANHOUSE

ENROLLMENT

137 (2018)

PHONE

(918) 868-2455

WEBSITE

OAKSSCHOOLS.COM

PROGRAMS OF EXCELLENCE

Beginning next year, Programs of Excellence will celebrate schools working to ensure students receive a well-rounded education in a safe and healthy environment. Schools identified as Programs of Excellence at one of three levels - bronze, silver or gold - will be distinguished for their evidence-based practices and support structures. Click here to learn more about how your school can foster Programs of

Fine Arts

Social Studies and Civics

Mathematics

World Languages

Science

Safe and Healthy Schools

RELATED PROGRAMS

() Academic Team

() Fine Arts ⊕ Half/Full Day Pre-K

Agriculture

O Business

O STEM

O Computer Science

O World Languages

⊙ indicates available program

INDICATORS

ACADEMIC ACHIEVEMENT

How prepared are students for the next grade, course or level?

Points Possible: 35



(D)

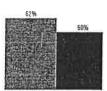
52%

SCHOOL STATE ACADEMIC GROWTH

How are students growing compared to their performance the previous year?

Points Possible: 30





STATE

(c)

SCHOOL

ENGLISH LANGUAGE PROFICIENCY PROGRESS

How well are English learners meeting their language-acquisition largets?

Points Possible: 0

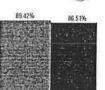


STATE

SCHOOL

CHRONIC ABSENTEEISM

What percentage of students is in good attendance? Points Possible: 10



SCHOOL

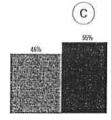
STATE



How did the school perform overall?

Points Possible: 75

OVERALL GRADE



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2017 - 2018

TAKS-MESTON HS

09 - 12 Grades

CSI Designation

PRINCIPAL CD THOMPSON

ENROLLMENT

85 (2018)

PHONE

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OAKSSCHOOLS.COM

PROGRAMS OF EXCELLENCE

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Fine Arts

Social Studies and Civics

Mathematics

World Languages

Science

Safe and Healthy Schools

O International Baccalaureate Courses

RELATED PROGRAMS

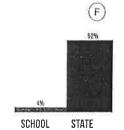
- O Advanced Placement Courses
- @ CareerTech Courses
- O Internships
- O Computer Science
- () ROTC
- ⊕ Fine Arts/Drama/Speech
- O World Languages
- O Industrial Arts/Technology Education
- (a) indicates available program

INDICATORS

ACADEMIC ACHIEVEMENT

How prepared are students for the next grade, course or level?

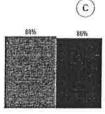
Points Possible: 30



GRADUATION

What percentage of students graduated in four or five years?

Points Possible: 10



SCHOOL

STATE

ENGLISH LANGUAGE PROFICIENCY PROGRESS

How well are English learners meeting their language-acquisition targets?

Points Possible: 0



NA

SCHOOL



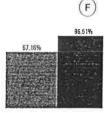
STATE

(F)

CHRONIC ABSENTEEISM

What percentage of students is in good attendance? Points Possible: 10



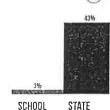


SCHOOL

STATE

POSTSECONDARY OPPORTUNITIES

How well are schools helping students gain early college and career exposure? Points Possible: 10



OVERALL GRADE

How did the school perform overall? Points Possible: 60

