

516 ADMINISTERING MEDICATION TO STUDENTS

I. PURPOSE

The purpose of this policy is to set forth the provisions that must be followed when administering nonemergency prescription medication to students at school.

516 ADMINISTERING MEDICATION TO STUDENTS**II. GENERAL STATEMENT OF POLICY**

The school district acknowledges that some students may require prescribed drugs or medication during the school day. The school district's licensed school nurse, trained health assistant, trained designee, principal, or teacher will administer medications, except any form of medical cannabis, in accordance with law and school district procedures.

III. REQUIREMENTS

- A. The administration of prescription medication or drugs at school requires a completed and signed authorization for medication administration form from the student's parent and physician. (See IIIB). An oral request must be reduced to writing within two school days, provided that the school district may rely on an oral request until a written request is received.
1. Intravenous (IV), Intramuscular, (IM), subcutaneous (SQ) and rectal medications that may be required must be given by a Registered Nurse (RN) or by a Licensed Practical Nurse (LPN) under the direction of a physician's order. {Licensed Practical Nurses only give IM,SQ, and Rectal}
 2. The Emergency Treatment for Minors Act (MN Stat. 144.344) allows schools to make emergency decisions about sensitive health issues and concerns and physicians to provide immediate care while parents are being contacted. (Examples include: trained school personnel administering epi-pen auto injectors, or any emergency medication ordered by a physician to address student's emergency health needs.)
- B. An "Authorization for Administering Medications" form must be completed annually (once per school year) and/or when a change in the prescription or requirement for administration occur. Prescription medication as used in this policy does not include any form of medical cannabis as defined in Minnesota Statutes section 152.22, Subd. 6.
- C. Prescription medication must come to school in the original container labeled for the student by a pharmacist in accordance with the law, and must be administered in a manner consistent with the instructions on the label.
- D. The school nurse may request further information about the prescription, prior to administration of the substance.
- E. Prescription medications are not to be carried by the student, but will be left with the appropriate school district personnel. Exceptions to this requirement

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are: self administered prescription asthma medication and medications administered as noted in a written agreement between the school district and the parent or as specified in an IEP (individualized education program), Section 504 plan, or IHP (individual health plan) or ECP (Emergency Care Plan). (See Part K.6)

- F. The school must be notified immediately by the parent or student 18 years old or older in writing of any change in the student's prescription medication administration. A new medical authorization or container label with new pharmacy instructions shall be required immediately as well.
- G. For drugs or medicine used by student with a disability, administration may be as provided in the IEP, Section 504 plan or IHP. Authorization for Administering Medications form is required. (See Part III A, B, C.)
- H. The school nurse, or other designated person, shall be responsible for the filing of the Administering Prescription Medications form in the health records section of the student file. The school nurse, or other designated person, shall be responsible for providing a copy of such form to the principal and to other personnel designated to administer the medication.
- I. Procedures for administration of drugs and medicine at school and school activities shall be developed in consultation with a school nurse, a licensed school nurse, or a public or private health organization or other appropriate party (if appropriately contracted by the school district under Minnesota Statutes section 121A.21). The school district administration shall submit these procedures and any additional guidelines and procedures necessary to implement this policy to the School Board for approval. Upon approval by the School Board, such guidelines and procedures shall be an addendum to this policy. (See Addendum 1)
- J. If the administration of a drug or medication described in this section requires the school district to store the drug or medication, the parent or legal guardian must inform the school if the drug or medication is a controlled substance. For a drug or medication that is not a controlled substance, the request must include a provision designating the school district as an authorized entity to transport the drug or medication for the purpose of destruction if any unused drug or medication remains in the possession of school personnel. For a drug or medication that is a controlled substance, the request must specify that the parent or legal guardian is required to retrieve the drug or controlled substance when requested by the school.
- K. Specific Exceptions:

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1. Special health treatments and health functions such as catheterization, tracheostomy suctioning, and gastrostomy feedings do not constitute administration of drugs and medicine;
2. Emergency health procedures, including emergency administration of drugs and medicine will be administered via instructions in the ECP and are not subject to this policy. (Emergency Care Plan). (See part K.6)
3. Drugs or medicine provided or administered by a public health agency to prevent or control an illness or a disease outbreak are not governed by this policy;
4. Drugs or medicines used at school in connection with services for which a minor may give effective consent are not governed by this policy;
5. Drugs or medicine administered in school by a parent/guardian are not governed by this policy;
6. Drugs or medicines that are prescribed as self carry and/or self administer for asthma or reacting airway disease, (inhalers), bee allergies (Epi-pen), food/other allergies (Epi-pen), diabetes (insulin, insulin pump, or emergency glucose) are allowed if:
 - a. the school district has received a completed ECP (emergency care plan) and authorization for administering medications form. This provides written authorization from the student's parent and physician permitting the student to self-carry and administer the medication.
 - b. the medication is properly labeled for the student: (see IIC) and
 - c. the parent has not requested school personnel to administer the medication to the student

The parent must submit written authorization for the student to self-administer/self carry the medication each school year. The prescribing professional must document in the ECP or authorization for administering medication form their assessment of the student's knowledge and skills to safely possess and use the medication in a school setting (example: asthma inhaler).

The school nurse or appropriate party will review the ECP and authorization made by the prescribing professional to assure the

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student has adequate skills to safely possess and administer their medication in school (example: asthma inhaler). The ECP will be filed in student's health record.

7. Medications that are considered "controlled substances (M.S.152.02 – Schedule of Controlled Substances) by law will not be allowed as self carry/self administer.
8. Medications:
 - a. that are used off school grounds;
 - b. that are used in connection with athletics or extracurricular activities; or
 - c. that are used in connection with activities that occur before or after the regular school day are not governed by this policy.

Parents or legal guardians are encouraged to work with coaches or other adults to ensure medications are provided if needed during this time.

9. Nonprescription Medication

The administration of Nonprescription Medication or drugs at school requires written or verbal authorization from the student's parent or legal guardian. An Authorization for Administering Medications form should be completed annually or permission indicated on the student's emergency card information. The non prescription medication must come in the original container and must be administered in a manner consistent with the instructions on the label. A physician must authorize any non-prescription medication request that does not follow the instructions on the label.

10. Auto-Injections

Prescription epinephrine auto-injectors, may be carried and used by the student as indicated by state law. The parent and prescribing medical professional must annually inform the student's school in writing that:

- a. the pupil may possess the epinephrine auto-injectors; and may self administer or have staff administer the medication; or
- b. the pupil is unable to possess the epinephrine and requires immediate access to the auto-injector of epinephrine to self administer or have

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staff administer. The parent will provide or properly labeled auto-injector to the school for the student.

11. A student may possess and apply a topical sunscreen product during the school day while on school property or at a school-sponsored event without a prescription, physician's note, or other documentation from a licensed health care professional. School personnel are not required to provide sunscreen or assist students in applying sunscreen.
- L. "Parent" for students 18 years old or older is the student.
- M. Procedure regarding unclaimed drugs or medications.
1. The school district has adopted the following procedure for the collection and transport of any unclaimed or abandoned prescription drugs or medications remaining in the possession of school personnel in accordance with this policy. Before the transportation of any prescription drug or medication under this policy, the school district shall make a reasonable attempt to return the unused prescription drug or medication to the student's parent or legal guardian. Transportation of unclaimed or unused prescription drugs or medications will occur at least annually, but may occur more frequently at the discretion of the school district.
 2. If the unclaimed or abandoned prescription drug is not a controlled substance as defined under Minnesota Statutes section 152.01, subdivision 4, or is an over-the-counter medication, the school district will either designate an individual who shall be responsible for transporting the drug or medication to a designated drop-off box or collection site or request that a law enforcement agency transport the drug or medication to a drop-off box or collection site on behalf of the school district.
 3. If the unclaimed or abandoned prescription drug is a controlled substance as defined in Minnesota Statutes section 152.01, subdivision 4, the school district or school personnel is prohibited from transporting the prescription drug to a drop-off box or collection site for prescription drugs identified under this paragraph. The school district must request that a law enforcement agency transport the prescription drug or medication to a collection bin that complies with Drug Enforcement Agency regulations, or if a site is not available, under the agency's procedure for transporting drugs.

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Addendum 1

ISD 318 Medication Guidelines & Procedure

The following medication procedure was adapted from the Minnesota Guidelines of Medication Administration in Schools March 2005. The fore-mentioned Guideline was developed through a collaborative by the Minnesota Board of Nursing, The Minnesota Department of Education and the Minnesota Department of Human Services.

1. Relevant Laws

- Federal laws emphasize: (1) the rights of students with special needs, medical or otherwise to have access to and to be educated in public schools, and (2) the sensitive topic of records, including family access to education and health records in school
- State laws pertain to school systems, health care practice, records, and individual rights.
- School District policies are developed within the guidelines of federal and state law and in collaboration with a licensed school nurse/registered nurse.

2. Delegation of Medication

- Delegation of medication administration by LSN/RN is allowed in Minnesota schools.
- The LSN/RN uses professional judgement to decide what is delegated and to whom. The LSN/RN may choose not to delegate some medication administration activities. It is the judgement of the LSN/RN whether the delegated functions can be properly and safely performed by the person without jeopardizing the student's welfare.
- Some activities that require specialized nursing knowledge and skill may be delegated only to LPN's and some activities that do not require specialized nursing knowledge may be delegated to trained unlicensed personnel. It is the responsibility of the LPN/unlicensed personnel to perform the delegated activity correctly. No employee may be coerced into compromising student safety by being required to administer medication if that person determines that it is inappropriate to do so.
- The LSN/RN is accountable to verify that the delegate can perform the activity and do so safely. This is done on a case by case basis and is appropriate when the student requires routine, repetitive, ongoing medication administration. When medication administration is not routine and the student's response to medication is less predictable delegation should be carefully considered. (See the attached Addendum III medication administration decision making tree provided by the MN Dept. of Health Guidelines for medication administration in schools manual)
- The LSN/RN is only one who can make delegatory decisions by assessing the situation and using the following:
 - Must assess the student's needs prior to delegating
 - Must provide adequate oversight of the medication administration activities

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- Must keep written documentation of the person's initial training and ongoing competency
 - Must determine if the nursing care needs of the student are stable, performance of the function does not pose potential harm to the student, function involves little or no modification, function has a predictable outcome, function does not inherently involve ongoing assessment, interpretation or decision making, the performance of the function is by someone with appropriate skills and competency level and supervision is available.
 - The person accepting the delegation cannot re-delegate the nursing function to anyone without the involvement of and supervision by an LSN/RN
3. Principles that Influence Medication Administration Procedures must be known and followed by anyone who is administering medication:
- Guarantee that medication administration is a clean procedure by washing hands.
 - Give medication exactly as ordered by the health care provider or indicated on manufacturer's instructions.
 - Everything should be done to avoid "no-shows," especially for seizure medication and antibiotics.
 - Prevent Errors! Do not allow yourself to be distracted. Do not use one student's medication for another.
 - Keep individual information private.
 - Apply child development principles when working with students (e.g. students do not want to be considered different).
 - If there is an error or medication incident, it must be reported. Notify your LSN/RN, student's parent/legal guardian, physician, principal.
4. Medication administration during school hours will:
- be provided by the building LPN or LSN/RN if at all possible during the designated nurse time.
 - be delegated to a willing trained unlicensed personnel if the LPN/LSN/RN is not available. This person will be selected by one of the following: the Principal, building LPN or LSN/RN. The person will attend yearly training, pass a designated amount of skills competency, follow the District procedure for administering medication.
 - allow for students to self-administering medication during school hours (see self administration section)
5. Medication administration during school sponsored field trips:
- school education staff may be assigned to take responsibility for handling and administering medication if there is not a nurse attending; the education staff assigned will be trained to administer the medication, documentation and checked for

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competency prior to the field trip; (or) a parent/legal guardian may accompany students on field trips to administer the medication but is not required

- medication must be sent in the original container and should be accompanied by a copy of the medical prescriber's order and parent authorization form. (or)

- medication may be prepared in paper envelopes or other suitable containers; a container may only hold one medication and labeled with the date, student's name, school, name of medication, strength and dose, time medication needs to be given, and the initials of the person preparing the medication; a copy of the prescriber's order and parent authorization form should accompany the envelope.

6. Medication administration during extra-curricular activities:
if the activity is school sponsored; students and parents need to notify coaches of health concerns and any need for medication such as asthma inhalers etc. Students that require emergency medication should self carry and self administer. Parents may train or consult with the LSN to assist in training any coach to administer emergency medication appropriate for the student.
 - if the activity is run by non-school organizations, the parent/student must work directly with that organization/coach to ensure the safety of the student.

7. Education and Training: (staff assigned to administer medication will)
 - watch a video and review a booklet on "Administering Medications to Students"
 - pass a written test and skill competency check
 - may be checked for competency at least one time beyond the initial competency check
 - will know the six rights of medication administration
 - will be provided with information about the medication they are administering

8. Student who self carry and self administer prescription medication during school hours must comply with the following:
 - an authorization form completed by the parent/guardian and physician will be submitted to the school to allow a student to responsibly carry, use their medications. (This authorization is renewed every year.)
 - documentation from the prescriber should include:
 - < student is capable of and has received training on administering the prescribed medication and can self administer appropriately
 - < name and purpose of the medication, dosage of medication, times at which medication or circumstances under which the medication may be given, route of administration, potential side effects

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- if the student is carrying an albuterol inhaler, epi pen, insulin, insulin pumps, glucagon or oral glucose they must have a completed emergency care plan/health plan on file in the health office
- student must demonstrate responsibility by documenting when the medication is used and reviewing with the building nurse periodically. If an emergency medication has been used the student should let the nurse know immediately.

This guideline is a supplement to the District Medication Policy and must be followed to ensure student safety and consistency in medication administration throughout the district.

516 Administering Medicine to Students**Medication Administration Procedure**

Step by step Procedure: When medications are administered by any school personnel the following procedures must be followed:

- Procedure 1: Wash hands (instant hand sanitizers are acceptable). Administration of medication is a clean (not sterile) procedure, unless otherwise specified.
- Procedure 2: Verify authorization from parent and/or prescriber; check the label and/or manufacturer's instructions. Seek help when questions arise.
- Procedure 3: Gather necessary items
- Procedure 4: Prepare and give medications in a well-lit, dedicated area. Remove medication from the locked cabinet.
- Procedure 5: Check the label for name, time, medication, dose and route and make sure it matches the prescriber's order.
- Procedure 6: Prepare the correct dosage of medication without touching medication if possible, if medication has been prepared in daily dispensers check to see if medication is the same as in the bottle.
- Procedure 7: Do not leave medication unattended.
- Procedure 8: Provide equipment and supplies (e.g., medication cups and alcohol wipes) as needed.
- Procedure 9: Identify the student: Ask the student to say his/her name. Nonverbal students may need third party assistance with identification. Take measures to maintain data privacy.
- Procedure 10: Verify the student's allergies verbally by asking the student and by checking with the health record. Also verify contraindications to medicine. Watch for typical adverse reactions to medications. If an adverse reaction is evident or suspect, contact the supervisor, parent/legal guardian, or licensed prescriber. Recheck correct medication, dose and student.
- Procedure 11: If the student questions whether it is the right medication, stop and verify the medication against records, with parent/legal guardian, or with registered pharmacist.
- Procedure 12: Explain procedure to student.

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- Procedure 13: Position the student properly for medication administration.
- Procedure 14: Administer medication according to the six rights (right student, right time, right medicine, right dose, right route and right documentation).
- Procedure 15: Record name, time, medication dose, route, person administering the medication and number of medication left in the student's health record.
- Procedure 16: Wash hands (or use hand sanitizer)

This set of procedures can be modified as needed based on routine or emergency administration and the route of administration: oral, inhaled, topical, rectal, intravenous, pumps, gastrostomy tube, intramuscular, subcutaneous, or ear and eye.

Six Rights of Medication Administration

- 1) Right Student:** Properly identify the student (e.g., rather than asking the student, "Are you Jane Doe?" Before administering the medication, ask the student to state his/her name).
- 2) Right Time:** Administer medication at the prescribed time. This can usually be within 30 minutes earlier or later than the designated time unless otherwise specified by the provider or pharmacist.
- 3) Right Medicine:** Administer the correct medication, check **three** times prior to administration.
- 4) Right Dose:** Administer the right amount of medication.
- 5) Right Route:** Use the prescribed method of medication administration.
- 6) Right Documentation:** Promptly and accurately document the medication administration.

Legal References: Minn. Stat. § 13.32 (Student Health Data)
Minn. Stat. § 121A.21 (Hiring of Health Personnel)
Minn. Stat. § 121A.22 (Administration of Drugs and Medicine)
Minn. Stat. § 121A.2205 (Possession and Use of Epinephrine Auto-Injectors; Model Policy)
Minn. Stat. § 121A.2207 (Life-Threatening Allergies in Schools; Stock Supply of Epinephrine Auto-Injectors)
Minn. Stat. § 121A.221 (Possession and Use of Asthma Inhalers by Asthmatic Students)

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Minn. Stat. § 121A.222 (Possession and Use of Nonprescription Pain Relievers by Secondary Students)

Minn. Stat. § 121A.223 (Possession and Use of Sunscreen)

Minn. Stat. § 151.212 (Label of Prescription Drug Containers)

Minn. Stat. § 152.01 (Definitions)

Minn. Stat. § 152.22 (Medical Cannabis; Definitions)

Minn. Stat. § 152.23 (Medical Cannabis; Limitations)

20 U.S.C. § 1400 *et seq.* (Individuals with Disabilities Education Improvement Act of 2004)

29 U.S.C. § 794 *et seq.* (Rehabilitation Act of 1973, § 504)

Cross References: Policy 418 (Drug-Free Workplace/Drug-Free School)