PERSONNEL

SCHOOL MEDICATION POLICY AND PROCEDURE

STUDENT MEDICATION

Note: The necessary provisions for complying with Minn. Stat. 121A.22, Administration of Drugs and Medicine, 121A.221, Possession and Use of Asthma Inhalers by Asthmatic Students, and 121A.222, Possession and Use of Nonprescription Pain Relievers by Secondary Students are included in this policy. Under Minn. Stat. 121A.22, MCW Schools will not administer drugs or medicine used off school grounds, drugs or medicines used in connection with athletics or extracurricular activities, and drugs and medicines that are used in connection with activities that occur before or after the regular school day except with field trips or overnight school events.

GENERAL STATEMENT OF POLICY

It is generally recognized that some students may require medication for chronic or short-term illness or health conditions during the regular school day. This medication enables students to remain in school and participate in their education. Although the school believes that medication should be given outside of school hours whenever possible; the district will provide administration of medication for any student if the parent/legal guardian is willing to comply with requests for authorization and provision of information except any form of medical cannabis.

The school district's licensed school nurse, designated staff person, principal, or teacher will administer prescribed medications in accordance with law and school district procedures.

"Parent" for students 18 years old or older is the student.

OVERVIEW

This policy and procedure is to address prescription, over-the-counter, and complementary, holistic medications. Prescription medications are those medications that are ordered by a licensed prescriber.

The district addresses the need for cultural competence as it relates to safe medication administration in the school.

The school district bases medication policy and procedure on accepted health and education standards, statutes and regulations. The district has procedures that ensure the data privacy of student medical and medication information specific to FERPA, the Minnesota Government Data Practices Act, HIPAA, and other state and federal laws related to data privacy as necessary.

I. MANAGEMENT OF THE MEDICATION ADMINISTRATION PROGRAM

- A. The school nurse shall be the supervisor of the medication program in the school.
- B. The school nurse shall develop and propose to the School Board policies and procedures relating to the administration of medications.
- C. Prescription Medications
 - 1. Are not to be carried by the student.
 - 2. Medications will be left with the appropriate school district personnel. Exceptions listed under I.F.
 - 3. The school must be notified immediately by the parent or student 18 years or older in writing of any change in the student's prescription medication or administration. A new medical authorization or label with new pharmacy instructions shall be required

container immediately as

well.

- 4. Prescription medication must come to school:
 - a. in the original container labeled for the student by a pharmacist.
 - b. be administered in a manner consistent with the labeled instructions.
- D. Medication Orders/Parent Consent: (Form 408-B)
 - 1. A medication order from a licensed prescriber is needed for the administration of prescription medication at school. Whenever possible, the medication order shall be obtained and on file before the student enters or reenters school. A medical order must be completed annually (once per school year).
 - a. In accordance with standard medical practice, a medication order shall contain:
 - (1) the student's name;
 - (2) the name, signature & phone number of the licensed prescriber;
 - (3) the name, route and dosage of the medication;
 - (4) the frequency and time of medication administration;
 - (5) any special storage conditions;
 - (6) the date the medication is to begin and discontinuation date for short term medications.
 - b. Every effort will be made to obtain the following from the licensed provider, if appropriate:
 - (1) any special side effects and adverse reactions to be monitored;
 - (2) any other medications being taken by the student.
 - c. Special Medication Situations:
 - For "short term" medications, those requiring administration for ten school days or less, a medication order will be requested. When at all possible those medications should be given at home. Medication must come to school in an original, pharmacy labeled container.
 - 2. The administration of prescription medication at school requires a completed signed request from the student's parent. 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.
- E. Nonprescription Medication
 - 1. Nonprescription Medication. A secondary student (grades 7-12) may possess and use nonprescription pain relief in a manner consistent with the labeling, if the school district has received written authorization from the student's parent or guardian permitting the student to self-administer the medication. The parent or guardian must submit the written authorization form 408-B for the student to self-administer the medication each school year. The school district may revoke a student's privilege to possess and use nonprescription pain relievers if the school district determines that the student is abusing the privilege. This provision does not apply to the possession or use of any drug or product containing ephedrine or pseudoephredrine as its sole active ingredient or as one of its active ingredients.
 - 2. Students in grades K-6 and those students in grades 7-12 without parent permission to self-administer medication, must have their parent's consent

to receive "over the counter" medication, e.g. ibuprofen or acetaminophen. The medication must come in an original container with the <u>written permission</u> of the parent/guardian on an annual basis (once per school year). Specific information to be completed on the form must be dosage, frequency of medication use, amount to be given and the reason for taking the medication.

- F. Medication Administration:
 - 1. The school nurse shall establish a plan for the student to receive the medication.
 - 2. Because the school nurse is not in each building on a daily basis when medications need to be given, medication administration shall be delegated to an administrator, office secretary or other school personnel.
 - a. The number of unlicensed personnel administering medications will be kept to a minimum to assure the student receives the right medication, in the right dosage at the right time.
 - b. The school nurse shall supervise, support and assist delegated medication personnel in their responsibilities related to medication administration.
 - 3. In the event of an adverse reaction to any medication, parents and health care provider will be contacted. If any reaction poses an immediate threat to the well-being of the child, emergency response system (911) will be activated along with parent notification and poison control (if needed).
 - 4. For drugs or medicine used by children with a disability, administration may be provided in the IEP, Section 504 plan or IHP.
 - 5. Field trips and overnight school events: medication will be taken in its original container and put in a small zip lock bag along with a copy of the prescriber's orders and the parent's authorization to give the medication. The school secretaries will check-in and checkout medications for field trips. A designated school staff person will be responsible for safety and medication administration.
 - 6. Martin County West designates and/or trains personnel that are certified in cardiopulmonary resuscitation (CPR) to respond to emergency situations.
 - 7. Written plans are established to ensure that identified students receive emergency care such as emergency medication, intervention and first aid.
 - 8. The school will not administer any form of medical cannabis.
- G. Self Administration of Medications
 - 1. "Self Administration" means that the student is able to consume or apply medication in the manner directed by the licensed prescriber without additional assistance or direction. Medication that has the potential for self administration include inhalers for asthma, insulin or topical medications applied to the skin. In grades 7-12, non-prescription medication. (see I.E.)
 - 2. A student may be responsible for taking his/her own medication after the following requirements are met:

which

- a. The student, school nurse and parent enter into an agreement specifies the conditions under which the medication may be administered.
- b. The school nurse is reasonably assured that the student is able to safely possess, identify the appropriate medication, dosage and frequency or the licensed prescriber provides an order for self administration.
- c. There is written authorization from the parent or guardian that the student may self medicate.
- d. Safe storage for the self-medication is assured. It will be advised that a back-up supply of medication be kept on hand in the school office in case of loss or medication depletion.
- e. Classroom teachers and school administration will be informed that the students in grades K-6 are self-administering medication.
- f. At the start of each school year or at the time a student enrolls in school, whichever is first, a student's parent, school staff, including those responsible for student health care, and the prescribing medical professional must develop and implement an individualized written health plan for a student who is prescribed epinephrine auto-injectors that enables the student to:
 - a. Possess epinephrine auto-injectors; or
 - b. If the parent and prescribing medical professional determine the student is unable to possess the epinephrine, have immediate access to epinephrine auto-injectors in close proximity to the student at all times during the instructional day.

The plan must designate the school staff responsible for implementing the student's health plan, including recognizing anaphylaxis and administering epinephrine auto-injectors when required, consistent with state law. This health plan may be included in a student's 504 plan.

- g. "Parent" for students 18 years old or older is the student.
- h. Districts and schools may obtain and possess epinephrine autoinjectors to be maintained and administered by school personnel to a student or other individual if, in good faith, it is determined that person is experiencing anaphylaxis regardless of whether the student or other individual has a prescription for an epinephrine auto-injector. The administration of an epinephrine auto-injector in accordance with this section is not the practice of medicine.

A district or school may enter into arrangements with manufacturers of epinephrine auto-injectors to obtain epinephrine auto-injectors at fair-market, free, or reduced prices. A third party, other than a manufacturer or supplier, may pay for a school's supply of epinephrine auto0injectors.

II. HANDLING, STORAGE, AND DISPOSAL OF MEDICATIONS

A. A parent or designated adult is responsible to deliver medications to the school.

- a. The medication must be in an original pharmacy or manufacturer labeled container.
- B. All medications to be administered by school personnel shall be kept in a securely locked cabinet or safe. Access to medications shall be restricted to the maximum extent possible. Students who are self-medicating shall not have access to other students' medications.
- C. Parents or guardians may retrieve medications from the school at any time.
- D. No more than thirty (30) school day supply of medication for a student shall be stored at school.
- E. <u>All unused</u>, discontinued or outdated medications shall be <u>picked up by</u> the parent/guardian. All medications that are not picked up at the end of the school year, may be disposed of by the school nurse.
- F. The school nurse, or other designated person, shall be responsible for the filing of the Medication Form in the health records section of the student file. The school nurse, or other designated person, shall be responsible for providing a copy to personnel designated to administer the medication.
- G. Any tampering of drugs or medications will be reported to the local police.

III. DOCUMENTATION AND RECORD KEEPING

Each school where medications are administered by school personnel shall maintain a medication administration log for each student who receives medication during the school day.

- A. Such record at a minimum shall include a daily log, the parent/guardian authorization and the medication order.
 - 1. The daily log shall contain:
 - a. the student's name
 - b. the medication name
 - c. dosage of medication
 - d. time of administration
 - e. initial of school personnel administering medication
 - 2. All documentation will be done in ink and shall not be altered.
 - 3. The school nurse shall document any significant health observations related to the medication or any adverse reactions and actions taken in the student's health record.
 - 4. Any pertinent medication forms will be filed in the student health record.

IV. REPORTING AND DOCUMENTATION OF MEDICATION (Form 408-C)

- A. A medication error includes any failure to administer medication as prescribed for a particular student, including failure to administer said medication:
 - 1. within an appropriate time frame (30 minutes) of documented dosage time
 - 2. in the correct dosage
 - 3. in accordance with accepted practice
 - 4. to the correct student
- B. In the event of a medication error, the school nurse shall notify the parent or guardian immediately. (All efforts to reach the parent will be documented.) If there is a question of potential harm to the student, the nurse or designated person shall also notify the student's licensed prescriber.

- C. Medication errors shall be documented by the school nurse on a district accident/incident report form and be retained in accordance with district policy.
- D. The school nurse will review the report of any medication errors and take necessary steps/action to ensure appropriate medication administration in the future.
- E. For students who do not appear or refuse to take ordered medications, the building secretary or other designated person will let the licensed school nurse know of the student's non-compliance. The school nurse will work with the student, staff and parents to ensure that students take their prescribed medication.

V. DISSEMINATION OF INFORMATION TO PARENTS REGARDING ADMINISTRATION OF MEDICATION

The medication policy and procedures shall be outlined in the student school handbook. Such information shall include at least an outline of the medication policies and be available to parents/guardians upon request.

Education regarding the school medication policies and procedures will be communicated through the MCW School Parent Handbook and medication consent form.

VI. SPECIFIC EXCEPTIONS TO THIS POLICY

- A. Special health treatments and health functions such as catheterization, tracheostomy suctioning, and gastrostomy feedings do not constitute administration of drugs and medicine.
- B. Emergency health procedures, including emergency administration of drugs and medicine are not subject to this policy.
- C. 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.
- D. Drugs or medicines used at school in connection with services for which a minor may give effective consent are not governed by this policy.

VII. MEDICATION PROCEDURE

Medication Administration, Staff Education and Training Requirements

Goal: To keep students safe by ensuring the competency of staff members so that proper medication administration procedures are followed.

- 1. Medication training maximizes safety for students.
 - Training of staff new to medication administration will be completed on a yearly basis prior to when administration activities commence.
 - Training material and education will be coordinated by the LSN/RN for all those individuals that administer medication in the school system.
 - LSN will determine training needed, for whom, the content, and available and appropriate training resources and the length of training.
 - Training topics include: District Policies Data Privacy Student's Health Plan Observing & Reporting

Emergency Protocols Administering Medication Medication Concerns Infection Control When to Contact LSN/EMSHandling of MedicationSix Rights of Medication Admin.Documentation & StorageCategories & Effects of MedicationSafe Medication AdministrationMedication Administration Techniques

- Education and training include a cultural competency component regarding medication.
- Medication administration procedures will be demonstrated by the LSN.
- The training will include student specific information.
- After training, the competencies of the person who was trained will be evaluated. Documentation will be placed in the employee's personnel file.

2. Guidance

Unlicensed staff with medication administration responsibility will be trained and supervised in proper medication administration procedure(s).

- Students receive medication; the medication is given correctly and documented appropriately.
- Students receive accurate, safe and hygienic administration of medications.
- The principles of the "Six Rights, Rs" when giving medication to students in the school setting will be applied:
 - 1. The right student
 - 2. The right medication
 - 3. The right dose
 - 4. The right time
 - 5. The right route
 - 6. The right document or record
- A licensed prescriber's order and/or parent/legal guardian written authorization(s) must be in place prior to giving prescription or investigational medications.
- Students requiring medication administration in the case of field trips or overnight school events.
- Documentation of important information related to medication administration, side effects, communicating with parents/legal guardians, other school personnel, the students' health care provider/licensed prescriber is accurately completed.
- Recording and review of medication errors/omissions will be completed by the licensed school nurse. The review errors/omissions will be used to identify corrective steps that may need to be implemented to ensure medication safety for students.
- Students who do not appear or refuse to take ordered medications, will be referred to the school nurse.
- No medication without proper medication labeling and a provision for storage that is secure will be given.
- All suspected diversion or tampering of drugs or medications will be reported to the local police.
- The district ensures the safe and immediate administration of emergency medication for students. The district designates or trains personnel in cardiopulmonary resuscitation (CPR).
- 3. Roles and Responsibilities

The district administrative staff, under the direction of the school board is responsible to see that medication policies and procedures are followed; people

are hired, assigned and trained to administer medication; the procedures are performed safely and consistently; and all necessary documentation is completed.

Designated school staff administering or assisting with student medications receive training and assistance in providing or assisting students with safe medication administration.

The school board will review and revise this policy and medication administration procedures a needed, but at least every two (2) years.