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RICHFIELD PUBLIC SCHOOLS

STUDENT MEDICATION

I. PURPOSE

The purpose of this policy is to set forth the provisions for student medication administration at school.

II. GENERAL STATEMENT OF POLICY

It is generally recognized that during the school day some students may require medication for chronic health conditions or short-term illness. This medication enables students to remain in school and participate in their education. Although the school district believes that medication should be given outside of school hours whenever possible, the district will facilitate the administration of medication for any student if the parent/guardian is willing to comply with requests for authorization and provision of information. Self-administration of medication may be allowed if certain conditions are met.

III. REQUIREMENTS

- A. Parents/guardians of students requesting that long-term medication (longer than three weeks and/or over-the-counter) be administered during school hours by school staff are required, according to school district guidelines, to provide:
 - 1. A signed statement from the licensed prescriber; and
 - 2. A signed parent/guardian release for the administration of medication.
- B. Parents/guardians of students requesting that short-term (three weeks or less) non-controlled prescription medication be administered during school hours by school staff are required, according to school district guidelines, to provide the school with a written parent/guardian release for the administration of this medication.
- C. A Consent for Administration of Medication form, or the equivalent, must be completed annually (once per school year) and/or when a change in the requirements for administration occurs. Medication as used in this policy does not include any form of medical cannabis as defined in Minn. Stat. § 152.22, Subd. 6.

- 1 D. Medication must come to school in the original container, and must
2 be administered in a manner consistent with the instructions or
3 manufacturer's label.
4
- 5 E. School health service staff may request to receive further
6 information, if needed, prior to administration of the medication.
7
- 8 F. Medications are to be left with the appropriate school district
9 personnel. Exceptions to this requirement are: prescription asthma
10 medications self-administered with an inhaler (See Part J.5. below),
11 and/or other non-controlled medications authorized by a licensed
12 prescriber and the parent/guardian for self-carry/administration.
13
- 14 G. The school shall be notified by parent/guardian or students 18
15 years or older in writing of any change in the student's medication
16 administration. A new medication authorization consent and/or
17 medication container label with new pharmacy instructions shall be
18 required.
19
- 20 H. For medication used by children with a disability, administration
21 may be as provided in the student's individualized plan.
22
- 23 I. The school nurse, or other designated person, shall be responsible
24 for filing the medication authorization consent form in the health
25 records. The school nurse, or other designated person, shall be
26 responsible for providing a copy of such form to the principal or to
27 other personnel designated to administer medication.
28
- 29 J. Specific Exceptions:
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- 31 1. Special health treatments and health functions such as
32 catheterization, tracheostomy suctioning, and gastrostomy
33 feedings do not constitute administration of medication;
34
- 35 2. Emergency health procedures, including emergency
36 administration of medication are not subject to this policy;
37
- 38 3. Medication provided or administered by a public health
39 agency to prevent or control an illness or a disease outbreak
40 are not governed by this policy;
41
- 42 4. Medication used at school in connection with services for
43 which a minor may give effective consent are not governed
44 by this policy;
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- 46 5. Medications that are prescription asthma or reactive airway
47 disease medications can be self-administered by a student
48 with an asthma inhaler if:
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- a. the school district has received a written authorization from the student's parent/guardian permitting the student to self-administer the medication;
- b. the inhaler is properly labeled for that student; and
- c. the parent/guardian has not requested school personnel to administer the medication to the student.

The parent/guardian must submit written authorization for the student to self-administer the medication each school year. In addition, the student's parent or guardian must submit written verification from the prescribing professional which documents that an assessment of the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting has been completed.

The school nurse or other designated person must assess the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting and enter into the student's school health record a plan to implement safe possession and use of asthma inhalers;

- 6. 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.

- 7. A student in grade 9 or above 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/guardian permitting the student to self-administer the medication. The parent/guardian must submit written authorization 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. At no time will any student be permitted to share medication or give any medication to any other student. This provision does not apply to the possession or use of any drug or

1 product containing ephedrine or pseudoephedrine as its sole
2 active ingredient or as one of its active ingredients.

3
4 8. At the start of each school year or at the time a student
5 enrolls in school, whichever is first, a student's
6 parent/guardian, school staff, including those responsible for
7 student health care, and the prescribing medical
8 professional must develop and implement an individualized
9 written health plan for a student who is prescribed
10 epinephrine auto-injectors that enables the student to:

11
12 a. possess epinephrine auto-injectors; or

13
14 b. if the parent and prescribing medical
15 professional determine the student is unable to
16 possess the epinephrine, have immediate access
17 to epinephrine auto-injectors in close proximity to
18 the student at all times during the instructional
19 day.

20
21 The plan must designate the school staff responsible for
22 implementing the student's health plan, including
23 recognizing anaphylaxis and administering epinephrine auto-
24 injectors when required, consistent with state law. This
25 health plan may be included in a student's individualized
26 plan.

27
28 K. "Parent/guardian" for students 18 years old or older is the student.

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31 Legal References: Minn. Stat. § 13.32 (Student Health Data)
32 Minn. Stat. § 121A.21 (Hiring of Health Personnel)
33 Minn. Stat. § 121A.22 (Administration of Drugs and
34 Medicine)
35 Minn. Stat. § 121A.221 (Possession and Use of Asthma
36 Inhalers by Asthmatic Students)
37 Minn. Stat. § 121A.222 (Possession and Use of
38 Nonprescription Pain Relievers by Secondary Students)
39 Minn. Stat. § 121A.2205 (Possession and Use of
40 Epinephrine Auto Injectors; Model Policy)
41 Minn. Stat. § 121A.2207 (Life-Threatening Allergies in
42 Schools; Stock Supply of Epinephrine Auto-Injectors)
43 Minn. Stat. § 151.212 (Label of Prescription Drug
44 Containers)
45 Minn. Stat. § 152.22 (Medical Cannabis; Definitions)
46 Minn. Stat. § 152.23 (Medical Cannabis; Limitations)
47 20 U.S.C. § 1400 et seq. (Individuals with Disabilities
48 Education Improvement Act of 2004)
49 29 U.S.C. § 794 et seq. (Rehabilitation Act of 1973, § 504)
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1 Cross References: MSBA/MASA Model Policy 418 (Drug-Free Workplace/Drug-
2 Free School)

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5 ADOPTED BY THE BOARD OF EDUCATION: July 17, 2006

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7 REVISED BY THE BOARD OF EDUCATION: January 22, 2019