

**PALOS COMMUNITY CONSOLIDATED SCHOOLS
DISTRICT 118
PALOS PARK, IL 60464**

March 2021

Dear Parents:

In accordance with state law, effective January 17, 2017, the following policy (7:270) was adopted by the School Board of District 118. A summary of the regulations regarding the Administering of Medication to Students is below.

Should your child require medication (prescription or over the counter) to be administered during school hours or during school activities for maintenance of their critical health and well being, you will need to contact the district nurse or the health clerk at your child's school to obtain the Parent/Physician Authorization form.

Sincerely,



Erin Deval
Director of Student Services

Palos Community Consolidated School District 118

7:270

Students

Administering Medicines to Students

Parent(s) or guardian(s) have the primary responsibility for administering medication to their children.

The Superintendent shall establish procedures for the administration of medications to students. The procedures shall be substantially based on the Recommended Guidelines for Medication Administration in the Schools published by the Illinois Department of Public Health and the State Board of Education and shall provide for administration of medication to a student during school hours or during school activities only when necessary to maintain the student in school.

Teachers and other non-administrative school employees except registered nurses shall not be required to administer medication to students.

Nothing in this policy shall prohibit any school employee from providing emergency assistance to students, including administering medication.

Students should not take medication during school hours or during school-related activities unless it is necessary for a student's health and well-being. When a student's licensed health care provider and parent(s)/guardian(s) believe that it is necessary for the student to take a medication during school hours or school-related activities, the parent/guardian must request

that the school dispense the medication to the child and otherwise follow the District's procedures on dispensing medication.

No School District employee shall administer to any student, or supervise a student's self-administration of, any prescription or non-prescription medication until a completed and signed *School Medication Authorization Form* is submitted by the student's parent(s)/guardian(s). No student shall possess or consume any prescription or non-prescription medication on school grounds or at a school-related function other than as provided for in this policy and its implementing procedures.

Self-Administration of Medication

A student may possess an epinephrine injector, e.g., EpiPen®, and/or asthma medication prescribed for use at the student's discretion, provided the student's parent/guardian has completed and signed a *School Medication Authorization Form*. The School District shall incur no liability, except for willful and wanton conduct, as a result of any injury arising from a student's self-administration of medication or epinephrine injector or the storage of any medication by school personnel. A student's parent/guardian must indemnify and hold harmless the School District and its employees and agents, against any claims, except a claim based on willful and wanton conduct, arising out of a student's self-administration of an epinephrine injector and/or medication, or the storage of any medication by school personnel.

School District Supply of Undesignated Asthma Medication

The Superintendent or designee shall implement [105 ILCS 5/22-30\(f\)](#) and maintain a supply of undesignated asthma medication in the name of the District and provide or administer them as necessary according to State law. *Undesignated asthma medication* means an asthma medication prescribed in the name of the District or one of its schools. A school nurse or trained personnel, as defined in State law, may administer an undesignated asthma medication to a person when they, in good faith, believe a person is having *respiratory distress*. Respiratory distress may be characterized as *mild-to-moderate* or *severe*. Each building administrator and/or his or her corresponding school nurse shall maintain the names of trained personnel who have received a statement of certification pursuant to State law.

School District Supply of Undesignated Epinephrine Injectors

The Superintendent or designee shall implement [105 ILCS 5/22-30\(f\)](#) and maintain a supply of undesignated epinephrine injectors in the name of the District and provide or administer them as necessary according to State law. *Undesignated epinephrine injector* means an epinephrine injector prescribed in the name of the District or one of its schools. A school nurse or trained personnel, as defined in State law, may administer an undesignated epinephrine injector to a person when they, in good faith, believe a person is having an anaphylactic reaction. Each building administrator and/or his or her corresponding school nurse shall maintain the names of trained personnel who have received a statement of certification pursuant to State law.

Administration of Medical Cannabis

The Compassionate Use of Medical Cannabis Program Act allows a *medical cannabis infused product* to be administered to a student by one or more of the following individuals:

1. A parent/guardian of a student who is a minor who registers with the Ill. Dept. of Public Health (IDPH) as a *designated caregiver* to administer medical cannabis to their child. A designated caregiver may also be another individual other than the student's parent/guardian. Any designated caregiver must be at least 21 years old and is allowed to administer a *medical cannabis infused product* to a child who is a student on the premises of his or her school or on his or her school bus if:
 - a. Both the student and the designated caregiver possess valid registry identification cards issued by IDPH;
 - b. Copies of the registry identification cards are provided to the District;
 - c. That student's parent/guardian completed, signed, and submitted a *School Medication Authorization Form - Medical Cannabis*; and
 - d. After administering the product to the student, the designated caregiver immediately removes it from school premises or the school bus.

Medical cannabis infused product (product) includes oils, ointments, foods, and other products that contain usable cannabis but are not smoked or vaped. Smoking and/or vaping medical cannabis is prohibited.

The product may not be administered in a manner that, in the opinion of the District or school, would create a disruption to the educational environment or cause exposure of the product to other students. A school employee shall not be required to administer the product.

Discipline of a student for being administered a product by a designated caregiver pursuant to this policy is prohibited. The District may not deny a student attendance at a school solely because he or she requires administration of the product during school hours.

Void Policy

The **School District Supply of Undesignated Asthma Medication** section of the policy is void whenever the Superintendent or designee is, for whatever reason, unable to: (1) obtain for the District a prescription for undesignated asthma medication from a physician or advanced practice nurse licensed to practice medicine in all its branches, or (2) fill the District's prescription for undesignated school asthma medication.

The **School District Supply of Undesignated Epinephrine Injectors** section of the policy is void whenever the Superintendent or designee is, for whatever reason, unable to: (1) obtain for the District a prescription for undesignated epinephrine injectors from a physician or advanced practice nurse licensed to practice medicine in all its branches, or (2) fill the District's prescription for undesignated school epinephrine injectors.

The **Administration of Medical Cannabis** section of the policy is void and the District reserves the right not to implement it if the District or school is in danger of losing federal funding.

Administration of Undesignated Medication

Upon any administration of an undesignated medication permitted by State law, the Superintendent or designee(s) must ensure all notifications required by State law and administrative procedures occur.

Undesignated Medication Disclaimers

Upon implementation of this policy, the protections from liability and hold harmless provisions applicable under State law apply.

No one, including without limitation, parents/guardians of students, should rely on the District for the availability of undesignated medication. This policy does not guarantee the availability of undesignated medications. Students and their parents/guardians should consult their own physician regarding these medication(s).

LEGAL REF.:

[105 ILCS 5/10-20.14b](#), [5/10-22.21b](#), [5/22-30](#), and [5/22-33](#).

[105 ILCS 145/](#), Care of Students with Diabetes Act.

[410 ILCS 130/](#), Compassionate Use of Medical Cannabis Program Act, and scheduled to be repealed on July 1, 2020.

[20 ILCS 550/](#), Cannabis Control Act.

[23 Ill.Admin.Code §1.540](#).

ADMIN. PROC.: 7:270-AP (Dispensing Medication), 7:270-E (School Medication Authorization Form)

ADOPTED: March 17, 2020

**PALOS COMMUNITY CONSOLIDATED
SCHOOL DISTRICT 118**

MEDICATION AUTHORIZATION

Fax – East: 708-923-7077 West: 708-923-7064

South: 708-448-0754

Policy Highlights (see reverse for details)

- *Pink Med form is required for all OTC and prescription medicine.
- *Parents must bring in medication – do NOT send with child.
- *Students may NOT carry any medicine except inhalers, Epi pens, or emergency medication approved in advance by the principal.
- *All medicine must be provided in a pharmacy or brand labeled bottle with student name, dose and time.
- *Parents must pick up unused medication: any left at the end of the year will be discarded.

All medications need a Physician's Order.

(See Medication Administration Policy and Procedures on reverse side.)

Student's Name: _____ Teacher/
Team Adviser _____ Grade: _____

Medication: _____ Dosage: _____

Time Given/Instructions: _____ Route: _____ Starting Date: _____

Prescription Medication End Date: _____ Over-the-counter Medication End Date: _____
(Prescription orders must be renewed each school year. OTC's will be discontinued at the end of the school year unless another date is specified.)

Reason for medication and/or intended effect: _____

Possible side effects: _____

Other medications student is receiving: _____

Physician's Name: (PRINT) _____ Address or Office Stamp: _____

Physician's Signature: X _____

Date: _____ Phone: _____ Fax: _____

Over-the-counter medication must be in the manufacturer's labeled container.

Prescription medication **MUST** be in containers labeled by a physician or pharmacist. (See #2 on reverse.)

ASTHMA OR EPINEPHRINE AUTO-INJECTOR MEDICATION ONLY – e.g. Inhalers, Epi Pen

1. Student may carry medication on his/her person. () Yes () No
2. Student may self-administer medication. () Yes () No

(We recommend that "back-up" medication be stored in health services as well.)

Physician Signature _____

Parent/Guardian Signature _____

For only parents/guardians of students who need to carry epinephrine auto-injector and/or asthma medication:

I authorized the School District and its employees and agents, to allow my child or ward to possess and use his or her asthma medication and/or epinephrine auto-injector: (1) while in school, (2) while at a school-sponsored activity, (3) while under the supervision of school personnel, or (4) before or after normal school activities, such as while in before-school or after-school care on school-operated property. Illinois law requires the School District to inform parent(s)/guardian(s) that it, and its employees and agents, incur no liability, except for willful and wanton conduct, as a result of any injury arising from a student's self-administration of medication or epinephrine auto-injector (105ILCS 5/22-30).

If you agree, please initial: _____ (Parent(s)/guardian(s))

PARENTAL AUTHORIZATION

For all parents/guardians:

By signing below, I agree that I am primarily responsible for administering medication to my child. However, in the event that I am unable to do so or in the event of a medical emergency, I hereby authorize the School District and its employees and agents, in my behalf, to administer or to attempt to administer to my child (or to allow my child to self-administer, while under the supervision of the employees and agents of the School District), lawfully prescribed medication in the manner described above. ***I acknowledge that it may be necessary for the administration of medications to my child to be performed by an individual other than a school nurse and specifically consent to such practices,*** and I agree to indemnify and hold harmless the School District and its employees and agents against any claims, except a claim based on willful and wanton conduct, arising out of the administration or the child's self-administration of medication.

Parent/Guardian printed name _____

Parent/Guardian printed name _____

Parent/Guardian signature* _____

Date _____

Parent/Guardian signature* _____

Date _____

**Both parents and/or guardians, if available, should sign.*

Physician's order and parental authorization must be renewed yearly for all prescription and OTC medications with no extended ending date specified by the physician.

Receiving Nurse's Initials _____ Date _____

