

REGULATIONS FOR THE ADMINISTRATION OF MEDICATION TO STUDENTS

I. GOVERNING POLICY: JHCD: ADMINISTERING MEDICATIONS TO STUDENTS

II. GENERAL PROCEDURES

Prescription medications and over-the-counter (OTC) medications are administered to students in ACPS when medication is required during the school day or at school activities in order to maintain a student's health, support student learning, or intervene in a medical emergency.

For students with disabilities and those who have been afforded accommodations under Section 504 of the Rehabilitation Act of 1973 to provide them with access to a Free Appropriate Public Education (FAPE), all medications are administered in accordance with the student's Individualized Education Program (IEP), 504 Plan, and/or Individualized Healthcare Plan (IHP).

III. PRESCRIPTION MEDICATIONS

The following requirements govern administration of prescriptive medications at school or school activities. Prescription medications will be administered only with the

- "licensed prescriber's" written order (physician, nurse practitioner, physician assistant, optometrist or dentist),
- written parent/guardian consent, and
- written permission of the parent/guardian for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of medication at school, and only under the following terms and conditions:

A. The appropriate medication authorization forms are presented to the school as applicable:

- a. ACPS Authorization to Administer Medication form;
- b. Virginia Asthma Action Plan;
- c. Virginia Diabetes Medical Management Plan;
- d. FARE: Food Allergy & Anaphylaxis Emergency Care Plan; and
- e. Epilepsy Foundation: Seizure Action Plan.

B. All medication that requires administration at school or school activities is delivered by the parent/guardian to the school nurse, or if the nurse is not present, the principal's designee. The medication must be in the original container and labeled with the student's name, name of the medication, directions for dosage, frequency to be administered, the licensed prescribers' name, and the date the prescription was filled. Medications in plastic bags or other non-original containers will not be accepted.

- C. No medication is administered in school or self-administered by a student until the school nurse has reviewed the medical order for safety, medical necessity, and establishment of the administration plan.
- D. Nothing in this regulation prohibits a parent/guardian from administering a medication in school to their own child in an emergency or urgent situation, or as an alternate plan as specified in an IHP.
- E. Medication is to be maintained in the original labeled container at all times, except when a single dose is stored in a pharmacy envelope for field trips.
- F. Medication is only to be given with written parent/guardian permission (for students who are minors under age 18). Adult students, age 18 and older, may sign their own consent and will comply with the process as outlined in this regulation.
- G. Medication is stored in a locked space in the clinic at all times. Medication may not be stored in the classroom, lockers, or any other location in the school. Exceptions include self-carry and non-prescription/non-controlled medications in single doses with proper documentation and written consent.
- H. In extenuating circumstances and with prior notice provided to school administration and the school nurse, medication may be delivered by a non-parent or non-guardian.
- I. The initial dose of medication should be administered at home so that the parent or guardian may observe the student for any reaction.
- J. Medication is only administered at school or school activities by the school nurse or school staff trained in medication administration. The school administrator, after consultation with the school nurse, is responsible for selecting and ensuring training of at least two individuals to administer medication in the absence of the school nurse.
- K. If questions arise about any submitted medical orders, the school nurse may consult with the school principal and the Health Services Coordinator.
- L. The Authorization to Administer Medication form with the licensed prescriber's signature must accompany prescription medications. In cases of short-term antibiotic or antiviral medications only, (administration of 10 school days or fewer), the pharmacy-labeled container may be used in lieu of a licensed prescriber's order.
- M. Any change in dosage or frequency of administration is communicated to the school nurse by updating the Authorization to Administer Medication form. Electronic faxed or scanned documents may be accepted. In cases of emergency, documentation may be accepted on the licensed prescriber's stationery or prescription pad until the Authorization to Administer Medication is updated. School health staff may contact the licensed prescriber, if questions exist.

- N. At the beginning of each school year, all medications require new documentation for administration. There are no carry-over orders or medications.
- O. Injectable medication, inhaled medication, skin patch, gastric tube, and intravenous preparations are considered prescription medication and are given according to standard procedures and OSHA regulations.
- P. All medications must be FDA approved pharmaceuticals (prescription and non-prescription) administered within their therapeutic range and within standards of acceptable medical regimen. Homeopathic preparations will not be administered. Any questions about approved medication may be directed to the Health Services Coordinator who may consult with the ACPS School Health Medical Consultant
- Q. All medication usage will be documented in either the Electronic Health Record or the Incidental Medication Log by the person administering the medication.
- R. If, upon receiving an Authorization to Administer Medication form, there are any questions or concerns about appropriateness of administration, the school principal or designee will be contacted immediately. The parent/guardian will be contacted directly by the school nurse. The licensed prescriber may be contacted with parent/guardian consent.
- S. Standing orders are developed by the ACPS School Health Medical Consultant and the Health Services Coordinator in keeping with medical and nursing standards of practice. The purpose of such orders is to prevent harm or death, and stabilize the student until emergency transport to a clinic or hospital is available (e.g., Epinephrine and Albuterol).
- T. Prescriptions written by a legal prescriber who is also the parent/guardian will not be accepted.
- U. In the event that a family may lack access to healthcare for medications and treatments, the school nurse will assist the family with their permission to gain access to a healthcare provider and any needed medication to ensure proper services.

IV. NON-PRESCRIPTION/NON-CONTROLLED MEDICATIONS

Non-Prescription/Over-the-Counter medications will follow the same regulations as Prescription Medications as outlined in Section III, requiring a “licensed prescriber’s” written order (physician, nurse practitioner, physician assistant, optometrist or dentist), written parent/guardian consent, and written permission of the parent/guardian for the exchange of information between the prescriber and the school nurse necessary to ensure safe administration of medication at school. The parent must provide the medication in its original and unopened container.

Secondary students (Grades 6–12) with a signed authorization form from a parent/guardian may carry one dosage of non-prescription/non-controlled medication at a time, such as Advil,

Motrin, and Tylenol, if such medication is not stored in the clinic. Carrying more than one dosage of non-prescription/non-controlled medication or sharing medication with other students is a violation of School Board Policy JHCD and of the ACPS Student Code of Conduct.

V. SELF-CARRY AND SELF-ADMINISTRATION OF MEDICATION

ACPS supports the self-administration of medication by a student with a verified chronic health condition for the safety of themselves and others in the school setting. The student who self-carries must have the Authorization to Administer Medication form properly completed by the licensed prescriber and signed by the parent/guardian on file with the school nurse. The student must carry a copy of this authorization when self-carrying and self-administering the approved medication. Self-administration means the student will bring the medication to and from school every day, including extracurricular activities both before and after school, and carry the medication on their person. This opportunity is generally, but not exclusively available to middle and high school students who have asthma, food allergies, and other chronic health conditions for which students require immediate access to their medication for emergency purposes or for proper management of their condition.

- A. **Medication to Treat Asthma** – A student with a diagnosis of asthma may carry a medication inhaler with the written agreement of the licensed prescriber, parent or guardian, and school nurse (i.e., Virginia Asthma Action Plan). At the beginning of each school year, the school nurse discusses the medication, side effects, safety precautions, and inhalation procedure with the student. The school nurse works with the student to support self-care of the student’s asthma and develop a mechanism to ensure the student’s care is documented in the electronic health record (EHR) and in PowerSchool.
- B. **Medication to Treat Diabetes** - Students who are diagnosed with diabetes, and who have parent/guardian consent and approval from the prescriber and the school nurse, may carry and use essential supplies, including a reasonable and appropriate short-term supply of carbohydrates, to manage routine self-care, as well as emergency treatment of hypoglycemia or hyperglycemia, and to self-test and treat as needed on a school bus, school property, or at a school-sponsored activity. The school nurse will review documents (i.e., Virginia Diabetes Medical Management Plan) and work with the student to support self-care of the student’s diabetes. The school nurse will develop a mechanism to ensure the student’s care is documented in the EHR and in PowerSchool. The parent/guardian should ensure that the student has a backup insulin device available in case of primary insulin device failure. ACPS employees will not attempt repairs, including reinsertion of insulin pumps or continuous glucose monitors otherwise known as CGM.
- C. **Medication to Treat Anaphylaxis** – Students with a diagnosis of allergies that are associated with anaphylaxis may carry a pre-filled epinephrine auto-injector for treatment of anaphylaxis. The school nurse works with the student to support self-care of the student’s allergies, and to ensure the student understands that any use of their auto-injector epinephrine will require a 911 call. *The producers of the EpiPen state, “After*

receiving epinephrine, you must be transported to hospital, for evaluation and a period of observation of no less than 4 hours. This is because of the possibility of either a “biphasic” reaction (a second reaction) or a prolonged reaction.” The school nurse will review documentation (i.e., FARE: Food Allergy & Anaphylaxis Emergency Care Plan) and will develop a mechanism to ensure the student’s care is documented in the EHR.

VI. HANDLING, STORAGE, AND DISPOSAL OF MEDICATIONS

All medications, prescription, and non-prescription/non-controlled, except those approved for self-carry, are delivered by a parent/guardian to the school nurse or the principal’s designee and complete the following process:

- A. The school nurse follows standard nursing practices when administering medication, including, but not limited to, counting medications upon receiving and returning them, recording medication delivery, and noting exceptions/variances. The medication is counted if in pill, tablet, or capsule form, or measured by marking and noting the amount dispensed in the liquid container. All information associated with the delivery of medication will be documented on the Record of Delivery, Return, or Destruction of Medication form. An inventory of all medications will be kept in the individual student’s record in the EHR.
- B. The medication will be placed in a locked cabinet in the clinic designated for the storage of medication. Medications that require refrigeration are stored and locked in a refrigerator designated only for medications. Access to keys for the medication cabinet should be limited to the school nurse, the principal, or the principal’s designee. Keys to the medication storage should not leave school grounds.
- C. The student’s original Authorization to Administer Medication form is placed in the student’s Cumulative Health Record in the School Nurse’s office and/or stored as a scanned copy in the EHR. A copy of the Authorization to Administer Medication form, the Record of Delivery, Return, or Destruction of Medication form, and the Incidental Medication Log will be placed in a notebook and kept in a secure, yet available location, for easy access to medication information for those who have a need to know.
- D. When a medication is obtained for a field trip, a copy of the authorization form and the Incidental Medication Log will be sent with the staff member who has been trained in medication administration. The Incidental Medication Log will be used by the staff member for documentation purposes.
- E. All medications will be returned to the parent/guardian at the end of the school year, when they are expired, or when the treatment has been completed. Medications left in the school clinic after the last day of school or the last day of summer school associated with the school year will be properly disposed of within two weeks. The return or disposal will be documented on the Record of Delivery, Return, or Destruction of Medication form. This form requires the school nurse’s signature and a witness, either the parent/guardian or the principal/designee.

VII. DOCUMENTATION AND RECORD-KEEPING

Each school where medications are administered by school personnel maintains a Medication Administration Record for each student who receives medication during school hours. This record will be kept as an EHR and/or a paper document stored in the Cumulative Health Record. The school nurse documents in the medication record any significant observations of the medication's effectiveness, as appropriate, and any adverse reactions or other harmful effects as well as any action taken.

VIII. ADMINISTRATION OF MEDICATION DURING SCHOOL-SPONSORED ACTIVITIES

- A. Medications should be administered to students on school-sponsored trips only when absolutely necessary. Timing of doses should be adjusted to occur outside of the school-sponsored activity, if medically appropriate.
- B. Except in cases of emergency, medication may be administered on school-sponsored trips only when previously administered and when the appropriate authorization forms have been completed and submitted to the school nurse or school administrator. This includes an authorization form signed by a licensed prescriber and a parent/guardian.
- C. School nurses should be notified in advance of a trip by the trip coordinator, per Regulation IICA-R, to give the school nurse time to prepare the needed medications and paperwork.
- D. The medications can be prepared by the school nurse from the supply already at the school. The individual doses needed for the trip may be placed in pharmacy envelopes designed for this purpose with appropriate labeling. If medications are not at the school, the parent/guardian will supply the appropriate amount of medication in a container prepared by a pharmacist that is appropriately labeled. The parent/guardian must bring the medications and the signed Authorization to Administer Medication form before the day of the trip.
- E. The medication will be administered on the trip by either the student's parent/guardian who has volunteered to attend, or a staff member who has completed the training in administration of medication. When medication must be administered during a field trip or other off-campus school activity, the medication is transported by the staff member trained to administer the medication in the original, labeled container or a pill envelope on which complete label information has been written by the school nurse. A copy of the completed Authorization to Administer Medication form will accompany the medication. The trained staff member must carry the medication at all times during the trip. Students are not to carry the medication.

For any field trip longer than one day, the student's prescription should be provided by the student's parent/guardian in a properly labeled prescription vial which has been dispensed from a pharmacy and which contains only the quantity needed for the duration of the field trip.

IX. ERRORS/VARIANCES IN MEDICATION ADMINISTRATION

In the event an error in medication administration occurs or is suspected, the school nurse or designee immediately:

- A. Ensures the safety of the student involved by:
 - 1. Assessing the student and observing for any side effects;
 - 2. Taking appropriate action based on nursing judgment and/or physician's orders; and
 - 3. Calling 911, if necessary, and following the instructions received;
- B. Contacts the building administrator and school nurse, as appropriate to the situation;
- C. With the direction of the building administrator, calls the parent/guardian to explain the situation, the student's current status, and actions taken to ensure the health and safety of the student;
- D. Monitors the student until either EMS arrives, the parent/guardian arrives, or the student is deemed safe and healthy to return to class by the school nurse and the administrative team;
- E. Completes the Medication Variance form and submits it to the Health Services Coordinator;
- F. Documents in the Electronic Health Record as appropriate; and
- G. The Health Services Coordinator will review the Medication Variance form and take necessary steps to ensure appropriate medication administration in the future.

X. STOLEN OR LOST MEDICATION

- A. If any medication is reported missing, the building administrator and the Health Services Coordinator must be notified immediately for investigation. In the event the incident involves a controlled substance, the School Resource Officer or the Director of Health, Safety and Risk Management must be notified.
- B. The student's parents/guardians will be notified of the situation and new medication will be requested to be brought to the school.
- C. Once the student's immediate needs are met, the Medication Variance form will be completed and sent to the Health Services Coordinator.

D. The incident will be documented in the student's EHR.

XI. EMERGENCY MEDICATIONS

- A. Medications will be supplied by ACPS for students demonstrating symptoms of anaphylaxis and/or asthma that do not have personal medications in the clinic.
- B. If emergency medication is needed, a parent/guardian will be contacted immediately.
- C. In consultation with the school principal, the school nurse will be responsible to place these emergency medications in appropriate school locations that support ease of access.
- D. The school nurse will be responsible to monitor the expiration date of the emergency medication and record this information in the Health Services Monthly report.
- E. The school nurse will inform the Health Services Coordinator of any emergency medication that is about to expire or is otherwise not fit to administer.
- F. Except for albuterol as discussed in Section XI.G. below, which does not require a standing order, nurses will administer emergency medications per a standing order written and reviewed annually by the ACPS School Health Medical Consultant.
- G. Undesignated albuterol inhalers and valved holding chambers are stocked in each school to be administered by any school nurse, employee of the School Board, employee of a local appropriating body, or employee of a local health department, who is authorized by the local health director and trained in the administration of albuterol inhalers and valved holding chambers, for any student believed in good faith to be in need of such medication.

1. Definitions: Albuterol Inhalers

A **spacer** is a tubular device that is placed on the mouthpiece of an inhaler. When used, a spacer creates "space" between an individual's mouth and the inhaler. The space helps the medicine break into smaller droplets. The smaller droplets can move easier and deeper into the lungs when breathing in the medicine.

A **valved holding chamber** is a type of spacer that includes a one-way valve at the mouthpiece. It traps and holds the medicine, which gives an individual time to take a slow, deep breath to breathe in all of the medicine. Its one-way valve prevents the individual from accidentally exhaling into the tube.

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Legal Refs.: 20 U.S.C. § 1400 et seq.
Public Law 93-113 § 504.

Code of Virginia, as amended, §§ 22.1-78, 22.1-274, 22.1-274.01:1, 22.1-274.2, 54.1-2952.2, 54.1-2957.02, 54.1-3408.

Cross Refs.:	EBBA	First Aid/CPR and AED Certified Personnel
	IGBA	Programs for Students with Disabilities
	JB	Equal Educational Opportunities/Non-Discrimination
	JBA	Section 504 Non-Discrimination Policy and Hearing Procedures
	JFC	Student Conduct
	JFCF/JFCI	Alcohol and Other Drugs (AOD) in Schools
	JGDA	Disciplining Students with Disabilities
	JHCD	Administering Medications to Students
	JHCE	Recommendation of Medication by School Personnel
	JO	Student Records

Additional Resources:

http://www.doe.virginia.gov/support/health_medical/medication/manual_training_admin-meds.pdf

http://www.doe.virginia.gov/support/health_medical/medication/manual_training_insulin-glucagon.pdf