

ADMINISTERING MEDICATIONS TO STUDENTS

- 1.0 **General.** The District recognizes that a student must sometimes receive medication at school when necessitated by health conditions which do not require home care nor endanger the health of the student or others when appropriately treated. The District also recognizes that the presence of medications in school must comply with applicable federal and state laws, including the Colorado Nurse Practice Act. Administration of medications to students and student self-administration of medications shall be in accordance with this policy. Administration of medical marijuana to students shall be in accordance with applicable law and District policy concerning the administration of medical marijuana to qualified students.
- 2.0 **Delegation.** At the beginning of each school year, a District Registered Nurse shall identify at least one staff member in each school who has been appropriately trained/delegated to administer medications to students within the school day. Building principals or designees shall be responsible for coordinating with the District's Health Services Coordinator to determine that adequate numbers of individuals have been trained and delegated responsibilities for administration of medication.
- 3.0 **Prescription and Nonprescription (Over-the-Counter) Medications.** For purposes of this policy, "medications" shall include all over-the-counter and prescription drugs, including vitamins, herbal remedies and other dietary supplements. "Medications" described in this policy shall not include nonprescription cough drops.
- 4.0 **Licensed Health Care Practitioner.** For purposes of this policy, "Licensed Health Care Practitioner" means a physician (MD, DO), nurse practitioner, or physician assistant who has prescriptive authority and is licensed to practice in the State of Colorado.
- 5.0 **Student Self-Administration of Medications.**
- 5.1 Students shall not be permitted to take medication while at school, unless such medication is administered to them by a school employee who is designated in accordance with this policy, **with the following exceptions:**
- 5.1.1 Emergency medication to control or treat serious diagnosed health conditions such as asthma/anaphylaxis which may need immediate intervention as prescribed by a licensed health care practitioner (as authorized in writing) for which the student has submitted a completed form designated by the District to self-carry the emergency medication and which otherwise meets the requirements of law.
- 5.1.2 Prescription medication as prescribed by a licensed health care practitioner (as authorized in writing) for which the student has submitted a completed form designated by the District to self-carry the prescription medication and which otherwise meets the requirements of law.
- 5.1.2.1 Students are prohibited from possessing and/or self-administering medical marijuana.
- 5.1.2.2 Except as authorized by the building principal and the student's parent/guardian in consultation with the school nurse, students are prohibited from possessing and/or self-administering prescription medications that are controlled substances. Examples of controlled substances include oxycodone, Adderall, Ritalin, Vicodin, Tylenol with Codeine, Xanax and Valium.

5.1.3 A student shall self-carry only one day's dose of an emergency or prescription medication. The medication shall be kept in the original container with the prescription label that includes the student's name, name of medication, dosage, and the name of the prescribing licensed health care practitioner. These restrictions shall not apply if the medication is contained in a multi-dose device such as an asthma inhaler or insulin pump.

5.2 If the building principal determines that, in an individual case, the use of an authorized emergency or prescription self-carry medication poses a significant risk of harm to the student or other students, the principal or designee shall convene a meeting with the student and the student's parent/legal guardian to address the situation.

6.0 **Staff Administration of Medications to Students.**

6.1 District employees may not administer any medication to students without written directions from a licensed health care practitioner, authorization by the student's parent/legal guardian, and the required delegation by a registered nurse.

6.2 District employees may not administer a nonprescription medication that has not been approved by the federal Food and Drug Administration (FDA). This includes, but is not limited to, a cannabis product with a delta-9 tetrahydrocannabinol (THC) concentration of 0.3 percent or less, such as cannabidiol (CBD) oil, that has not been FDA-approved.

6.3 Before any prescription or nonprescription medication is administered:

6.3.1 A completed "Health Care Practitioner's Signed Order for Medication Administered at School" form and, when applicable, a Health Care Action Plan (including a Section 504 Plan, or Student Accommodation Plan, or other like form) must be on file in the school; and,

6.3.2 The medication must be supplied by the parent/legal guardian in a container dispensed by the pharmacy or original over-the-counter container and labeled with the student's name, name of medication, when the medication is to be administered, the dosage and, where appropriate, the date the medication is to be stopped.

6.4 A new permission form must be signed for each medication, each change of medication, and at the beginning of each new school year.

7.0 **Injectable Medication.** A District Registered Nurse shall determine, on a case-by-case basis, if the administration of injectable medications shall be delegated to school staff. The nurse's delegation decision shall follow the standards set forth in the Colorado Nurse Practice Act and shall consider the nature and severity of the student's medical condition, the ability of the child to self-administer the injections with supervision, the availability of the nurse to administer the injection, the degree of nursing judgment required to safely administer the medication, the skills and qualifications of delegates in the building, and such other factors determined relevant in the nurse's reasonable professional judgment.

8.0 **Storage**

8.1 Non-emergency medications administered at school shall be stored in a secure, locked, clean container or cabinet.

8.2 Emergency medications such as epinephrine shall be inaccessible to students, BUT immediately available to trained school personnel and in an unlocked location (e.g., emergency kit or bag, cabinet).

- 9.0 **Oxygen** - Oxygen shall be administered as a prescription medication in accordance with this policy.
- 10.0 **Psychotropic Drugs.** School employees shall not recommend or require the use of a psychotropic drug for any student. School employees shall not require a test for a child's behavior without prior written permission from the child's parent(s) or guardian(s) and prior written disclosure as to the disposition of the test results. School employees who have concerns about a child's behavior should discuss those concerns with the parent(s) or guardian(s) and may suggest that the parent(s) or guardian(s) speak with an appropriate health care professional about the child and the behavior concerns.
- 11.0 **Use of Opiate Antagonists in Emergency Situations.** To the extent state funding and supplies are available, the District shall have a stock supply of opiate antagonists to assist students who may be at risk of experiencing an opiate-related drug overdose event. For purposes of this policy, opiate antagonist means naloxone hydrochloride (such as narcan) or any similarly acting drug that is not a controlled substance and that is approved by the FDA for the treatment of a drug overdose. The stock supply of opiate antagonists may also be used to assist a District employee or any other person who may be at risk of experiencing an opiate-related drug overdose event. Administration of an opiate antagonist by a District employee to a student or any other person shall be in accordance with applicable state law.

LEGAL REFERENCE:

C.R.S. 18-18-101 *et seq.*
C.R.S. 22-1-119.1
C.R.S. 22-1-119.3
C.R.S. 22-32-109 (1) (ee)
1 CCR 301-68
1 CCR 301-112
6 CCR 1010-6, Rule 6.13

CROSS REFERENCE:

Policy 5425