

STUDENT MEDICATIONS

- I. The Board of Education and/or District employees will not be responsible for the diagnosis or treatment of student illness. The administration of prescribed medication to a student during school hours will be permitted only when failure to take such medicine would jeopardize the health of the student, or the student would not be able to attend school or school sponsored activities (e.g. field trips, athletics) if the medicine were not made available to him/her, or where it is administered pursuant to law requiring accommodation of a student's special medical needs.

For the purposes of this policy, the term “medication” will mean both prescription and non-prescription drugs.

II. Authority To Administer Medications:

- A. All medications, including nonprescription drugs given in school, shall be prescribed by a licensed health care provider on an individual basis as determined by the child's health status. At minimum, the written order will include the students' name and date of birth, diagnosis, the name of the medication, the dosage and route of administration, self-administration orders - if indicated, the frequency and time of administration (for prn/as necessary medications, the conditions under which the medication should be administered), the date written, the health care provider's name, title, signature and phone number.
1. Medication orders must be renewed annually or when there is a change in medication or dosage.
 2. A pharmacy label does not constitute a written order and cannot be used in lieu of a written order from a health care provider.
 3. When a properly labeled medication comes to the health office accompanied by a written request from the parent/guardian for administration of the medication, but without a written order from a health care provider, the following procedure will be followed:
 - a. Contact parent/guardian regarding need for written order from a health care provider.
 - b. Contact health care provider to obtain verbal permission to administer medication.
 - c. Request fax or written orders to be received within 48 hours.
 - d. Contact parent/guardian and discontinue medication if written orders are not received in 48 hours.

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- B. The student's parent/guardian must provide a written statement requesting the administration of the medication in the school as ordered by a licensed health care provider (Regulation 7102.1; 7102.2).
1. The pharmacy label must display the students name, the name and phone number of the pharmacy, the licensed health care provider's name, the date and number of refills, the name of the medication/dosage, the frequency of administration, the route of administration and/or other directions.
 2. Over the Counter medications must be in the original manufacturer's container/package with the student's name affixed to the container. The same applies to drug samples.
- III. Medication Administration By Appropriate School Personnel:
- A. Medication to students may only be administered by appropriately licensed health professionals including but not limited to physicians, nurse practitioners (NP), physician assistants (PA), registered professional nurses (RN), and licensed practical nurses (LPN) under the direction of an RN pursuant to Title VIII of the Education Law. However, situations and circumstances, as outlined herein, may occur in the school setting when an authorized health care professional may not be available to administer medications.
 - B. Prescribed medications which require administration through a subcutaneous, intramuscular, intravenous or rectal route or prescribed medications being administered through pumps, tubes or nebulizers, and/or oral, topical or inhalant medications needed by Nurse Dependent Students remains the responsibility of and must be given the school registered professional nurse, licensed practical nurse under the direction of a school registered professional nurse, physician, or as authorized by the parent/guardian. Administration of such prescribed medications may not be performed by unlicensed persons, except in emergencies.
 - C. Designated persons in the school setting (including school contractors), following assignment and in conjunction with documented training and approval by school nursing personnel may assist Supervised Students, at the direction of the student, with the taking of their own oral, topical and inhalant medication.
 - D. Volunteer staff, including school contractors, may be trained by an appropriate licensed health professional to administer epinephrine injections and Glucagon injections to students with a specific order for such and parent/guardian consent, during the school day on school property and at any school function. School

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nursing personnel and the administration should assure that the unlicensed person receives the annual training and supervision needed to perform these tasks in a safe and effective manner. Epinephrine may need to be administered again after the initial effects wear off, potentially in fifteen to twenty minutes. Only licensed medical personnel or trained unlicensed individuals in certain emergency circumstances may administer a second dose of epinephrine if needed, while awaiting emergency medical services transportation.

E. Anaphylaxis/Epinephrine: Non-Patient Specific Order and Protocol

The District stocks epinephrine auto-injectors and permits those school employees who have been trained via the Department of Health's approved training program to administer an epinephrine auto-injector (EAI) in the event of an emergency, or school personnel directed in a specific instance to use an EAI device by a health care practitioner as defined in Public Health Law 3000-c, to any student or staff member on-site with symptoms of anaphylaxis regardless of whether or not there is a previous history to severe allergic reaction, pursuant to 8 NYCRR 64.7 and 8 NYCRR 136.6.

F. Albuterol

The District stocks albuterol metered dose inhalers (MDIs) and/or liquid albuterol for use in a nebulizer by multiple students diagnosed with asthma in the event their personal albuterol prescription is empty. The albuterol will be available under the following conditions:

1. The school nursing personnel or licensed practical nurses under the direction of the school nursing personnel perform the following duties:
 - a. Maintaining an inventory of albuterol and obtaining and replacing the stock;
 - b. Maintaining, cleaning and labeling of the school's stock MDI and nebulizer, individual student's MDIs and spacers; and the student's nebulizer tubing, facemask or mouthpiece; and
 - c. Informing parents/guardians of use and need for replacement of student's albuterol medication.
2. Students must have a patient specific order for use of albuterol MDI or nebulized albuterol from their private health care provider that includes permission of the use the school's stock albuterol.
3. Each student must have their own labeled spacer provided by the parent/guardian that is used when administering their own, or the school's

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stock albuterol MDI; or the student must have their own labeled tubing and facemask or mouthpiece that is used when administering their own, or the school's stock albuterol via nebulizer.

4. Signed written permission from the student's parent/guardian for use of the school's stock albuterol.
5. The school's stock albuterol must be obtained from a licensed pharmacy.
6. The school's stock albuterol is not to be used in place of the parent/guardian providing an albuterol medication for their child(ren) in school. The school's stock albuterol is only for use in the event the student's own albuterol is empty and while awaiting the parent/guardian to provide the school with a new one.

G. Non-FDA Sanctioned Medications/Supplements

Requests or orders for use of non-FDA sanctioned medications and/or supplements including but not limited to: herbal remedies, essential oils, dietary supplements, naturopathic or holistic medicines, and natural products do not need to be honored by the District or school nurse. If a student/parent requests use of a non-FDA sanctioned medication and/or supplement the School Nurse will provide a letter to the parent/guardian and the student's physician that such medications/supplements need to be administered outside of school. An appropriate note should be made in the student's CHR documenting the communication.

IV. Procedures For Administering Medications:

- A. All medications should be given as close to the prescribed time as possible. Given student schedules and compliance with coming to the health office in a timely fashion, medications accepted for school administration generally may be given up to one hour before and no later than one hour after the prescribed time. However, the parent/guardian and health care provider should be advised, so that they can advise the school if there is a time-specific concern regarding administration of the medication.
- B. If a student fails to come for a dose, the school nurse will make a reasonable effort to locate the student. If the medication has not been given for any reason within the prescribed time frame, the school nurse must make reasonable efforts to notify the parent/guardian that day.

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- C. If a student chronically fails to come for medications, the school nurse should contact the parent/guardian to address the problem. It is good practice to advise the health care provider of the poor compliance so that appropriate adjustments can be made.
 - D. A medication may be changed or discontinued by a written order of the health care provider at any time. If a parent/guardian requests discontinuation of a prescribed medication without the health care provider's order to do the same, it is good practice to send a confirmation to the parent/guardian with a copy to the health care provider of the school's intention to discontinue the medication at the parent's/guardian's request.
 - E. When the dose of a medication is changed by a health care provider's written order and a parent/guardian request, and the old pharmacy bottle has not been corrected, the school nurse may label the bottle with the correct dose until the new pharmacy labeled prescription bottle is received. The importance of parent/guardian compliance with sending in a new bottle quickly needs to be conveyed.
- V. Transportation and Storage of Medication
- A. No medication should be brought into school without the knowledge of the health office.
 - B. Medications should not be transported daily to and from school unless the student, with proper authorization, is permitted to carry and self-administer his/her own medications. Medications shall be brought to school by the parent/guardian and shall be picked up at the end of the school year or the end of the period of medication, whichever is earlier. Parents/guardians should be advised to ask the pharmacist for two containers, one to remain home and one to remain at school.
 - C. All medications, except as otherwise arranged, should be properly stored and secured within a health office cabinet, drawer or refrigerator designated for medications only. The site must include a lock for the cabinet, drawer and refrigerator, as well as a lock to the outside health office door. Controlled substances must always be secured and must never be left open or accessible to the public at any time. Even Supervised Students and/or Independent Students should not be given unsupervised access to controlled substances in the possession of the school. Whenever possible, medication storage units ideally should be secured to the wall or floor, and should not have breakable glass doors. Ideally, all medications should be stored in a health office. However, there may be instances when either request are made by a parent/guardian and physician for

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a student to carry and self-administer medications because of the emerging nature of the health problem or the severity of the health condition.

VI. Independent Students

- A. If school personnel receive a request from a parent/guardian and health care provider to permit a student to carry and self-administer his/her own prescribed medication, such decisions should be made on an individual basis and in accordance with the following criteria:
1. Parent statement requesting compliance with licensed health care provider's order. (Regulation 7102.1)
 2. The appropriate Provider Attestation and Parent/Guardian Permission for Independent Medication Carry and Use Form (Regulation 7102.2) must be completed by a physician or a duly authorized health care provider permitting students who have been diagnosed with a severe asthmatic, diabetic, or allergy condition to carry and use a prescribed inhaler, insulin, glucagon, and other diabetes supplies or epinephrine kit during the school day.
 3. The severity of the health care problem.
 4. Licensed health care provider's order directing that the student be allowed to carry her/his medication and self-administer.
 5. Student has been instructed in the procedure of self-administration and can assume responsibility for carrying properly labeled medication in original container on her or his person or keeping in school or physical education locker.
 6. School nursing assessment that student is self-directed to carry and self-administer her/his medication properly.
 7. Parent/guardian contact made to clarify parental responsibility regarding the monitoring of the student on an ongoing/daily basis to insure that the student is carrying and taking the medication as ordered. This contact should be documented.
 8. Students with diagnoses other than asthma (or another respiratory disease requiring the use of an inhaler), diabetes, or allergic conditions requiring the use of an epinephrine auto injector, must also have a properly completed Self-Medication Authorization Form on file.

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B. Sunscreen

Students do not need to obtain an order from a health care provider in order to use sunscreen in school. In order for a student to be able to apply sunscreen in school, however, they must meet the following criteria:

1. The student's parent or guardian must provide written permission to the school principal (or school nurse) to allow the student to carry and use the sunscreen. Parents or guardians may permit unlicensed school personnel to apply sunscreen if the student is unable to do so on their own.
2. The sunscreen must be available over-the-counter, and approved by the Federal Drug Administration (FDA).
3. The sunscreen must be used for the purpose of avoiding overexposure to the sun.
4. Parents or guardians are responsible for providing their child's sunscreen.

C. Any student self-administering medication without proper authorization should be counseled by the school nursing personnel. In addition, the parent/guardian and the school administration should be notified.

D. No student is to have any other type of medication on his/her person in school under any circumstances.

VII. Responsibilities of School Nursing Personnel

A. General:

1. Facilitate policies and procedures regarding the administration of medication in schools.
2. Ensure proper and appropriate techniques for the administration of medication in schools.
3. Provide and/or document adequate training and in-service education for trained unlicensed staff assisting supervised and/or independent students with self-medication.
4. Maintain adequate and secure storage of all medications.

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5. Document or assure documentation by other licensed or unlicensed persons for each dose of medication given or taken on a daily log and periodically summarize in each student's cumulative health record.
 6. Perform intermittent evaluation of the practices and procedures related to the administration of medications and modify as needed.
 7. Become familiar with and adhere to the State Education Department's document titled "Administration of Medication in School Settings" and its periodic revisions.
- B. Specific For Each Student:
1. Observe and evaluate the student's health status and response to medication, informing parents, guardians, or health care provider as deemed necessary.
 2. Educate the student regarding the importance of medication and encourage the student's self-directed involvement in the process, including coming to the health office on time and receiving or taking medications. If a student forgets, it is recommended that the school nurse call for the student to ensure that medication is not missed. Parents/guardians should be advised if their child is not fully participating in the established school procedure.
 3. Involve school staff only as needed to ensure student safety and only where disclosure of health information is permitted by law.
- C. Procedures for Taking Oral, Topical or Inhalant Medications Off School Grounds or After School Hours While Participating in a School-Sponsored Activity. The school nursing personnel should ensure that:
1. Oversight of medication self-administration when off school grounds or after hours while participating in a school-sponsored activity may be delegated to trained unlicensed school personnel for supervised and/or self-directed student(s). Such personnel must be appropriately instructed by a licensed school professional (RN, NP, PA, or physician). Ideally each student should have a written emergency action plan for personnel to follow in the event of an emergency or they are unable to contact the licensed school health professionals for questions.
 2. Preparation of medication. When oral medication is to be given off school grounds or after school hours, the school nurse may prepare the medication for short out-of-school experiences. Children needing

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medication on extended trips must have their medication in a properly labeled pharmacy container.

4. The parent/guardian may designate, in writing another adult, as described in Education Law Section 6908, to administer the medication to Nurse Dependent Students in situations where the school nurse, physician or parent/guardian is unavailable. (Regulation 7102.3)

D. Medication Errors:

1. Medication errors should be addressed immediately according to District protocol.
2. Additionally, school nursing personnel should assess the student and, if appropriate notify the supervisor, school administrator and/or school physician; notify the health care provider; notify the parent/guardian and secure the student's safety; complete a written report of the medication error (detailing the student's name, parent's/guardian's name and phone number, specific statement of the medication error, people notified and remedial action).
3. School nursing personnel should review reports of medication errors and take necessary steps for appropriate medication administration in the future.

E. Disposal of Medications, Needles and Syringes

1. Medications that remain at the end of the school year or after the order is changed or discontinued or is past the expiration date must be:
 - a. Returned to the parent/guardian or a responsible designee picking up the medication from the health office.
 - b. If the parent/guardian does not retrieve the unused medication before the end of the school year, the school nurse must document that that the medication was abandoned and dispose of the unused medication.
 - c. All medication being considered for disposal should be taken to an appropriate disposal location, such as a pharmacy.
2. Needles and Syringes, including auto-injectors, must be disposed of in a manner consistent with state law and the following guidelines:

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- a. Needles should not be recapped and should not be purposely bent or broken.
 - b. Disposable syringes and needles (and other sharp items) should be placed in approved sharps' containers and labeled "BIOHAZARD."
 - c. Arrangements should be made with custodial staff or an appropriate agency to dispose of containers at periodic intervals according to established procedures of the school regarding regulated medical waste and in accordance with the school's Exposure Control Plan.
 - d. Sharps include, but are not limited to, needles, syringes, diabetic testing, and Epi pens.
- F. Emergency Building Evacuations and Medication
1. The health office should be supplied with a readily accessible, easily carried and recognizable emergency pack that includes supplies for basic first aid, including supplies for infection control, a stock Epi pen with non-patient specific orders and a glucose source, such as glucose gel or honey sticks. A plan for communicating with the appropriate building principal should be established. A list of all students with significant medical conditions and medical orders for prescription medication, including emergency contact numbers, should be kept in the emergency pack.
- G. Record Keeping
1. School Nursing Personnel shall follow the NYSED Record Retention Schedule.
 2. School Nursing Personnel, and any trained unlicensed personnel assisting Supervised Students, should maintain accurate records of the medication administered, any special circumstances related to the procedure, and student's reactions/responses.
 3. At a minimum, school nursing personnel should retain the written order from the health care provider, retain the parent/guardian request letter, retain pertinent information about medication on cumulative health record, maintain an individual daily medication record for each student taking medication during the time frame the medication is being given, periodically summarize daily medication records on the cumulative health record.

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4. Student medication orders and parent/guardian consents are to be kept for one year after the end of the school year, as long as the information is transcribed into the cumulative health record on either an MAR or narrative. Medication orders and parent/guardian consents not transcribed, along with the MAR and narrative, need to be kept in the cumulative health record until the student reaches age 27.

VIII. Additional Guidelines For Best Practices

- A. For certain medications, especially controlled substances, the standards of best practice include counting the medication upon receipt and at regular intervals. A count of a controlled substance should be witnessed by another nurse, principal, or staff member designated by the principal. Discrepancies should be reported to appropriate school administrators and the student’s parent/guardian immediately.
- B. Instructions should be left for substitute nurses that are clear and concise on the handling of all aspects of medication acceptance, handling, delivery and storage.
- C. Education of families regarding the school district’s medication protocols is an ongoing responsibility of the school district.

IX. Student Privacy

The District will protect the privacy rights of students as required by the Family Education Rights and Privacy Act of 1974, Education Law §2-D and the Health Insurance Portability and Accountability Act of 1996.

Waterville Central School District

Legal Ref: State Education Department’s “Guidelines for Medical Management in Schools 2015”, Revised December 2017; Education Law 902, 907, 916, 921, 6909; 8 NYCRR 64.7, 136.6; Public Health Law §3000c.

Adopted: 01/27/98

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