Administering Medication & Monitoring Health Conditions

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Definitions

Authorized health care provider means an individual who is licensed by the State of California to prescribe or order medication, including, but not limited to, a physician or physician assistant.

Other designated school personnel means any individual employed by the district, including a nonmedical school employee, who has volunteered or consented to administer medication or otherwise assist the student, and who may legally administer the medication to the student or assist the student in the administration of the medication. Designated school personnel will be trained regarding appropriate administration, including handling and storage of the medication as required by state law and regulation.

Medication may include not only a substance dispensed in the United States by prescription, but also a substance that does not require a prescription, such as over-the-counter remedies, nutritional supplements, and herbal remedies.

Emergency medical assistance for a student suffering an epileptic seizure means the administration of an emergency anti-seizure medication such as Diazepam rectal gel and other emergency medications approved by the federal Food and Drug Administration for patients suffering from epileptic seizures.

Epinephrine delivery system means a disposable drug delivery system with a spring-activated needle that is designed for emergency administration of epinephrine to provide rapid, convenient first aid for persons suffering a potentially fatal reaction to anaphylaxis.

Anaphylaxis means a potentially life-threatening hypersensitivity to a substance, which may result from an insect sting, food allergy, drug reaction, exercise, or other cause. Symptoms may include shortness of breath, wheezing, difficulty breathing, difficulty talking or swallowing, hives, itching, swelling, shock, or asthma.

Opioid antagonist means naloxone hydrochloride, or another drug approved by the federal Food and Drug Administration that, when administered, negates, or neutralizes in whole or in part the pharmacological effects of an opioid in the body and that has been approved for the treatment of an opioid overdose.

Notifications to Parents/Guardians

At the beginning of each school year, the Superintendent or designee shall notify parents/guardians of the options available to students who need to take prescribed medication during the school day and the rights and responsibilities of parents/guardians regarding those options.

In addition, the Superintendent or designee shall inform the parents/guardians of any student on a continuing medication regimen for a non-episodic condition of the following requirements:

1. The parent/guardian is required to inform the school nurse or other designated employee of the medication being taken, the current dosage and the name of the supervising physician.

2. With the parent/guardian's consent, the school nurse or other designated employee may communicate with the student's physician regarding the medication and its effects, and may counsel

school personnel regarding the possible effects of the medication on the student's physical, intellectual and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission or overdose.

When a student requires medication during the school day in order to participate in the educational program, the Superintendent or designee shall, as appropriate, inform the student's parents/guardians that the student may qualify for services or accommodations pursuant to the Individual with Disabilities Education Act or Section 504 of the federal Rehabilitation Act of 1973.

Parent/Guardian Responsibilities

The responsibilities of the parent/guardian of any student who may need medication during the school day shall include, but are not limited to:

1. Providing parent/guardian and authorized health care provider written statements each school year as described in the sections "Parent/Guardian Statement" and "Health Care Provider Statement" below. The parent/guardian shall provide a new authorized health care provider's statement if the medication, dosage, frequency of administration, or reason for administration changes.

2. If the student is on a continuing medication regimen for a non-episodic condition, informing the school nurse or other designated certificated employee of the medication being taken, the current dosage, and the name of the supervising physician and updating the information when needed.

3. If the student suffers from epilepsy, notifying the principal or designee whenever the student has had an emergency anti-seizure medication administered to him/her within the past four hours on a school day.

4. Providing medications in properly labeled, original containers along with the authorized health care provider's instructions. For prescribed or ordered medication, the container also shall bear the name and telephone number of the pharmacy, the student's identification, and the name and phone number of the authorized health care provider.

Parent/Guardian Statement

When district employees are to administer medication to a student, the parent/guardian's written statement shall:

1. Identify the student

2. Grant permission for the authorized district representative to communicate directly with the student's authorized health care provider and pharmacist, as may be necessary, regarding the health care provider's written statement or any other questions that may arise with regard to the medication

3. Contain an acknowledgment that the parent/guardian understands how district employees will administer the medication or otherwise assist the student in its administration

4. Contain an acknowledgment that the parent/guardian understands their responsibilities to enable district employees to administer or otherwise assist the student in the administration of medication including, but not limited to, the parent/guardian's responsibility to provide a written statement from the authorized health care provider to ensure that the medication is delivered to the school in a

proper container by an individual legally authorized to be in possession of the medication, and to provide all necessary supplies and equipment

5. Contain an acknowledgment that the parent/guardian understands the right to terminate consent for the administration of the medication or for otherwise assisting the student in the administration of medication at any time

In addition to the requirements in items #1-5 above, if a parent/guardian has requested that their student be allowed to carry and self-administer prescription epinephrine delivery system or prescription inhaled asthma medication, the parent/guardian's written statement shall:

1. Consent to the self-administration

2. Release the district and school personnel from civil liability if a student suffers an adverse reaction as a result of self-administering the medication

In addition to the requirements in items #1-5 above, if a parent/guardian wishes to designate an individual who is not an employee of the district to administer medication to the student, the parent/guardian's written statement shall clearly identify the individual and shall state:

1. The individual's willingness to accept the designation

2. That the individual is permitted to be on the school site

3. Any limitations on the individual's authority

Health Care Provider Statement

When any district employees are to administer prescribed medication to a student or when a student is to be allowed to carry and self-administer epinephrine delivery system or prescribed diabetes or asthma medication during school hours, the authorized health care provider's written statement shall include:

1. Clear identification of the student

2. The name of the medication

3. The method, amount, and time schedules by which the medication is to be taken

4. If a parent/guardian has requested that their child be allowed to self-administer medication, confirmation that the student is able to self-administer the medication

5. For medication that is to be administered on an as-needed basis, the specific symptoms that would necessitate administration of the medication, allowable frequency for administration, and indications for referral for medical evaluation

6. Possible side effects of the medication

7. Name, address, telephone number, and signature of the student's authorized health care provider

When authorizing a district employee to administer emergency anti-seizure medication to a student, the authorized health care provider's written statement shall also include the following:

1. Detailed seizure symptoms, including frequency, type, or length of seizures that identify when the administration of the medication becomes necessary

2. Any potential adverse responses by the student and recommended mitigation actions, including when to call emergency services

3. A protocol for observing the student after a seizure, including, but not limited to, whether they should rest in the school office or return to class and the length of time the student should be under direct observation

4. A statement that, following a seizure, a school administrator or other staff member shall contact the school nurse and the student's parent/guardian to continue the observation plan

District Responsibilities

The Superintendent or designee shall ensure that any unlicensed school personnel authorized to administer medication to a student receives appropriate training from the school nurse or other qualified medical personnel.

The school nurse or other designated school personnel shall:

1. Administer or assist in administering the medication in accordance with the authorized health care provider's written statement;

2. Accept delivery of medication from the student's parent/guardian, including counting and recording the medication upon receipt;

3. Maintain a list of students needing medication during the school day, including those authorized to self-administer medication, and note on the list the type of medication and the times and dosage to be administered;

4. Maintain a medication log documenting the administration of medication including the student's name; name of medication the student is required to take; dose of medication; method by which the student is required to take the medication; time the medication is to be taken during the regular school day; date(s) on which the student is required to take the medication; authorized health care provider's name and contact information; and a space for daily recording of medication administration;

   The daily record shall contain the date, time, amount of medication administered, and signature of the individual administering the medication.

5. Maintain for each student a medication record including the authorized health care provider's written statement, the parent/guardian's written statement, the medication log, and any other written documentation related to the administration of medication to the student;

6. Ensure that student confidentiality is appropriately maintained;

7. Coordinate, and, as appropriate, ensure the administration of medication during field trips and other school-related activities;

8. Report any refusal of a student to take their medication to the student's parent/guardian and the site administrator;

9. Keep all medication to be administered by the district in a locked drawer or cabinet;

10. As needed, communicate with the student's authorized health care provider and/or pharmacist regarding the medication and its effects;

11. Counsel other designated school personnel regarding the possible effects of the medication on the student's physical, intellectual and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission or overdose;

12. Ensure that unused, discontinued and outdated medication is returned to the student's parent/guardian at the end of the school year, where possible or, if the medication cannot be returned, is disposed of in accordance with state laws and local ordinances;

13. Provide immediate medical assistance, if needed, and report to the site administrator and parent/guardian, and, if necessary, the student's authorized health care provider any instances when a medication is not administered properly, including administration of the wrong medication or failure to administer the medication in accordance with authorized health care provider's written statement;

    Upon receiving such notification, the school nurse or site administrator may notify the student's authorized health care provider and shall document the error in the medication log.

14. In the event of a medical emergency requiring administration of medication, provide immediate medical assistance, directly observe the student following the administration of medication, contact the student's parent/guardian, and determine whether the student should return to class, rest in the school office, or receive further medical assistance.

Additional Requirements for Management of Epileptic Seizures

In addition to applicable provisions in the sections above, the Superintendent or designee shall make arrangements for assisting students with epilepsy who may suffer a seizure at school. Such arrangements shall include the following:

1. **Services or Accommodations:** Whenever a parent/guardian requests that a nonmedical district employee be trained to provide emergency medical assistance to their student, the parent/guardian shall be notified that the student may qualify for services or accommodations.

   The Superintendent or designee shall assist the parent/guardian to explore that option and shall encourage the parent/guardian to adopt the option if the student is determined to be eligible for such service or accommodation.

   If the student's parent/guardian refuses to have the student assessed for services or accommodations under IDEA or Section 504, the Superintendent or designee may develop an individualized health plan, seizure action plan, or other appropriate health plan designed to acknowledge and prepare for the student's health care needs in school.

2. **Request for Volunteers:** The Superintendent or designee shall distribute an electronic notice to school staff no more than twice per school year per student whose parent/guardian has requested

provision of emergency medical assistance. The notice shall be in bold print and shall contain a description of the request for a volunteer school employee, the training that such volunteer school employee will receive, the voluntary nature of the program, and the timelines for the volunteer school employee to rescind the offer. No other means of soliciting volunteer school employees shall be conducted.

If no employee volunteers to administer emergency anti-seizure medication to a student, the Superintendent or designee shall again notify the student's parent/guardian of the option to have the student assessed for services and accommodations under IDEA or Section 504.

3. **Training:** Any employee who volunteers to administer an emergency anti-seizure medication shall receive from a licensed health care professional the training before administering such medication.

   The training shall include, but is not limited to:

   a. Recognition and treatment of different types of seizures

   b. Administration of an emergency anti-seizure medication

   c. Basic emergency follow-up procedures, including, but not limited to, a requirement for the principal or designee to call the emergency 911 telephone number and to contact the student's parent/guardian, but not necessarily to transport the student to an emergency room

   d. Techniques and procedures to ensure student privacy

   When a trained employee has not administered an emergency anti-seizure medication to a student within two years after completing the training and a student who may need the administration of an emergency anti-seizure medication is enrolled in the school, the employee shall be retrained in order to retain the ability to administer an emergency anti-seizure medication.

4. **Notification of Administration:** The Superintendent or designee shall establish a process for notifying the credentialed school nurse, or the Superintendent or designee as applicable, whenever an employee administers an emergency anti-seizure medication to a student at a school site.

5. **Supervision of Volunteers:** Volunteer school employees shall be supervised by a licensed health care professional.

Emergency Epinephrine Delivery Systems

The Superintendent or designee shall provide epinephrine delivery systems to school nurses or other employees who have volunteered to administer them in an emergency and have received training. The school nurse, or a volunteer employee when a school nurse or physician is unavailable, may administer an epinephrine delivery system to provide emergency medical aid to any person suffering, or reasonably believed to be suffering, from potentially life-threatening symptoms of anaphylaxis at school or a school activity.

At least once per school year, the Superintendent or designee shall distribute to all staff a notice requesting volunteers to be trained to administer an epinephrine auto-injector and describing the training that the volunteer will receive.

The principal or designee at each school may designate one or more volunteers to receive initial and annual refresher training, which shall be provided by a school nurse or other qualified person designated by a physician and surgeon authorized, and shall be based on the standards developed by the Superintendent of Public Instruction. Written materials covering the required topics for training shall be retained by the school for reference.

A school nurse or other qualified supervisor of health, or a district administrator if the district does not have a qualified supervisor of health, shall obtain a prescription for epinephrine delivery systems for each school from an authorized physician and surgeon. Such prescription may be filled by local or mail order pharmacies or epinephrine delivery system manufacturers. Elementary schools shall, at a minimum, be provided one adult (regular) and one junior epinephrine delivery system. Secondary schools shall be provided at least one adult (regular) epinephrine delivery system, unless there are any students at the school who require a junior epinephrine delivery system.

If an epinephrine delivery system is used, the school nurse or other qualified supervisor of health shall restock the epinephrine delivery system as soon as reasonably possible, but no later than two weeks after it is used. In addition, epinephrine delivery systems shall be restocked before their expiration date.

Information regarding defense and indemnification provided by the district for any and all civil liability for volunteers administering epinephrine delivery systems shall be provided to each volunteer and retained in the employee's personnel file.

A school may accept gifts, grants, and donations from any source for the support of the school in carrying out the requirements of Education Code 49414, including, but not limited to, the acceptance of epinephrine delivery systems from a manufacturer or wholesaler.

The Superintendent or designee shall maintain records regarding the acquisition and disposition of epinephrine delivery systems for a period of three years from the date the records were created.

Emergency Medication for Opioid Overdose

The district may elect to make emergency naloxone hydrochloride or another opioid antagonist available at schools for the purpose of providing emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose. In determining whether to make this medication available, the Superintendent or designee shall evaluate the emergency medical response time to the school and determine whether initiating emergency medical services is an acceptable alternative to providing an opioid antagonist, and training personnel to administer the medication.

When available at the school site, the school nurse shall provide emergency naloxone hydrochloride or another opioid antagonist for emergency medical aid to any person exhibiting potentially life-threatening symptoms of an opioid overdose at school or a school activity. Other designated personnel who have volunteered and have received training may administer such medication when a school nurse or physician is unavailable and shall only administer the medication by nasal spray or auto-injector.

At least once per school year, the Superintendent or designee shall distribute to all staff a notice requesting volunteers to be trained to administer naloxone hydrochloride or another opioid antagonist, describing the training that the volunteer will receive, and explaining the right of the volunteer to rescind the offer to volunteer at any time, including after receiving training. The notice shall also include a statement that no benefit will be granted to or withheld from any employee based on the offer to volunteer and there will be no retaliation against any employee for rescinding the offer to volunteer.

The principal or designee may designate one or more volunteer employees to receive initial and annual refresher training, based on standards adopted by the Superintendent of Public Instruction, regarding the storage and emergency use of naloxone hydrochloride or another opioid antagonist. The training shall be provided at no cost to the employee, conducted during regular working hours, and be provided by a school nurse or other qualified person designated by an authorizing physician and surgeon. Written materials provided during the training shall be retained at the school for reference.

A school nurse, other qualified supervisor of health, or, if the district does not have a qualified supervisor of health, a District administrator shall obtain a prescription for naloxone hydrochloride or another opioid antagonist for each school from an authorized physician and surgeon. Such prescription may be filled by local or mail order pharmacies or manufacturers.

If the medication is used, the school nurse, other qualified supervisor of health, or District administrator, as applicable, shall restock the medication as soon as reasonably possible, but no later than two weeks after it is used. In addition, the medication shall be restocked before its expiration date.

Information regarding defense and indemnification provided by the district for any and all civil liability for volunteers administering naloxone hydrochloride or another opioid antagonist for emergency aid shall be provided to each volunteer and retained in the employee's personnel file.

A school may accept gifts, grants, and donations from any source for the support of the school in carrying out the requirements of Education Code 49414.3, including, but not limited to, the acceptance of the naloxone hydrochloride or another opioid antagonist from a manufacturer or wholesaler.

The Superintendent or designee shall maintain records regarding the acquisition and disposition of naloxone hydrochloride or another opioid antagonist for a period of three years from the date the records were created.

Policy Reference Disclaimer:
These references are not intended to be part of the policy itself, nor do they indicate the basis or authority for the Board to enact this policy. Instead, they are provided as additional resources for those interested in the subject matter of the policy.

Legal References:

STATE
CALIFORNIA CODE OF REGULATIONS
5 CCR 600-611 Administering medication to students
BUSINESS CODE
2700-2837 Nursing
3500-3546 Physician assistants
4119.2 Acquisition of epinephrine auto-injectors
4119.8 Acquisition of naloxone hydrochloride or another opioid antagonist
EDUCATION CODE
48980 Parent/Guardian notifications
49407 Liability for treatment
49408 Student emergency information
49414 Emergency epinephrine auto-injectors
49414.3 Emergency medical assistance; administration of medication for opioid overdose
49414.4 Opioid Misuse
49414.5 Providing school personnel with voluntary emergency training
49414.7 Administration of albuterol inhalers

49414.8 Funding for emergency opioid antagonists; requirements
49422-49427 Employment of medical personnel
49423 Administration of prescribed medication for student
49423.1 Inhaled asthma medication
49426.5 Licensed vocational nurses
49468-49468.5 The Seizure Safe Schools Act
49480 Continuing medication regimen; notice
HEALTH & SAFETY CODE
1799.113 Opioid overdose treatment
11362.7-11362.85 Medicinal cannabis

FEDERAL

UNITED STATES CODE
20 USC 1232g Family Educational Rights and Privacy Act (FERPA) of 1974
20 USC 1400-1482 Individuals with Disabilities Education Act
21 USC 812 Schedule of controlled substances
21 USC 844 Penalties for possession of controlled substance
29 USC 794 Rehabilitation Act of 1973; Section 504
CODE OF FEDERAL REGULATIONS
34 CFR 99.30 Conditions under which prior written consent is required to disclose information

MANAGEMENT RESOURCES

AMERICAN DIABETES ASSOCIATION PUBLICATION
Legal Advisory on Rights of Students with Diabetes in California's K-12 Public Schools, August 2007
Program Advisory on Medication Administration, 2005
Glucagon Training Standards for School Personnel: Providing Emergency Medical Assistance to Pupils with Diabetes, May 2006
COURT DECISION
American Nurses Association v. Torlakson (2013) 57 Cal.4th 570
NATIONAL DIABETES EDUCATION PROGRAM PUBLICATION
Helping the Student with Diabetes Succeed: A Guide for School Personnel, June 2003
WEBSITES
CSBA District and County Office of Education Legal Services https://legalservices.csba.org/#
National Diabetes Education Program http://www.ndep.nih.gov/
U.S. Department of Health and Human Services, National Heart, Lung, and Blood Institute http://www.nhlbi.nih.gov/health/public/lung/index.htm#asthma
American Diabetes Association http://www.diabetes.org/
California Department of Education, Health Services and School Nursing http://www.cde.ca.gov/ls/he/hn
CSBA http://www.csba.org/
California Department of Public Health http://www.cdph.ca.gov/

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