

Policy #: 516
Title: STUDENT MEDICATION AND TELEHEALTH
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Reviewers: MSA Director of Health Services

I. PURPOSE

The purpose of this policy is to establish the required provisions when administering non-emergency medication to students and overall guidelines for medication administration at the Minnesota State Academies (MSA).

[NOTE: The necessary provisions for complying with Minnesota Statutes, sections 121A.22, Administration of Drugs and Medicine, 121A.221, Possession and Use of Asthma Inhalers by Asthmatic Students, and 121A.222, Possession and Use of Nonprescription Pain Relievers by Secondary Students are included in this policy. The statutes do not regulate administration of drugs and medicine for students aged 18 and over or other nonprescription medications. Please note that section 121A.22 does not require school districts to apply the administration of medication rule to drugs or medicine used off school grounds, drugs, or medicines used in connection with athletics or extra-curricular activities, and drugs and medicines that are used in connection with activities that occur before or after the regular school day.]

II. GENERAL STATEMENT OF POLICY

MSA acknowledges that some students may require prescribed drugs or medication or telehealth services while attending school or staying in the dormitories at MSA. MSA's licensed nurses or trained staff will administer medications, except any form of medical cannabis, in accordance with law and MSA procedures.

III. DRUG AND MEDICATION REQUIREMENTS

A. Administration of Drugs and Medicine

- a. The administration of medication or drugs at school requires a completed signed request from the student's parent/guardian. An oral request must be reduced to writing within two school days/as soon as possible, with the understanding that MSA will follow the oral request until a written request is received.
- b. All medication will be administered by licensed nurses or a delegated trained school employee (i.e., during athletic events, field trips, and/or special events). Staff who are delegated to administer medication must have received medication training from a registered nurse and understand expectations. After administration of medication, delegated staff are to complete and sign the medication administration labels or form and return the documentation to the health office. Delegated staff must personally pick up, administer, and return medication, labels, and medical plans from the school health offices.
- c. For special student events happening outside of Minnesota, school health services may provide consultation on safe planning and preparation processes including considerations for identifying student health and medical needs. This may also include sharing a framework that may include (but not limited to) administration and storage of medication, allowance for student self-administration when appropriate, considerations for individualized student health needs or plans, and allowance for parent/caregiver to train school staff directly on their child's medication or health needs during the trip.

- d. Drugs and medicine subject to Minnesota Statutes, 121A.22 must be administered, to the extent possible, according to MSA procedures that must be developed in consultation with a licensed school nurse, licensed under Minnesota Rules, part 8710.6100.
- e. Exclusions: The provisions on administration of drugs and medicine above may not apply to drugs or medicine that are:
 1. purchased without a prescription
 2. used by a student who is 18 years old or older and is their own guardian
 3. used in connection with services for which a minor may give effective consent
 4. used in situations in which, in the judgment of the school personnel, including a licensed nurse, who are present or available, the risk to the student's life or health is of such a nature that drugs or medicine should be given without delay
 5. used off the school grounds
 6. used in connection with athletics or extracurricular activities
 7. used in connection with activities that occur before or after the regular school day
 8. provided or administered by a public health agency to prevent or control an illness or a disease outbreak as provided under Minnesota law
 9. prescription asthma or reactive airway disease medications can be self-administered by a student with an asthma inhaler if:
 - MSA has received a written authorization each school year from the student's parent permitting the student to self-administer the medication;
 - the inhaler is properly labeled for that student; and
 - the parent has not requested school personnel to administer the medication to the student.

MSA's licensed nurse or other appropriate party/health care provider must assess the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting and enter information into the student's school health record/ emergency health plan to implement safe possession and use of asthma inhalers.

10. epinephrine delivery systems, consistent with Minnesota Statutes, section 121A.2205, if the parent and prescribing medical professional annually inform the student's school in writing that:
 - the student may possess the epinephrine or
 - the student is unable to possess the epinephrine and requires immediate access to epinephrine delivery systems that the parent provides properly labeled to the school for the student as needed.

Special health treatments and health functions, such as catheterization, tracheostomy suctioning, and gastrostomy feedings, do not constitute

administration of drugs or medicine.

Emergency health procedures, including emergency administration of drugs and medicine are not subject to this policy.

B. Prescription Medication

- a. A "Medication Request and Physician Authorization/Parent-Guardian Authorization" form must be completed annually and/or when a change in the prescription or requirements for administration occurs. Prescription medication as used in this policy does not include any form of medical cannabis as defined in Minnesota Statutes, section 152.22, subdivision 6.
- b. Prescription medication must come to school in the original container labeled for the student by a pharmacist in accordance with law and must be administered in a manner consistent with the instructions on the label/medication order.
- c. School Health Services Nursing may request to receive further information about the prescription, if needed, prior to administration of the substance. All contact with parent/guardians or healthcare providers regarding medication must originate with the school health office. Staff may contact the school health office and discuss concerns regarding medications at any time.
- d. Prescription medications are not to be carried by the student but will be brought to the school health office. Exceptions to this requirement are prescription asthma medications self-administered with an inhaler (See Section III.A.e(9) above), and medications administered as specified in an IEP (individualized education program), emergency care plan, or IHP (individual health plan).
- e. When possible, all medications should be brought directly to the health services office by the parent/guardian. When this is not possible, parents must notify the Director of Health Services and/or the licensed nurse that medication is coming with the student.
- f. The preferred method of receiving medications which are controlled substances is to have the parent/guardian deliver the medication directly to the nurse in the health services office. Because MSA is a residential facility, we understand that it is not always possible.

If medication is sent with a student, the medication must be put in an envelope, the envelope sealed, parent's/guardian's signature written across the seal, and a note written on the envelope stating how many tablets are being sent. The envelope must be given to the driver transporting the student to MSA and delivered to the dorm staff when arriving on campus. Employees are responsible for delivering the medication to the health office promptly upon receipt.

Parents/guardians should notify the health office that the medication was sent with the student.

- g. Parents are responsible for ensuring there is a supply of medication for their student. Health services staff will assist with the refill process as needed, working with the parent/guardian and their healthcare provider. In special situations, a prescription can be refilled at a local pharmacy, and nursing staff will pick up the medication (following communication from the parents/guardians or student as

- appropriate). If a student should be receiving medication and there is no supply, nursing staff may determine that it is not safe for the student to remain at school and the student will be sent home until the medication is available.
- h. The school must be notified immediately by the parent or student 18 years old or older (own guardian) in writing of any change in the student's prescription medication administration. A new medical authorization or container label with new pharmacy instructions is required.
 - i. MSA school health services shall be responsible for the filing of the Medication Request and Physician Authorization/Parent-Guardian Authorization form in the student's health record. School nurses (or other designated employees) are responsible for providing a copy of such form or comparable information to personnel designated to administer the medication.
 - j. For drugs or medicine used by children with a disability, administration may be as provided in the IEP, emergency care plan, or IHP.
 - k. If the administration of a drug or medication described in this section requires the school district to store the drug or medication, the parent or legal guardian must inform the school if the drug or medication is a controlled substance. For a drug or medication that is not a controlled substance, the request must include a provision designating the school district as an authorized entity to transport the drug or medication for the purpose of destruction if any unused drug or medication remains in the possession of school personnel. For a drug or medication that is a controlled substance, the request must specify that the parent or legal guardian is required to retrieve the drug or controlled substance when requested by the school.

C. Nonprescription Medication

ALL medication, prescription and over the counter (OTC), must be kept in the Health Office except in special circumstances as authorized by the health services nursing staff. Students may not self-administer medication without a specific doctor's order unless authorized by health services nursing staff.

Students who are found to be in possession of any medication, either prescription or OTC which has not been authorized, may be subject to discipline, including possible suspension.

The term "medication" is not limited to prescription medication but includes OTC drugs (excluding those on MSA's "Over-the-Counter Medication" form). The health office supplies some OTC medications as listed on the "Over-the-Counter Standing Medication" form. The medications supplied by MSA are given per label/standing orders which are reviewed and signed by a local physician annually. The over-the-counter medications listed on the "Over-the-Counter Standing Medication" form may be administered if the parent/guardian or student as their own guardian has provided consent and signs the "Over-the-Counter Standing Medication" form as requested.

D. Possession and Use of Epinephrine Delivery Systems

a. Definitions

- i. “Administer” means the direct application of an epinephrine delivery system to the body of an individual.
- ii. “Epinephrine delivery system” means a medication product approved by the United States Food and Drug Administration that automatically delivers a single, premeasured dose of epinephrine to prevent or treat a life-threatening allergic reaction.
- iii. “School” means a public school under Minnesota Statutes, section 120A.22, subdivision 4, or a nonpublic school, excluding a home school, under section 120A.22, subdivision 4, that is subject to the federal Americans with Disabilities Act.

- b. At the time a student enrolls in school, and annually thereafter, a student’s parent, school staff, including those responsible for student health care, and the prescribing medical professional must develop and implement an individualized written health plan/emergency health plan for a student who is prescribed epinephrine delivery systems that enables the student to:

- i. possess epinephrine delivery systems; or
- ii. if the parent and prescribing medical professional determine the student is unable to possess the epinephrine, have immediate access to epinephrine delivery systems in close proximity to the student at all times during the instructional day.

For the purposes of this policy, “instructional day” is defined as the entire period of time that a student attends MSA programs, including residential and after school/extracurricular programs.

- c. MSA nurses and trained MSA staff are responsible for implementing students’ health plan, including recognizing anaphylaxis and administering epinephrine delivery systems when required, consistent with state law. This health plan may be included in a student’s IEP, emergency health plan, or individualized health plan.
- d. MSA may obtain and possess epinephrine delivery systems to be maintained and administered by school personnel, including a licensed nurse, to a student or other individual if, in good faith, it is determined that person is experiencing anaphylaxis regardless of whether the student or other individual has a prescription for an epinephrine delivery system. The administration of an epinephrine delivery system in accordance with Minnesota Statutes, section 121A.2207 is not the practice of medicine.
- e. Registered nurses may administer epinephrine delivery systems in a school setting according to a condition-specific protocol as authorized under Minnesota Statutes, section 148.235, subdivision 8. Notwithstanding any limitation in Minnesota Statutes, sections 148.171 to 148.285, licensed practical nurses may administer epinephrine delivery systems in a school setting according to a condition-specific protocol that does not reference a specific patient and that specifies the circumstances under which the epinephrine delivery system is to be administered, when caring for a patient whose condition falls within the protocol.

- f. MSA may enter into arrangements with manufacturers of epinephrine delivery systems to obtain epinephrine delivery systems at fair-market, free, or reduced prices. A third party, other than a manufacturer or supplier, may pay for a school's supply of epinephrine delivery systems.

The Commissioner of the Minnesota Department of Health must provide MSA with a standing order for distribution of epinephrine delivery systems under Minnesota Statutes, sections 148.235, subdivision 8 and 151.37, subdivision 2.

E. Sunscreen

A student may possess and apply a topical sunscreen product while on school property or at a school-sponsored event without a prescription, physician's note, or other documentation from a licensed health care professional. School personnel may but are not required to provide sunscreen or assist students in applying sunscreen.

F. Procedure regarding unclaimed drugs or medications

- a. MSA has adopted the following procedure for the collection and transport of any unclaimed or abandoned prescription drugs or medications remaining in the possession of school personnel in accordance with this policy. Before the transportation of any prescription drug or medication under this policy, MSA shall make a reasonable attempt to return the unused prescription drug or medication to the student's parent or legal guardian. Transportation of unclaimed or unused prescription drugs or medications will occur at least annually but may occur more frequently at the discretion of the MSA Director of Health Services.
- b. If the unclaimed or abandoned prescription drug is not a controlled substance as defined under Minnesota Statutes, section 152.01, subdivision 4, or is an over-the-counter medication, MSA will either designate an individual who shall be responsible for transporting the drug or medication to a designated drop-off box or collection site or request that a law enforcement agency transport the drug or medication to a drop-off box or collection site.
- c. If the unclaimed or abandoned prescription drug is a controlled substance as defined in Minnesota Statutes, section 152.01, subdivision 4, MSA or school personnel are prohibited from transporting the prescription drug to a drop-off box or collection site for prescription drugs identified under this paragraph. MSA must request that a law enforcement agency transport the prescription drug or medication to a collection bin that complies with Drug Enforcement Agency regulations, or if a site is not available, under the agency's procedure for transporting drugs.

IV. ACCESS TO SPACE FOR MENTAL HEALTH CARE THROUGH TELEHEALTH

- A. Beginning October 1, 2024, to the extent space is available, MSA must provide an enrolled secondary school student with access during regular school hours, and to the extent staff is available, before or after the school day on days when students receive instruction at school, to space that a student may use to receive mental health care through telehealth from a student's licensed mental health provider. A secondary school must develop a plan with procedures to receive requests for access to the space.
- B. The space must provide students with adequate privacy to receive mental health care.
- C. MSA students may use a school-issued device to receive mental health care through

telehealth if such use is consistent with MSA policies governing acceptable use of the school-issued device.

- D. MSA may require a student requesting access to space under this section to submit to the school a signed and dated consent from the student's parent or guardian, or from the student if the student is age 16 or older, authorizing the student's licensed mental health provider to release information from the student's health record that is requested by the school to confirm the student is currently receiving mental health care from the provider. Such a consent is valid for the school year in which it is submitted.

Legal References:

Minn. Stat. § 13.32 (Educational Data)
Minn. Stat. § 121A.21 (School Health Services)
Minn. Stat. § 121A.216 (Access to Space for Mental Health Care through Telehealth)
Minn. Stat. § 121A.22 (Administration of Drugs and Medicine)
Minn. Stat. § 121A.2205 (Possession and Use of Epinephrine Delivery systems; Model Policy)
Minn. Stat. § 121A.2207 (Life-Threatening Allergies in Schools; Stock Supply of Epinephrine Delivery systems)
Minn. Stat. § 121A.221 (Possession and Use of Asthma Inhalers by Asthmatic Students)
Minn. Stat. § 121A.222 (Possession and Use of Nonprescription Pain Relievers by Secondary Students)
Minn. Stat. § 121A.223 (Possession and Use of Sunscreen)
Minn. Stat. § 148.171 (Definitions; Title)
Minn. Stat. § 151.212 (Label of Prescription Drug Containers)
Minn. Stat. § 152.01 (Definitions)
Minn. Stat. § 152.22 (Definitions)
Minn. Stat. § 152.23 (Limitations)
Minn. Rule 8710.6100 (School Nurse)
20 U.S.C. § 1400 et seq. (Individuals with Disabilities Education Act)
29 U.S.C. § 794 et seq. (Rehabilitation Act of 1973, § 504)

Cross References:

MSBA/MASA Model Policy 418 (Drug-Free Workplace/Drug-Free School)