

## **516 STUDENT MEDICATION**

### **I. PURPOSE**

The purpose of this policy is to set forth the provisions that must be followed when administering nonemergency prescription medication to students at school.

### **II. GENERAL STATEMENT OF POLICY**

The school district acknowledges that some students may require prescribed drugs or medication during the school day. The school district's licensed school nurse, trained health clerk, principal, or teacher will administer prescribed medications, except any form of medical cannabis, in accordance with law and school district procedures.

### **III. REQUIREMENTS**

- A. The administration of prescription medication or drugs at school requires a completed signed request from the student's parent. An oral request must be reduced to writing within two school days, provided that the school district may rely on an oral request until a written request is received.
- B. An "Administering Prescription Medications" form must be completed annually (once per school year) 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 Minn. Stat. § 152.22, Subd. 6.
- C. 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.
- D. The school nurse may request to receive further information about the prescription, if needed, prior to administration of the substance.
- E. Prescription medications are not to be carried by the student, but will be left with the appropriate school district personnel. Exceptions to this requirement are: prescription asthma medications self-administered with an inhaler (See Part J.5. below), and medications administered as noted in a written agreement between the school district and the parent or as specified in an IEP (individualized education program), Section 504 plan, or IHP (individual health plan).
- F. The school must be notified immediately by the parent or student 18 years old or older in writing of any change in the student's prescription medication administration. A new medical authorization or container label with new pharmacy instructions shall be required immediately as well.
- G. For drugs or medicine used by children with a disability, administration may be as provided in the IEP, Section 504 plan or IHP.

- H. The school nurse, or other designated person, shall be responsible for the filing of the Administering Prescription Medications form in the health records section of the student file. The school nurse, or other designated person, shall be responsible for providing a copy of such form to the principal and to other personnel designated to administer the medication.
- I. Procedures for administration of drugs and medicine at school and school activities shall be developed in consultation with a school nurse, a licensed school nurse, or a public or private health organization or other appropriate party (if appropriately contracted by the school district under Minn. Stat. § 121A.21). The school district administration shall submit these procedures and any additional guidelines and procedures necessary to implement this policy to the school board for approval. Upon approval by the school board, such guidelines and procedures shall be an addendum to this policy.
- J. Specific Exceptions:
1. Special health treatments and health functions such as catheterization, tracheostomy suctioning, and gastrostomy feedings do not constitute administration of drugs and medicine;
  2. Emergency health procedures, including emergency administration of drugs and medicine are not subject to this policy;
  3. Drugs or medicine provided or administered by a public health agency to prevent or control an illness or a disease outbreak are not governed by this policy;
  4. Drugs or medicines used at school in connection with services for which a minor may give effective consent are not governed by this policy;
  5. Drugs or medicines that are prescription asthma or reactive airway disease medications can be self-administered by a student with an asthma inhaler if:
    - a. the school district has received a written authorization from the pupil's parent permitting the student to self-administer the medication;
    - b. the inhaler is properly labeled for that student; and
    - c. the parent has not requested school personnel to administer the medication to the student.

The parent must submit written authorization for the student to self-administer the medication each school year. In a school that does not have a school nurse or school nursing services, the student's parent or guardian

must submit written verification from the prescribing professional which documents that an assessment of the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting has been completed.

If the school district employs a school nurse or provides school nursing services under another arrangement, the school nurse or other appropriate party must assess the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting and enter into the student's school health record a plan to implement safe possession and use of asthma inhalers;

6. Medications:
  - a. that are used off school grounds;
  - b. that are used in connection with athletics or extracurricular activities; or
  - c. that are used in connection with activities that occur before or after the regular school day

are not governed by this policy.

7. Nonprescription Medication. A secondary student may possess and use nonprescription pain relief in a manner consistent with the labeling, if the school district has received written authorization from the student's parent or guardian permitting the student to self-administer the medication. The parent or guardian must submit written authorization for the student to self-administer the medication each school year. The school district may revoke a student's privilege to possess and use nonprescription pain relievers if the school district determines that the student is abusing the privilege. This provision does not apply to the possession or use of any drug or product containing ephedrine or pseudoephedrine as its sole active ingredient or as one of its active ingredients. Except as stated in this paragraph, only prescription medications are governed by this policy.
8. At the start of each school year or at the time a student enrolls in school, whichever is first, 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 for a student who is prescribed epinephrine auto-injectors that enables the student to:
  - a. possess epinephrine auto-injectors; or
  - b. if the parent and prescribing medical professional determine the student is unable to possess the epinephrine, have immediate access

to epinephrine auto-injectors in close proximity to the student at all times during the instructional day.

The plan must designate the school staff responsible for implementing the student's health plan, including recognizing anaphylaxis and administering epinephrine auto-injectors when required, consistent with state law. This health plan may be included in a student's § 504 plan.

9. A student may possess and apply a topical sunscreen product during the school day 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 are not required to provide sunscreen or assist students in applying sunscreen.

K. "Parent" for students 18 years old or older is the student.

L. Districts and schools may obtain and possess epinephrine auto-injectors to be maintained and administered by school personnel 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 auto-injector. The administration of an epinephrine auto-injector in accordance with this section is not the practice of medicine.

A district or school may enter into arrangements with manufacturers of epinephrine auto-injectors to obtain epinephrine auto-injectors 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 auto-injectors.

**Legal References:** Minn. Stat. § 13.32 (Student Health Data)  
Minn. Stat. § 121A.21 (Hiring of Health Personnel)  
Minn. Stat. § 121A.22 (Administration of Drugs and Medicine)  
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.2205 (Possession and Use of Epinephrine Auto-Injectors; Model Policy)  
Minn. Stat. § 121A.2207 (Life-Threatening Allergies in Schools; Stock Supply of Epinephrine Auto-Injectors)  
Minn. Stat. § 121A.223 (Possession and Use of Sunscreen)  
Minn. Stat. § 151.212 (Label of Prescription Drug Containers)  
Minn. Stat. § 152.22 (Medical Cannabis; Definitions)  
Minn. Stat. § 152.23 (Medical Cannabis; Limitations)  
20 U.S.C. § 1400 *et seq.* (Individuals with Disabilities Education Improvement Act of 2004)  
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)

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# MEDICATION ADMINISTRATION PROTOCOL

Worthington Independent School District 518

Safe Medication Administration is a Top Priority:

## A. Safety Rules

- a. The primary responsibility of medication/treatment (from here-on known as medication) administration lies with the student's parent or guardian. If a medication can be administered at home – this is always the best choice.
- b. Never leave medications unattended. Always lock up medication each and every time you leave the health office or medication storage area.
- c. ISD #518 "Consent for Medication Administration" form(s) must be completed before any medication administration can begin. Prescription medications **ALWAYS require the signature of a licensed prescriber** along with a parent/guardian's written permission before the student will be administered the medication at school.
  - i. Examples of prescription medication include: antibiotics, inhalers, insulin, some pain medications, some cough medications, some medications for migraine headaches, medication for nebulizer treatments, etc. If you are not sure if a medication requires a prescription, consult with the school nurse, pharmacist, or the drug reference book.
- d. Medication that can be purchased without a physician's prescription (Over-the-Counter) may be administered to students with parental permission. A physician's signature may be requested at the discretion of the licensed school nurse.
- e. Medications in which the FDA (Food and Drug Administration) has not established safe and effective dosing parameters for children 18 & under will not be administered in the school (i.e. vitamins, herbal remedies, or homeopathic remedies).
- f. Parents/Guardians will be required to meet with the school nurse before narcotic medications prescribed for pain or cough will be administered to students.
- g. School personnel may refuse to administer ANY medication if the medication procedure is not followed or if there is any question about the medication or its administration procedure. An attempt may be made to contact the parent or guardian if the medication is not administered. The school nurse may request to receive further information about the prescription, if needed, prior to administration of any substance.
  - i. Reasons may include: dose exceeds manufacturer's recommendation, expired date, medication is not in a properly labeled container, medication label cannot be read by health office staff (foreign language), etc.
- h. Medication must arrive to the health office in the original manufacturer's unopened container (over-the-counter medications), or in a properly labeled pharmacy container (prescription medications). Pharmacy labeled containers must include the following:
  - i. The student's name
  - ii. The pharmacy name, address, and phone number
  - iii. The name of the medication and the dosage
  - iv. The physician's name
  - v. The date the prescription was filledMedication that arrives in a white envelope, plastic bag, etc. will not be accepted. School health personnel will not administer any medication that does not appear to be in its original container.
- i. The parent or guardian must pick up all unused controlled substance and/or psychotropic medication – it will not be sent home with the student. All medication not picked up within one week of the last day of school will be destroyed by school personnel.

- j. ISD #518 *Consent for Medication Administration* forms are needed:
  - i. Annually or at the start of any new medication;
  - ii. When there is a change in medication (i.e., dose, time, medication, etc.); or
  - iii. At the discretion of the licensed school nurse
- k. Medications may be discontinued or put on hold by either parent/guardian or physician at any time. The school health office must be notified in writing when a medication is discontinued or held.
- l. Controlled substance & psychotropic medications must be counted when received into the health office. Students will not be allowed to self-carry & self-administer controlled substance &/or psychotropic medications.
- m. The Licensed School Nurse may take a verbal/phone medication authorization from a licensed prescriber for prescription medication or from a parent for over-the-counter medications as long as the verbal authorization is followed by with a written consent the next school day. Fax transmissions with confidentiality safeguards in place are acceptable. Unlicensed personnel **SHOULD NOT** under any circumstances take verbal/phone orders from physicians, licensed prescribers, or parents.
- n. Prescription medications are not to be carried by the student, but will be left with the school health office. Exceptions to this requirement are those circumstances in which current MN Statues specify that students may carry and self-administer medication in the school, and medication administered as noted in a written agreement between the school district and the parent or as specified in an IEP (individualized education plan), Section 504 plan, or IHP (individual health plan)

Set Up Procedure:

- A. To insure safety always double check the label on the medication bottle, and the physician's order &/or the parent's permission form when setting up and administering medications to students.
  - a. Daily Oral Medications
    - i. Once weekly, set-up student's medications using the student's pill minder in the student's individual medication bin. Be sure to fill only one student pill minder at a time. Avoid medication/hand contact and fill the pill minder directly from the prescription bottle. Students who have medications that are administered in large quantities, i.e. enzyme capsules for Cystic Fibrosis, may have their medications set-up in small plastic medication cups daily at time of administration.
  - b. As Needed Medication or PRN's
    - i. Over-the –Counter medications are to be kept in their original container until administered to the student. The container should be new and unopened when brought to the health office. Label the medication container with the student's name and grade or date of birth. Families who have more than one student in the same school building may provide one container of OTC medication/family. The manufacturer's recommended dose requirements, as printed on the label, will be followed when administering OTC medications to students. If the parent requests a dose that exceeds the manufacturer's recommended dose, a physician's signature will be required before the dose will be administered.
  - c. Other Medication
    - i. Insulin: A student's insulin will be kept with their diabetic testing supplies in a locked storage area in the health office unless other arrangements have been made in advance with the school nurse in cooperation with the parent, student, & school district. Refer to the student's Individual Health Plan, IEP, 504 plan &/or and medication consent form regarding insulin set-up and

administration. Proper disposal for sharps related to the needs of the diabetic will be available.

- ii. Nebulized Medication: Nebulized medications and equipment will be kept in a locked area in the health office. Students who require nebulized treatments during the school day will have the treatments in the health office unless other arrangements are made in advance with the school nurse in cooperation with the parent and teacher.
- iii. Inhalers and Epi-pens: If requested by the parent and deemed appropriate according to MN Statutes, students who require the use of inhaler medications and/or Epi-pens (emergency medications for severe allergic reactions) may carry their own medications on their person as long as the following requirements are met: 1.) completed ***Consent for Medication Administration*** form with written parental and physician permission, renewed yearly, 2.) proper labeling, 3.) an assessment by the school nurse to insure that the student possesses the proper knowledge and skills to safely possess and use the medication appropriately.

#### Administration and Documentation of Medication Administration:

##### A. Administration

- a. No one is allowed to administer medications unless they have been trained in medication administration and delegated this task by the licensed school nurse. Training should be done on an annual basis.
- b. Have the student get their cup of water, if appropriate.
- c. Ask the student to state their name and their teacher's name or some other statement of identity (i.e. birthdate), a picture of the student may be placed with the student's medication log or near their medication bin if helpful for student identification. Once the student is correctly identified, the medication may be administered.
- d. The school health personnel should always be the one to handle the medication container, not the student. Put the medication directly into the student's hand from the pill minder. Administer the medication from the student's pill minder and not from the student's medication bottle.
- e. Insure that the student has swallowed the medication.

##### B. Documentation

- a. Document the medication administration on the student's individual medication log after each administration.
- b. When all medications have been given for a specific time, i.e. AM meds or Noon meds, health office staff may leave a note or card stating that all meds have been given to avoid duplication of administration.
- c. If a student's medication was missed, document why, i.e. absent, ill, called – did not show, refused, etc. Contact the parent and complete an injury/incident report form if a medication was administered incorrectly (i.e., wrong time, wrong dose, wrong med, wrong student, etc).
- d. Acceptable timetable for the administration of regularly scheduled medications is ½ hour before or after the prescribed time for life sustaining medications, i.e. seizure and diabetic medications, and 30 minutes before or 45 minutes after for life altering medications, i.e. focused attention medications and antibiotics. Late students should be called to the health office. If lateness becomes a frequent problem, consult with the licensed school nurse, case manager, and/or teacher regarding a solution. If a medication is given outside the allotted time, document the time that the medication



was administered, notify the parent or guardian, and complete an injury/incident report form.

- e. In the event of a field trip or other out-of-school event, the licensed school nurse or principal may designate a staff member to administer the medication to the student. After proper training in medication administration procedures by the licensed school nurse the designee may administer the medication.
- f. The “Five Rights” of medication will be followed at all times; right student, right medication, right time, right dosage, and right documentation.

When to Notify the School Nurse:

- A. Any time there is a new prescription medication, or any change in a current medication, i.e. the medication itself, dosage, time, prescriber, or discontinuation of a medication.
- B. Any time there is an adverse reaction to a medication or a question regarding a medication or its administration (complete incident/injury report form).
- C. Any time there is a medication error, including errors of omission (complete incident/injury report form).
- D. Any time an “as needed” or prn pain medication is taken more than two times in one week for two weeks or more, or other unusual patterns.
- E. When the controlled substance count is not correct (complete incident/injury report form).

5/22/02 KL  
Rev. 10/2005 KL

Worthington Middle School, Senior High School and Alternative Learning Center  
PARENT AUTHORIZATION FORM  
OVER-THE-COUNTER PAIN RELIEF POSSESSION FOR SECONDARY STUDENTS

A new law was passed in Minnesota August 1, 2005 (Statute 121A.222) which allows secondary students (**grades 7-12**) to **possess and appropriately use over-the-counter pain medication** (such as Acetaminophen [Tylenol] or Ibuprofen [Motrin]) with **annual written parent permission**. This **does not** include cold & allergy medications that contain ephedrine or pseudo ephedrine (such as Sudafed).

Being the parent/guardian of \_\_\_\_\_, grade \_\_\_\_ here-by give my permission for him/her to possess and appropriately use the following over-the-counter pain medication \_\_\_\_\_ in a manner consistent with the products label during the current school year.

I understand that if the above named student is found to be in violation of the law requirements by [but not limited to] inappropriately using the medication (such as not following the manufacturer's recommended instructions for use including correct dose recommendations) or sharing his/her medication with another student or staff member, their right to possess and carry over-the-counter pain medication may be terminated by the school district.

I further understand that students found to be in possession of over-the-counter pain relief medication prior to their parent completing & giving this form to the high school health office could be considered a violation of the law, and therefore could terminate their rights according to the law.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date of Signature

For the Student:

I have read this authorization form and agree to follow all the rules that apply to the right & privilege of possessing and self-administering an over-the-counter pain relief medication.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date of Signature

\*\*\*\*\*  
\*\*\*\*\*

Office use only:

Date received by Health Office Staff \_\_\_\_\_ Initials \_\_\_\_\_

9/2005 kl

ISD #518 Worthington  
Consent for Medication Administration

*Medication administration should be arranged outside of school hours if at all possible.*

**ALL PRESCRIPTION MEDICATION REQUIRES A  
PHYSICIAN'S SIGNATURE.**

Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_  
School: [ ] Prairie, [ ] Middle, [ ] Sr. High School Year: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_ Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

1. **Reason** for medication/treatment: \_\_\_\_\_
2. Name of **Medication** \_\_\_\_\_ **Dosage:** \_\_\_\_\_  
( ) tablet/capsule ( ) liquid ( ) inhaler ( ) nebulizer ( ) other
3. **Time** Medication is to be given **AT SCHOOL:** ( ) with lunch ( ) other \_\_\_\_\_
4. **Start** Date: \_\_\_\_\_ **Stop** date: \_\_\_\_\_, ( ) end of school year, ( ) until further notice  
from parent or M.D.
5. **Restrictions** and/or **side effects:** \_\_\_\_\_ ( ) non anticipated
6. **For student's with more than once daily dosing:** If the morning dose usually taken at home is missed, this dose may be administered at school by school personnel. **PARENT/GUARDIAN is required to notify school of missed dose at home.**

For Insulin, Epi-pens, inhalers, & nebulizers: I have assessed this student and found him/her to be both capable and responsible for **SELF-ADMINISTERING/SELF CARRYING** this medication (school district is not responsible for missed doses of medication):  
( ) not applicable, ( ) no, ( ) yes, with supervision, ( ) yes, unsupervised – may carry on person during \_\_\_\_\_  
school hours.

\_\_\_\_\_  
**Physician's Signature** (for ALL prescription medications) **Date**

\*a photocopy of the prescription is acceptable in place of physician's signature unless the student is going to self-administer/ self-carry the medication.

I authorize school personnel to set-up and administer the above medication to my child (unless self-administration/self-carry has been indicated). I understand that the medication **must be provided in a pharmacy or unopened manufacturer's labeled bottle.** Medication in plastic bags or white envelopes **WILL NOT** be accepted.

**I give my permission for my child's medical office to fax this form to my child's school.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date