ADMINISTRATION OF MEDICATION TO STUDENTS

The Board discourages the administration of medication to students during the school day when other options exist, but recognizes that in some instances it may be necessary for a student to have medication administered to him/her while the student is in attendance at school. The school will not deny educational opportunities to students requiring the administration of medication in order to remain in attendance and participate in the educational program.

The intent of this policy is to promote the safe administration of medications to students by school personnel and to provide for authorization of student emergency self-administration of medication from asthma inhalers and epinephrine autoinjectors.

This policy does not apply to medical marijuana, which is addressed in the Board's policy JLCDA, Medical Marijuana in Schools.

This policy authorizes the adoption of a "collaborative practice agreement" for the purposes of stocking and administration of epinephrine autoinjectors by the school nurse or designated trained school personnel to any student during school or a school-sponsored activity under emergency circumstances involving anaphylaxis.

It also authorizes the adoption of a "collaborative practice agreement" to provide for the possession and administration of naloxone hydrochloride by the school nurse or designated trained school personnel to students, staff, or visitors during school or a school-sponsored activity or otherwise on school grounds in emergency circumstances involving an opioid overdose or apparent opioid overdose.

The Board encourages collaboration between parents/guardians and the schools in matters involving student medication.

The Board disclaims any and all responsibility for the diagnosis, prescription of treatment, and administration of medication for any student, and for any injury arising from a student's self-administration of medication.

DEFINITIONS

"Administration" means the provision of prescribed medication to a student or other persons according to the orders of a health care provider.

"Collaborative practice agreement" means a written and signed agreement between a physician licensed in Maine or a school health advisor, as defined in 20-A MRSA §6402-A, and a school nurse that provides for the prescription of epinephrine autoinjectors by the physician or school health advisor and administration of epinephrine injectors by the school nurse or designated

school personnel to students during school or a school-sponsored activity under emergency circumstances involving anaphylaxis; or as defined in 20-A MRSA § 6307 that provides for the prescription of naloxone by the physician or school health advisor and the administration of naloxone by the school nurse or designated school personnel to students, staff, or visitors during school or a school-sponsored activity or otherwise on school grounds under emergency circumstances involving an opioid overdose or apparent opioid overdose.

"Designated school personnel" are unlicensed school personnel who have completed such training in administration of medication as may be required by Maine statutes or DOE rules and who have been authorized by the school nurse to administer medication.

"Health care provider" means a medical/health practitioner who has a current license in the State of Maine with a scope of practice that includes prescribing medication.

"Indirect supervision" means the supervision of an unlicensed school staff member when the school nurse or other health care provider is not physically available on site but immediately available by telephone.

"Medication" means prescribed drugs and medical devices that are controlled by the U.S. Food and Drug Administration and are ordered by a health care provider. It includes over-the-counter medications prescribed through a standing order by the school physician or prescribed by the student's health care provider. For the purpose of this policy, "medication" includes epinephrine and naloxone hydrochloride, but does not include medical marijuana.

"Parent" means a natural or adoptive parent, a guardian, or a person acting as a parent of a child with legal responsibility for the child's welfare.

"School nurse" means a registered professional nurse with Maine Department of Education certification for school nursing.

"Self-administration" is when the student administers medication independently to him/herself under indirect supervision of the school nurse.

"Unlicensed school personnel" are persons who do not have a professional license that allows them, within the scope of that license, to administer medication.

ADMINISTRATION OF MEDICATION BY SCHOOL PERSONNEL

A. Parental Request

In the event that no reasonable alternative exists, the parent/guardian may request in writing that medication be administered to the student during the school day. The written request must include an acknowledgement and agreement that unlicensed personnel may administer the medication as per the health care provider's instructions. In addition, the

request shall indicate that information regarding the student's medication may be shared with appropriate school personnel. Parents may provide the reason (diagnosis) requiring the administration of medication.

Requests shall be valid for the current school year only.

B. Health Care Provider's Order

All parental requests must be accompanied by a written order from the student's health care provider substantiating the fact that the administration of a particular medication during the school day is necessary for the student's health and attendance in school. Such order must include:

1. The student's name;
2. The name of the medication;
3. The dose;
4. The route of administration (e.g., tablets, liquid, drops); and
5. Time intervals for administration (e.g., every four hours, before meals):
6. Any special instructions; and
7. The name of the prescribing health care provider.

It is the responsibility of the school nurse to clarify any medication order that he/she believes to be inappropriate or ambiguous. In accordance with Department of Education Rule Chapter 40 § 2(B), the school nurse may decline to administer medication if he/she believes such administration would jeopardize student safety. In this case, the school nurse must notify the parent, the student's health care provider and the school administrator (i.e., building principal or designated administrator).

C. Renewal of Parent Permission Requests/Forms and Health Care Provider Orders

Written parental permission requests/forms and health care provider orders must be renewed at least annually. Health care provider orders must be renewed whenever there are changes in the order.

D. Delivery and Storage of Medication

The student's parents shall deliver any medication to be administered by school personnel to the school in its original container and properly labelled. In the event that this is not practical, the parent must contact the school to make alternate arrangements.

No more than a 20-day (one month) supply of medication shall be kept at school, excluding inhalers and epinephrine autoinjectors. The parent is responsible for the replenishment of medication kept at school.

If the health care provider's order/prescription is for a medication regulated by Schedule II of the Controlled Substances Act (21 USC §812) (e.g., Ritalin and Adderall) no more than a 20-day supply shall be kept at school.

The parent is responsible for notifying the school of any changes in or discontinuation of a prescribed medication that is being administered to the student at school. The parent must remove any medication no longer required or that remains at the end of the school year.

Designated personnel, preferably the school nurse, shall be responsible for developing and implementing procedures for the appropriate and secure storage of medications kept at school, and all medications shall be stored in accordance with this procedure.

E. Recordkeeping

School personnel and the student's parents shall account for all medication brought to school. The number of capsules, pills or tablets, and/or the volume of other medications brought to school shall be recorded.

School staff administering medication shall document each instance the medication is administered including the date, time, and dosage given.

Designated personnel, preferably the school nurse, shall maintain a record including the parent's request, physician's order, details of the specific medications (including dosage and timing of medication), and documentation of each instance the medication is administered.

Records shall be retained according to the current State schedules pertaining to student health records.

F. Confidentiality

To the extent legally permissible, staff members may be provided with such information regarding medication and its administration as may be in the best interest of the student.

G. Administration of Medication

Medication may be administered during the school day by licensed medical personnel acting within the scope of their licenses.

The school nurse, under the administrative supervision of the Superintendent, will provide direction and oversight for the administration of medication to students.

All unlicensed personnel (principals, teachers, education technicians, school secretaries, coaches, bus drivers, etc.) who administer medication must receive training before being authorized to do so.

Based upon the documentation of training and competency in the administration of medication, the school nurse will make recommendations to the Superintendent/designee pertaining to authorization of unlicensed persons to administer medication. Training that shall be acceptable for the purpose of authorization of unlicensed personnel is addressed under the section of this policy titled "Required Training of Unlicensed Personnel to Administer Medication."

H. Administration of Medication During Off-Campus Field Trips and School-Sponsored Events

The school will accommodate students requiring administration of medication during field trips or school-sponsored events as follows:

The school nurse, principal, and, as appropriate, the school unit's Section 504 Coordinator and/or IEP, will determine whether an individual student's participation is contraindicated due to the unstable/fragile nature of his/her health condition, the distance from emergency care that may be required, and/or other extraordinary circumstances. The student's parent and primary care provider will be consulted in making this determination. The decision will be made in compliance with applicable laws, including the IDEA, § 504 and the Americans with Disabilities Act (ADA).

I. Student Self-Administration of Asthma Inhalers and Epinephrine Autoinjectors

Students with allergies or asthma may be authorized by the building principal, in consultation with the school nurse, to possess and self-administer emergency medication from an epinephrine autoinjector or asthma inhaler during the school day, during field trips, school-sponsored events, or while on a school bus. The student shall be authorized to possess and self-administer medication from an epinephrine autoinjector or asthma inhaler if the following conditions have been met.

1. The parent (or student, if 18 years of age or older) must request in writing authorization for the student to self-administer medication from an epinephrine autoinjector or asthma inhaler.
2. The student must have the prior written approval of his/her primary health care provider and, if the student is under the age of 18, the prior written approval of his/her parent/guardian. The written notice from the student's primary care provider must specify the name and dosage of the medication, frequency with which it may be administered, and the circumstances that may warrant its use.
3. The student's parent/guardian must submit written verification to the school from the student's primary care provider confirming that the student has the knowledge and the skills to safely possess and use an epinephrine autoinjector or asthma inhaler.
4. The school nurse shall evaluate the student's technique to ensure proper and effective use of an epinephrine autoinjector or asthma inhaler taking into account the maturity and capability of the student and the circumstances under which the student will or may have to self-administer the medication.
5. The parent will be informed that the school cannot accurately monitor the frequency and appropriateness of use when the student self-administers medication, and that the school unit will not be responsible for any injury arising from the student's self-medication.

A student's authorization to possess and self-administer medication from an epinephrine autoinjector or asthma inhaler may be limited or revoked by the building principal after consultation with the school nurse and the student's parents if the student demonstrates inability to responsibly possess and self-administer such medication.

To the extent legally permissible, staff members may be provided with such information regarding the student's medication and the student's self- administration as may be in the best interest of the student.

Sharing, borrowing, or distribution of medication is prohibited. The student's authorization to self-administer medication may be revoked and the student may be subject to disciplinary consequences for violation of this policy.

J. Dispensation of Over-the-Counter Medications

With prior written parent permission, students may receive certain over-the-counter medications at school, e.g., Tylenol, Ibuprofen, Tums, cough drops, etc. pursuant to a standing order from the school physician/school health advisor.

K. Required Training of Unlicensed Personnel to Administer Medication

Unlicensed school personnel who administer medication to students in a school setting (at school, on school transportation to or from school, on field trips, or during school-sponsored events) must be trained in the administration of medication before being authorized to carry out this responsibility. Such training must be provided by a registered professional nurse or physician and include the components specified in Department of Education Rules Chapter 40 and other applicable Department of Education standards, recommendations, programs, and/or methodologies.

The trainer shall document the training and competency of unlicensed school personnel to administer medication. Based upon a review of the documentation of training and competency in the administration of medication, the school nurse will make recommendations to the Superintendent/designee pertaining to authorization of such unlicensed personnel pertaining to authorization to administer medication.

Following the initial training, a training review and information update must be held at least annually for those unlicensed school personnel authorized to administer medication.

L. Delegation and Implementation

The Superintendent/designee shall be responsible for developing administrative procedures and/or protocols to implement or supplement this policy.

Such procedures/protocols shall include direction regarding:

1. Safe transport of medication to and from school;
2. Administration of medication during field trips and school-sponsored events;
3. Accountability for medications, particularly those regulated by Schedule II of the Controlled Substances Act;
4. Proper storage of medication at school;
5. Training of appropriate staff on administration of emergency medications including the standards for the signs and symptoms of anaphylaxis and the use of epinephrine autoinjectors for previously unknown severe allergies;
6. The procedure to follow in the event of a medication reaction;
7. Access to medications in case of a disaster;
8. The process for documenting medications given and medication errors; and

9. The proper disposal of medications not retrieved by parents.

Legal Reference: 20-A M.R.S.A. §§ 254(5); 4009(4); 4502 (5)(N); 6305

Me. Dept. of Ed. Rule Ch. 40 (2016)

21 USC §801 et. seq. (Controlled Substances Act)

28 C.F.R. Part 35 (Americans with Disabilities Act of 1990)

34 C.F.R. Part 104 (Section 504 of the Rehabilitation Act of 1973)

34 C.F.R. Part 300 (Individuals with Disabilities Education Act)

Cross Reference: JLCD-E - Medication Administration on School Field Trips

(Me. DOE) JLCDA - Medical Marijuana in Schools

DATE ADOPTED: OCTOBER 6th, 2026

TO REPLACE POLICY JLCD, November 02, 2005