

ADMINISTERING MEDICINES TO STUDENTS

For the purposes of this policy, “parent/parent(s)” means parent(s), regardless of divorce or separation; a legal guardian; or individual acting as a parent or guardian, unless there is evidence of a state law or court order governing such matters as divorce, separation or custody or a legally binding instrument that specifically revokes such rights.

It is in the best interest of students for parents to directly supervise the administration of medication to their children. To this end, parents should prepare to administer their child’s medication at all times, even at school during the school day. It is the general policy of the Beals School Department to discourage parents from requesting that school personnel administer medication to a student when they, the parents, cannot be present to administer the medication themselves. With few exceptions, school employees are not trained medical or nursing personnel and are not licensed to dispense medication on a regular basis.

In recognition of the “real world” practical constraints on medical and nursing personnel in schools and the need for some children to have medication administered during the school day, Maine law allows non-licensed personnel to administer medication to school children. Such medication can be administered by non-licensed personnel only “by written prescription of a physician or dentist or by the written permission of the parent or guardian or the individual receiving the medication.” Thus, teachers and other non-licensed staff persons (who are neither doctors nor nurses) can administer medication in certain situations.

Whenever possible, the schedule of drug administration should be altered to allow a student to receive all prescribed doses at home. However, when the parent cannot arrange any other plan, and when medication during the day is necessary, it may be administered in accordance with the following policy. All medication that will be self-administered and administered by school personnel must follow the Base Protocol for Medication outlined in this policy.

Because of the potential dangers to children from the careless handling of medication or improper dosages due to miscommunication of instructions, school personnel (including school nurses) must handle medications with extreme caution. This section includes some guidelines for school policies on dispensing medication to students and provides for the authorization of student emergency self-administration of medication from asthma inhalers and epinephrine pens. Forms for implementing policy JLCD are contained in policies JLCD-E, JLCD-E1, JLCD-E2, JLCD-E3, and JLCD-E4.

Base Protocol for Medication

Any time medication is to be taken or administered at school, the following conditions must be met:

- A. Medication will be sent to school in a clearly labeled container, preferably the original prescription bottle, with the name of the child and the medication on it.

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- B. Written instructions signed by the family physician will be required and will include:
1. Name of child;
 2. Name of medication;
 3. Reason for medication;
 4. Dosage;
 5. Specific area or application if medication is of a topical nature;
 6. Time to be administered;
 7. Possible side-effects, if known, and action to be taken; and
 8. Termination date for administering the medication (not to exceed the school year).
 9. A certification by the physician that the medication is necessary to the child's health and must be taken during school hours.
- C. The parents provide a signed request form, certifying that they are not available during school hours to dispense this medication (and an informed consent form where medication is to be administered by school personnel).
- D. For long-term situations, the medication certification and request to dispense expires at the end of each school year, unless terminated earlier by either the family physician or the parents. The certification and request can be renewed each year.
- E. The student should not transport more than one day's supply of medication at a time. School personnel and the student's parent 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.
- F. The parents will assume the responsibility for informing the school in writing of any change in the child's health or change in medication.
- G. The responsibility for seeing a physician on a regular basis and following the physician's instructions rests with the parents. Failure to comply with the recommended protocol will be grounds for the school to discontinue the administration of the medication in question.
- H. The Beals School Department retains the discretion to reject any or all requests for the administration of medication.
- I. A copy of this policy and any required forms will be provided to parents who request the administration of medication in school.

The school nurse (or the principal's designee if school nurse is not available) will:

- A. Inform the appropriate school personnel of medication.

- B. Inform parents of any difficulty with the medication or circumstances which were responsible for the child's not receiving the medication.
- C. See that the medication is kept in a place inaccessible to other students.
- D. Encourage the child to take medication with water from a paper cup rather than from a drinking fountain.
- E. Observe the child as he/she takes the medication.
- F. Keep a record of the administration of medication on a designated log.
- G. In exceptional cases, where a student is considered by the parents to be sufficiently responsible, he/she may be given special permission to carry one (1) dose of his/her medication on his/her person and to take it him/herself when necessary. This action will still require a written request from a physician and a request from parents.

Self-Administered Medication

Students who have a valid medical need for medication at school will be required to self-administer the medication under the supervision of school personnel, if the following conditions are met:

- A. The child is, in the parents' opinion, physically and mentally capable of assuming that responsibility and has been adequately instructed at home.
- B. Neither parent is available during school hours to administer the medication.
- C. The parent has signed a consent form.
- D. The medication is necessary to the child's health and must be taken during school hours.
- E. Supervision will be by the school nurse, where available, or a designated member of the staff when there is no nurse available.

Self-administered medications will fall into two (2) categories:

1. Medication prescribed for a short time (5 days or less) for an acute condition (ear or throat infection, congestion, cough, etc.). A student will be in a non-contagious phase of that condition and will return to school only upon the advice of the family physician.
2. Medication prescribed for chronic or permanent condition (behavioral disorder,

convulsive disorder, asthma, cystic fibrosis, diabetes, severe headache, ulcers, heart or kidney condition, etc.)

Medication Administered by School Personnel

In the case of a child too young or otherwise unable to self-administer a vital medication, and when the parent is unavailable, the principal will review the circumstances with the parent to determine whether a non-medical school employee may administer the medication.

- A. In such situations, the parents will sign an informed consent form acknowledging that they are aware that non-medical personnel (or unlicensed) personnel will be administering the medication.
- B. All other requirements of the bare protocol will be implemented.

Medications in Emergencies

In the case of students prone to suffer an acute and life threatening allergic reaction:

- A. Appropriate school personnel will be made aware of the student's condition.
- B. Medication as provided by the parent will be kept in a pre-determined place at that school and all personnel involved with the child will know its location.
- C. A clear emergency procedure will be outlined on the child's health record. All teachers will be informed of the procedure.
- D. At least two staff members at that school will be instructed in the administration of said medication.
- E. The student will be required to wear a medic-alert emblem indicating his/her condition.

Student Self-Administration of Asthma Inhalers and Epinephrine Pens

Students with allergies or asthma may be authorized by the building principal to possess and self-administer emergency medication from an epinephrine pen (EpiPen) 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 pen or asthma inhaler if the following conditions have been met.

- A. 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 pen or asthma inhaler.

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- B. 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.
- C. 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 pen or asthma inhaler.
- D. 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.

Authorization granted to a student to possess and self-administer medication from an epinephrine pen or asthma inhaler shall be valid for the current school year only and must be renewed annually.

A student's authorization to possess and self-administer medication from an epinephrine pen or asthma inhaler may be limited or revoked by the building principal after consultation with 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.

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. 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.

Consent for Independent Students

Students who are 18 years of age and no longer living with their parents must follow the same protocol as given above for the administration of prescription medication. To receive their non-prescription medication (such as aspirin, Tylenol, Advil, etc.) they must sign a log sheet which will be available in the office indicating what medication is to be administered and the reason for which it is given.

Legal Reference: 20-A M.R.S.A. §§ 254; 4009(4)
 Ch. 40 (Me. Dep't. of Educ. Rule)
 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)

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