516 STUDENT MEDICATION

Adopted: August 20, 2009, Revised May 8, 2014

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

CRSS acknowledges that some students may require prescribed drugs or medication during the school day. CRSS's Health Aide, Office Manager, Administrative Assistant, Executive Director, or teacher will administer prescribed medications in accordance with law and CRSS procedures.

III. REQUIREMENTS

- A. The administration of prescription medication or drugs at school requires a completed form signed by the student's parent and physician.
- B. A "Medication Administration Authorization" form must be completed annually (once per school year) and/or when a change in the prescription or requirements for administration occurs.
- 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 Health Aide 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 CRSS 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 CRSS 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 Medication Administration Authorization form 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 /Health Aide or other designated person, shall be responsible for the filing of the Medication Administration Authorization form in the medication file cabinet. The Health Aide 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 CRSS under Minn. Stat. § 121A.21). CRSS 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. CRSS has received a complete Medication Administration Authorization from 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 a complete Medication Administration Authorization form for the student to self-administer the medication each school year.

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.

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- 7. 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 nonsyringe injectors of epinephrine that enables the student to:
 - a. possess nonsyringe injectors of epinephrine; or
 - b. if the parent and prescribing medical professional determine the student is unable to possess the epinephrine, have immediate access to nonsyringe injectors of epinephrine 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 nonsyringe injectors of epinephrine when required, consistent with state law. This health plan may be included in a student's § 504 plan.

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

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 Nonsyringe

Injectors of Epinephrine; Model Policy)

Minn. Stat. § 151.212 (Label of Prescription Drug Containers)

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)