



# District Policy 2320

## Medication Policy for Students

*Health/Safety/Welfare Washington County School District-Adopted 9-9-03; revised 10-12-04; Revised 8-14-18*

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### 1. Purpose:

To establish policy and procedures in coordination with the Guidelines on Medication Administration for School Personnel provided by the Utah Department of Health for the safe administration of medication to students and provisions for students who may self-administer medication during school hours in accordance with Utah Code 53G-9-203, 208; 53G-9-203; UCA 26-41-101-107; UCA 26-55-101; R156-31b.

### 2. Policy:

Administration of medication to a student while they are at school should be a rare occurrence. Whenever possible the parent/guardian should administer medication to their child while at home. The school nurse is responsible for training the school staff regarding the medication policy, procedures, and administration. However, it is always the parent's responsibility to administer the first dose of a new medication, or a change in dosage, to the student while at home.

#### 2.1. Requests:

A parent and a health care professional, i.e.: physician, dentist, nurse practitioner, physician's assistant, or mental health therapist, request to dispense medication during school hours to a student will be considered on a case-by-case basis.

2.1.1. Washington County School District has the right to refuse a request for medication administration; or to withdraw the request to administer medication at any time following notice to the parent/guardian.

2.1.2. The District does not consider requests to administer "natural remedies," herbs, vitamins, dietary supplements, homeopathic medicines, "enhancement" pills, and/or medications from other countries.

2.1.3. Upon request authorized personnel will provide the parent/guardian with the following: Washington County School District Policy 2320; Medication Administration Authorization Form(s) as per the student's diagnosis(es) and in accordance with the Utah Department of Health; and Permission to Release Health Records to Washington County School District.

2.1.3.1. It is the responsibility of the parent/guardian to ensure that the required medication authorization forms are completed and updated on an annual basis. The authorization form must be done with the student's health care provider. All information on the approved form must be fully completed, including: date/time, name of medication, dosage, method of administration, statement of necessity, and the signature of the student's health care provider.

2.1.4. Requests for Seizure Rescue Medication: A seizure rescue authorization also requires that a student's Section 504 accommodation plan document the following:

- Health care professional has prescribed a seizure rescue medication for the student (which does not include a medication administered intravenously or intramuscularly);
- Parent/guardian has previously administered the student's seizure rescue medication in a non-medically-supervised setting without a complication;
- Student has previously ceased having full body prolonged or convulsive seizure activity as a result of receiving the seizure rescue medication;
- Description of the specific seizure rescue medication authorized for the student, including the indicated dose, and instructions for administration;
- Parent request that the student's public school identify and train school employees who are willing to volunteer to receive training to administer a seizure rescue medication;
- Authorization that volunteer trained school employee(s) will administer a seizure rescue.

2.1.5. Any changes in medications void the original request, and the process must be started over again as above.

## 2.2. Training of Volunteer School Employee:

The Nurse Practice Act permits a registered school nurse to train employees who will be delegated the task of administering routine medication(s). However, a licensed nurse may not delegate to an unlicensed person the administration of any medication with known, frequent side effects that can be life threatening; or that requires the student's vital signs or oxygen saturation to be monitored before, during or after administration of the drug; or that requires nursing assessment or judgement prior to or immediately after administration.

2.2.1. Within a reasonable time after receiving a Medication Authorization Form, the school shall identify and train two or more school personnel in the administration of medication. This training must be done annually by a District nurse and shall include:

- Education in recognition of the signs and symptoms that warrant administration for non-scheduled medication (such as: glucagon, insulin, epinephrine, etc.)

- Administration, including dosages which may occur during a school activity
- Standards and procedures for medication storage
- Emergency procedures in accordance to consultation with the parent/guardian and health care professionals
- A demonstration of competency

2.2.2. Medication cannot be administered by personnel until they have received the required training and have verified such by signing a Medication Administration Training and Delegation form. This form must be retained by the school nurse as record.

2.2.3. All delegated tasks, including medication administration, shall be identified within the student's healthcare plan.

2.2.4. School authorized personnel who provide or receive training and act in good faith are not liable in any civil or criminal action for any act taken or not taken. The authorized personnel cannot be held liable for adverse reactions suffered by the student after administering the medication as prescribed; nor can be held liable for being unable to administer the medication when:

- There are discrepancies between parent and health care provider authorizations; pharmaceutical supplies and/or receptacles;
- The parent fails to bring in needed medication;
- The parent requests to stop the medication for miscellaneous reasons;
- The parent make a change in the regime without the proper steps to do so.

Note: If a student refuses medication, or any of the above applies, a conference with the parent should be arranged to discuss strategies in order to give the prescribed and authorized medication.

### 2.3. Medication Storage, Safety and Security:

The medication must be delivered to the school by the parent/guardian in the original pharmacy-labeled, or manufacturer's container if over-the-counter, where it will be counted, recorded, and placed in a cool, dry, locked unit for safe keeping. For medication that requires refrigeration, a lockbox may be placed within the refrigerator. Medications that have been prescribed to be self-administered will be kept with the child.

2.3.1. Insulin or emergency medications, such as: epinephrine auto-injectors, asthma inhalers and glucagon, must not be stored in a locked area in order to be readily available when needed.

2.3.2. A daily medication log for each student receiving medication which documents each dose, date, time given and signature or initials of the person giving the medication must be maintained as a part of the permanent health record.

2.3.3. If an error occurs or problems are encountered in medication administration, an Incident Report shall be filled out by the authorized personnel, reported to the principal, the parent, the prescribing health care provider when needed, and directed to the school nurse.

2.3.4. It is the parents/guardian's responsibility to pick up any unused medication at the end of the school year or upon ceasing the medication.

#### 2.4. Student Self-Administration of Medication at School:

Washington County School District will allow a student to keep medication in his/her possession and to self-administer non-narcotic medications. The following criteria must be met:

2.4.1. Consideration for self-administration of prescription or non-prescription asthma inhalers, diabetes medication, or epinephrine auto-injectors may be made. The parent/guardian must sign a statement and a Medication Self-Administration Authorization form must be fully completed and must contain the name of the medication prescribed or authorized for the student's use. The form must acknowledge: that it is medically appropriate for the student to carry and self-administer; that the student is capable of, and responsible for, self-administering and having the medication in his/her possession at all times, or that the student may make arrangements with the school to store the medication.

2.4.2. For secondary students only (grades 6-12): Consideration will be given to allow the students to carry/self-administer one dose of an easily identified prescription medication, or non-prescription over-the-counter medication, with the exception of syrups (typically used to treat coughs or colds). A signed statement from the parent authorizing their child to carry and self-administer must be submitted to the principal, or designee. The statement must: contain the name of the medication prescribed or authorized for the student's use; acknowledge that it is medically appropriate for the student to self-administer; that the student is responsible for, and capable of, self-administering and having the medication in his/her possession at all times or may make arrangements with the school to store the medication. (A Medication Administration Authorization form is not necessary)

2.4.3. A student shall be permitted to possess and self-apply, or have assistance applying, FDA approved sunscreen without a parent's or health care professional's authorization form.

2.4.4. No student is permitted to sell, share, or otherwise give to others any medication, prescription or non-prescription. Violations of this policy are subject to disciplinary action under the School District's Safe School Policy. Exceptions could be made for life-threatening situations.

#### 2.5. Additional Medications which may be maintained at the School:

The District may obtain standing orders from the District's consulting physician who may authorize the administration of specific over-the-counter medications such as acetaminophen, ibuprofen, topical ointments, and emergency medications, such as naloxone and epinephrine.

2.5.1. Parents/guardians may then request non-prescription drugs such as acetaminophen or ibuprofen be dispensed by school personnel to the student. School personnel must receive parental consent by phone call EACH TIME a student requests routine over the counter medications.

2.6. School personnel may provide information and observations to a student's parent/guardian about that student, including observations and concerns in various areas including health and wellness; however, school personnel may not recommend to a parent/guardian that a child take or continue to take a psychotropic medication; require that a student take or continue to take a psychotropic medication as a condition for attending school; recommend that a parent/guardian seek or use a type of psychiatric or psychological treatment.