

516 - STUDENT MEDICATION

I. PURPOSE

The purpose of this policy is to set forth the provisions that must be followed when administering non-emergency prescription medication and nonprescription medication to students at school.

II. GENERAL STATEMENT OF POLICY

The education district acknowledges that some students may require prescribed drugs or medication during the school day. The education district's licensed school nurse, principal, program coordinator, unlicensed assistive personnel (UAPs) or teacher will administer prescribed medications, except any form of medical cannabis, in accordance with law and education district procedures.

III. REQUIREMENTS

- A. The administration of prescription 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 education district may rely on an oral request until a written request is received.
- B. The administration of any medication or drugs at school requires completion of a Medication Authorization on an annual basis (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. All medication must be brought to school by the parent/guardian in the original container. Prescription medication must be 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. Mixed dosages in a single container will not be accepted for use at school (for example 5 mg and 10 mg tablets in the same bottle).
- D. The licensed school nurse may request to receive further information about a 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 education district personnel.

There are two 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 education district and the parent/guardian and physician. An Emergency Care Plan (ECP), Medication Authorization, or Individual Health Plan (IHP) must be completed on an annual basis (once per school year) for self-administration of these medication.

- F. The school must be notified immediately by the parent or student 18 years old or older and the physician of any change in the student's prescription medication administration. A new medical authorization and container labeled 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, ECP, or IHP.
- H. The licensed school nurse, or other designated person, shall be responsible for the filing of all authorization forms in the health records section of the student file. The licensed school nurse, or other designated person, shall be responsible for providing a copy of such forms to the program coordinator 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 licensed school nurse, or a public or private health organization or other appropriate party (if appropriately contracted by the education district under Minn. Stat. § 121A.21).
- 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 education district has received a written authorization from the pupil's parent/guardian and physician 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/guardian and physician 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.

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 that are not governed under this policy include the following:
 - a. medications that are used off school grounds;
 - b. medications that are used in connection with athletics or extracurricular activities; or
 - c. medications that are used in connection with activities that occur before or after the regular school day.
- 7. Non-prescription medications. The district must receive a Medication Authorization Form signed by the parent/guardian in order to administer any over the counter medication. The medication must be used in a manner consistent with its labeling. Medication must be provided in its original, unopened container. This authorization must be renewed each school year. This provision does not apply to the 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 located in the health office. The plan must designate the school staff responsible for implementing the student’s health plan, including recognizing anaphylaxis and administering non-syringe injectors of epinephrine when required, consistent with state law. This health plan may be included in the students 504 plan.

- K. “Parent” for students 18 years old or older is the student. An emancipated student is also a “parent”.

- 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 according with this section is not the practice of medicine. A district or school may enter into arrangements with manufactures 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.