

Lakeland Board of Education

Monitoring: Review: Annually, in April	Descriptor Term: Medicines	Descriptor Code: 6.405	Issued Date: 05/01/17
		Rescinds: 6.405	Issued: 07/13/15

1 If under exceptional circumstances a child is required to take non-prescription or prescription
2 medication during school hours and the parent cannot be at school to administer the medication, only
3 the principal or the principal's designee will assist in self-administration of the medication if the
4 student is competent to self-administer medicine with assistance in compliance with the following
5 regulations: ¹

6 Written instructions signed by the parent will be required and will include:

- 7 1. Child's name;
- 8 2. Name of medication;
- 9 3. Name of physician;
- 10 4. Time to be self-administered;
- 11 5. Dosage and directions for self-administration (non-prescription medicines must have label
12 direction);
- 13 6. Possible side effects, if known; and
- 14 7. Termination date for self-administration of the medication.

15 The medication must be delivered to the principal's office in person by the parent or guardian of the
16 student unless the medication must be retained by the student for immediate self-administration. (i.e.
17 students with asthma)

18 Volunteer personnel, trained by a Registered Nurse, may administer glucagon, anti-seizure medication,
19 asthma inhalers, and epinephrine in emergency situations to a student based on that student's Individual
20 Health Plan (IHP). If a Registered Nurse is able to reach the student within the time limit for
21 registration as specified by the IHP, then the nurse shall administer the aforementioned medication.

22 The administrator/designee will:

- 23 1. Inform appropriate school personnel of the medication to be self-administered;
- 24 2. Keep written instructions from parent in student's record;
- 25 3. Keep an accurate record of the self-administration of the medication;
- 26 4. Keep all medication in a locked cabinet except medication retained by a student per physician's
27 order;
- 28 5. Return unused prescription to the parent or guardian only; and

1 6. Ensure that all guidelines developed by the Department of Health and the Department of
2 Education are followed.

3 The parent or guardian is responsible for informing the designated official of any change in the
4 student's health or change in medication.

5 A copy of this policy shall be provided to a parent or guardian upon receipt of a request for long-term
6 administration of medication.

7 **ADMINISTRATION OF ANTI-SEIZURE MEDICATION**

8 Prior to administration of an anti-seizure medication to a student by volunteer school personnel or a
9 school nurse in an emergency situation, the student's parent or guardian shall provide:

- 10 1. The school with a written authorization to administer the medication at school in an IHP
- 11 2. A written statement from the student's health care practitioner, which includes:
 - 12 a. Student's name and date of birth;
 - 13 b. Medication name and the purpose of the medication;
 - 14 c. The dosage;
 - 15 d. The route of administration;
 - 16 e. The frequency of administration;
 - 17 f. The circumstances under which the medication may be administered
- 18 3. Unexpired, prescribed medication to the school in its unopened, sealed package, with an intact
19 label affixed by the pharmacy.

20 Authorization shall be for the entire school year, unless rescinded by the physician in writing.
21 Renewals are required annually.

22 The school nurse or designee shall monitor the monthly expiration date for each anti-seizure
23 medication in possession of the school. One (1) month prior to the expiration of each medication, the
24 school nurse or designee shall inform the student's parent or guardian of the expiration rate.

25 A student's parent or guardian who has given the school written authorization to administer anti-
26 seizure medication shall, in accordance with student's IHP, notify the Principal or school nurse if anti-
27 seizure medication or prescription medication or over-the-counter medicines are administered at a time
28 which the student is not present at school. The student's IHP shall set forth with specificity the
29 requirements of reporting administration of medication and for the dissemination of such information
30 to the Principal, school nurse, or volunteer school personnel trained to administer anti-seizure
31 medication. The notification shall be given after administration of medication before or at the
32 beginning of the next school day in which the student is present.

1 **Metered-Dose Inhalers**

2 Students with a diagnosis of asthma may possess and self-administer prescribed, metered dosages of an
3 asthma-reliever inhaler provided that the parent/guardian:

- 4 1. Provides to the school Principal written authorization for the student to possess and self-
5 administer the inhaler; and
6
- 7 2. Provides the Principal with a written statement from the student's health care practitioner
8 stating that the student suffers from asthma and has been instructed in self-administration of the
9 prescribed, metered dosage inhaler. The statement from the health care practitioner must also
10 contain:
 - 11 a. The name and purpose of the medication;
 - 12 b. The prescribed dosage;
 - 13 c. The time or times the prescribed inhaler is to be administered, as well as any additional
14 circumstances under which the inhaler is to be administered; and
 - 15 d. The length of time for which the inhaler is prescribed.

16 LSS employees and agents of LSS shall incur no liability as a result of any injury sustained by the
17 student or any other person from the possession or self-administration of the inhaler. The student's
18 parent/guardian shall sign a statement acknowledging that the school shall incur no liability and the
19 parent/guardian shall indemnify and hold harmless the school and its employees against any claims
20 relating to the possession or self-administration of the inhaler.

21 The parent/guardian permission for self-administration of the prescribed, metered dosage inhaler shall
22 be effective for the school year in which it is originally granted and must be renewed annually.

23 The Principal may suspend or revoke the student's possession and self-administration privilege if the
24 student misuses the inhaler or makes the inhaler available for usage by another person.

25 **BLOOD GLUCOSE SELF-CHECKS**

26 Upon written request of a parent or guardian, and if included in the student's medical management plan
27 and in the IHP, a student with diabetes shall be permitted to perform a blood glucose check or
28 administer insulin using any necessary diabetes monitoring and treatment supplies, including sharps.
29 The student shall be permitted to perform the testing in any area of the school or school grounds at any
30 time necessary as ordered by their health practitioner.

31 Sharps shall be stored in a secure, but accessible location, including the student's person, until use of
32 such sharps is appropriate.

33 Use and disposal of sharps shall be in compliance with the guidelines set forth by the Tennessee
34 Occupational Safety and Health Administration (TOSHA).²

1 In addition to adhering to the requirements of the IHP for the care of students with diabetes, the district
2 shall:

- 3 1. Acquire necessary parent requests and instructions for treatment;
- 4
- 5 2. Acquire monitoring and treatment orders from medical practitioner prescribing within their
6 scope of practice;
- 7
- 8 3. The school nurse will assess competency and independent skill in blood glucose monitoring
9 by the student and/or personnel providing monitoring;
- 10
- 11 4. Provide an appropriate setting for the blood glucose monitoring by the student or designee,
12 which may be in the school clinic. This monitoring area shall be determined by the
13 Principal, School Nurse, student, aren't/guardian and student's health practitioner. This
14 area must be private, and equipped to dispose of lancets and syringes;
- 15
- 16 5. Permit students with diabetes unrestricted access to necessary food, water, and bathroom
17 facilities that is on schedule, and as needed on an individual basis;
- 18
- 19 6. Meals and snacks shall not be withheld from any student for disciplinary reasons and
20 accommodations may be made to provide food for diabetic students at their regularly
21 scheduled meal time when the school schedule is modified for special events;
- 22
- 23 7. Parents/guardians and healthcare providers will be provided with a schedule of the student's
24 day to facilitate timing of glucose monitoring, treatment and food consumption.

25 IHPs shall be distributed to appropriate staff based on the student's needs.

26 **EMERGENCY ALLERGY RESPONSE PLAN**

27 LSS shall develop and maintain an Emergency Allergy Response Plan that meets state guidelines for
28 managing students with life-threatening allergies. The plan shall include measures to reduce allergen
29 exposure and procedure to treat allergic reactions.

30 Parents/guardians of students diagnosed with a life-threatening allergy should notify the schools
31 immediately following the diagnosis of the allergy. An Individualized Health Plan tailored to meet the
32 needs of each student at-risk of anaphylaxis will be developed and implemented.

33 Students with anaphylaxis are entitled to possess and self-administer prescription anaphylaxis
34 medication while on school property or at school-related events, provided that:

- 35 1. The parent/guardian of the student provides to the Principal:
 - 36 a. Written authorization, signed by the parent/guardian for the student to self-
37 administer prescription anaphylaxis medication while on school property or at a
38 school-related event or activity;

- 1 b. A written statement, signed by the parent/guardian in which the parent/guardian
2 releases the School District and its employees and agents from liability for an injury
3 arising from the student's self-administration of prescription anaphylaxis medication
4 while on school property or at a school-related event or activity; and,
- 5 c. A written statement from the student's medical practitioner, that:
- 6 i. Supports a diagnosis of anaphylaxis;
- 7 ii. Identifies the food or substance to which the student is allergic;
- 8 iii. Describes any prior history of anaphylaxis, if possible;
- 9 iv. Lists any medication prescribed to treat anaphylaxis;
- 10 v. Outlines emergency treatment procedures in the event of a reaction;
- 11 vi. Lists the signs and symptoms or the reaction,
- 12 vii. Assesses the student's readiness for self-administration of prescription
13 medication; and

14 If the student misuses the anaphylaxis allergy medicine or makes the anaphylaxis allergy medicine
15 available for usage by another person the student may be subject to disciplinary action.

16 The district and its employees who act in good faith and in substantial compliance with a student's
17 Individual Health Care Plan and the instructions provided by the student's health care provider shall
18 not be criminally or civilly liable for services rendered or provided.

19 **STUDENTS WITH PANCREATIC INSUFFICIENCY OR CYSTIC FIBROSIS³**

20 Students diagnosed with pancreatic insufficiency or cystic fibrosis shall be permitted to self-manage
21 their prescribed medication in a manner directed by a licensed healthcare provider without additional
22 assistance or direction. The Superintendent shall develop procedures for the development of both an
23 Individualized Healthcare Plan (IHP) and an Emergency Care Plan (ECP) that conforms to state law
24 for every student with pancreatic insufficiency or cystic fibrosis that wishes to self-medicate.

Legal References

1. TCA 49-5-415
2. TCA 49-5-415(d)(7), Public Acts 2006,
Chapter No. 54
3. Public Acts of 2015, Chapter No. 321