

## **MEDICATION ADMINISTRATION**

### **Purpose**

Tyler County Schools understands that good health and safety are essential to student learning. The administration of medication to students during the school day should be discouraged unless absolutely necessary for the student's health. Administration of medication during the school day is essential to allow some students to attend school. This policy establishes the standards that must be followed when any medication is required to be administered during attendance at school or school related events and to provide for emergency medication administration, when necessary. An objective of this medication administration policy is to promote individual responsibility. This can be achieved by educating students and their families.

### **Application**

These regulations apply to school nurses, administrators, other authorized school employees, contracted school nurses, and contracted licensed health care providers (as specified in WV Code 18-5-22a) administering medication to students in the West Virginia public school system.

### **Definitions**

"Administration of medication" means a health care procedure, which may be performed by school personnel who are designed, qualified, trained and authorized to administer medications to students.

"Administrator's designee" means an employee (excluding the school nurse or contracted provider of nursing services) who is designated by the building administrator, is trained to administer non-prescribed medication, and agrees to administer non-prescribed medications.

"Designated qualified personnel" means an employee or contracted provider who agrees to administer medications, is authorized by the administrator, successfully completes training as defined in West Virginia Board of Education Policy 2422.7 - Standards for Basic and Specialized Health Care Procedures (126CSR25A), hereinafter Policy 2422.7, and is qualified for the delegation of the administration of prescribed medications.

"Licensed health care provider" means a medical doctor or doctor of osteopathy, podiatrist, registered nurse, practical nurse, registered nurse practitioner, physician assistant, dentist, optometrist, pharmacist or respiratory care professional licensed under Chapter Thirty of WV Code.

“Licensed prescriber” means licensed health care providers with the authority to prescribe medication.

“Long-term and Emergency Prescribed Medication” means medication ordered by a licensed prescriber that is used to treat acute and chronic health conditions including both daily and (as needed) medication.

“Medication document” means the individual medication record or medicine log used to record the administration of medication to a student.

“Non-prescribed Medication” means medication and food supplements that have been approved by the Food and Drug Administration and may be obtained over-the-counter (OTC) without a prescription from a licensed prescriber.

“Parent/Guardian Authorization Form” means a form completed and signed by parent/guardian in order to authorize medication administration to said parent’s/guardian’s child.

“Prescribed Medication” means medication with a written order signed by a licensed prescriber.

“School Nurse” is defined as a registered professional nurse, licensed by the West Virginia Board of Examiners for registered professional Nurses ( WV Code 30-7-1, et seq.), and meets the requirements for certification contained in West Virginia Board of Education Policy 5202.

“School-related event” means any curricular or co-curricular activity, as defined in West Virginia Board of Education Policy 2510, that is conducted outside of the school environment and/or instructional day.

“Self-administration” means medication administered by the student under the supervision of the school nurse, designated qualified personnel, administrator or administrator’s designee. The self-administration of prescribed medication may also include medication taken by a student in an emergency or an acute situation (e.g., rescue inhaler).

### **Authorization**

Authorized personnel include trained school nurses, other licensed health care providers, administrators, teachers, aides and secretaries as defined in WV Code 18-1-1, 18A-4-8 and 18-5-22.

## **Roles and Responsibilities**

Principal(s). The principal shall provide for appropriate, secure and safe storage and access of medications which is clean for environment for medication administration. She/he shall also provide a mechanism for safely receiving, counting and storing medications and for receiving and storing appropriate medication authorization forms. Qualified employees who meet a satisfactory level of competence for prescribed and non-prescribed as determined by the WVDE shall be selected by the appropriate medication authorization forms. The coordination of procedures for the administration of medication during school related events with classroom teachers, school nurses, parents/guardians, designated qualified personnel and administrator's designees shall also be developed by the principal.

School Nurse. The school nurse will determine if the administration of prescribed medication may be safely delegated to designated qualified personnel and contact the parent/guardian or licensed health care provider to clarify any questions about prescribed medication that is to be administered in the West Virginia public school system. The school nurse is responsible for standards of school nurse practice in relation to health appraisal, health care planning and maintenance of complete and accurate documentation. For students needing long-term and emergency prescription medication to attend school, the school nurse shall assess the student, review the licensed pre-scriber orders, assure implementation of needed health and safety procedures, and develop a health care plan.

He or she shall utilize the West Virginia Board of Examiners for Registered Professional Nurses Guidelines for Determining Acts that May be Delegated or Assigned by Licensed Nurses as the mechanism for determining whether or not the administration of prescribed medications may be delegated.

The school nurse will provide and/or coordinate training for all school employees designated to administer prescribed medication and document student knowledge and skills related to self-administration of prescribed medication.

Qualified personnel/administrator's designee. Such designee must successfully complete the Cardiopulmonary Resuscitation (CPR), First Aid, and the medication administration portion of training. The designee must also store and administer medication, complete the medication document and report medication incidents as outlined.

Parent/guardian. Parents are to administer the initial dose of any medication at home, except for emergency medications and unless otherwise directed by the licensed prescriber and/or a court order. Parents are also to complete and sign a parent/guardian authorization form, which indicates student name; date; allergies; medication name; dosage, time and route; intended effect

of medication; other medication(s) taken by student; and parent/guardian signature. A completed licensed prescriber form must be submitted for prescribed medications.

Parents must also supply and replenish medication as needed, ensure that medication arrives safely at school in a current and properly labeled container and retrieve unused or outdated medicine from school personnel no later than thirty days after the authorization to give the medication expires or on the last day of school. Medication must be given to the person authorized by the administrator to receive, store and administer medication. Parents are responsible for maintaining effective communication pertaining to medication administration.

Students are to consume the medication in the specified manner, in as much as his/her age, development and maturity permit. They are to self-administer prescribed emergency or acute medications, such as but not limited to an Epi-pen or ibuprofen when the prescription indicates that said student must maintain possession of the medication. The student must be able to bring the medication to school, carry the medication in a safe and responsible manner, and use the medication only as prescribed. High school students in grades 9-12 may be allowed to carry and self-administer non-prescribed medication (OTC) with parent/guardian authorization, unless restricted by the administrator.

### **Administration of Prescribed Medication**

Prescribed medications shall be administered after written authorization from a licensed prescriber and parent/guardian are received. Prescribed medication from a pharmacy shall be in the originally labeled container, and include the student's name, name of medication, reason(s) for the medication (if to be given only for specific symptoms), dosage, time and route, reconstitution directions, if applicable, and the date the prescription and/or medication expires.

Prescribed over-the-counter medication(s) shall be in the originally labeled container and include the student's name (affixed to original manufacturer's bottle), name of the medication, reason(s) for the medication (if to be given only for specific symptoms), dosage, time and route, reconstitution directions, if applicable, and the date the prescription and/or medication expires.

Medication administration steps must be followed exactly as outlined per WV Policy 2442. Medication administration must take place in a clean and quiet environment where privacy may be established and interruptions are minimal. The school nurse is to be contacted immediately when a prescribed medication's appearance or dosage is questioned. The school nurse shall take the appropriate steps to assure the medication is safe to administer. The school nurse is also to be contacted immediately when a student's health condition suggests that it may not be appropriate to administer the medication.

When a student's medical condition requires a change in the medication dosage or schedule, the

parent must provide a new written authorization form from a licensed prescriber and container. This must be given to designated personnel within an appropriate time frame.

Medication administration incidents include, but are not limited to, any deviation from the instructions provided by the licensed health care provider. The school nurse and building administrator shall be contacted immediately in the event of a medication incident. The school nurse or building administrator shall then contact the physician and parent/guardian, if necessary, implement the school nurse or building administrator recommendation/licensed prescriber order in response to a medication incident and document all circumstances, orders received, actions taken and student's status. A written report must be submitted to the building administrator and county superintendent at the time of the incident. The report should include the name of the student, the parent/ guardian name and phone number, a specific statement of the medication incident, who was notified, and what remedial actions were taken.

Self-administration of asthma medication shall be permitted in accordance with WV Code 18-5-22b after a written authorization is received from a licensed prescriber which contains the student name, purpose, appropriate usage, dosage, time or times at which, or the special circumstances under which the medication is to be administered.

The student must also demonstrate the ability and understanding to self-administer asthma medication by passing an assessment by the school nurse evaluating the student's technique of self-administration and level of understanding of the appropriate use of the asthma medication.

The parent/guardian must acknowledge in writing that they have read and understand a notice provided by Tyler County Board of Education stating that the school, county board of education and its employees and agents are exempt from any liability, except for willful and wanton conduct, as a result of any injury arising from the self-administration of asthma medication.

The permission to self-administer asthma medication shall be effective for the school year for which it is granted and all documents related to the self-administration of asthma medication shall become part of the student health record. The permission to self-administer asthma medication may be revoked if the school administrator finds that the student's technique and understanding of the use of asthma medication is not appropriate or is willfully disregarded.

### **Administration of Non-Prescription Medication**

Non-prescribed medications shall be administered only after a parent/guardian authorization form is provided. The building administrator has the authority to determine if the administration of the non-prescribed medication may be safely delegated to the administrator's designee as defined in

this policy and to contact the parent/guardian or a licensed health care provider to clarify any

questions about the medication being administered.

Any non-prescribed medication(s) must be provided by the parent/guardian and shall be in the manufacturer's original packaging clearly marked with the student's name (affixed to original manufacturer's bottle), name of medication, ingredients, dosage, time and route, reconstitution directions, if applicable, and medication expiration date.

Medication administration steps must be followed exactly as outlined by the WVDE.

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administration must take place in a clean and quiet environment where privacy may be established and interruptions are minimal. The parent/guardian is to be contacted immediately when a medication's appearance or dosage is questioned. The building administrator's designee shall take the appropriate steps to assure the medication is safe to administer. The parent/guardian is to be contacted immediately when a student's health condition suggests that it may not be appropriate to administer the medication. Medication administration incidents include, but are not limited to, any deviation from the instructions provided by the parent/guardian. The building administrator shall be contacted immediately in the event of a medication incident. The building administrator will then contact the parent/guardian, if necessary. The building administrator or designee shall implement the parent's/guardian's recommended response to a medication incident, document all circumstances, orders received, actions taken and student's status, submit a written report to the building administrator and county superintendent at the time of the incident. The report shall include the name of the student, the parent/guardian name and phone number, a specific statement of the medication incident, who was notified, and what remedial actions were taken.

When a parent/guardian authorizes a non-prescribed medication to be given in addition to a known prescribed medication, the building administrator or school nurse shall validate the safety of multiple medications. At times, this validation process may require a licensed provider order.

#### **Use of Epinephrine Auto Injectors by Personnel**

The schools located within this county shall possess and maintain at the school a supply of epinephrine auto-injectors for use in emergency medical care or treatment for an anaphylactic reaction. A prior diagnosis for a student or school personnel requiring the use of epinephrine auto-injectors is not necessary to permit the school to stock epinephrine auto-injectors. Epinephrine auto-injectors shall be maintained by the school in a secure location which is only accessible by medical personnel and authorized nonmedical personnel and not by students.

An allopathic physician or an osteopathic physician licensed to practice may prescribe standing orders and protocols for use when necessary by a school to maintain epinephrine auto-injectors.

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during regular school hours or at a school function when the school nurse medically believes the individual is experiencing an anaphylactic reaction. The school nurse or designed non-medical school personnel may use the school supply of epinephrine auto-injectors for a student or school personnel authorized to self-administer that meet the requirements of a prescription on file with the school.

Prior notice to the parents of a student of the administration of the epinephrine auto-injector is not required. Immediately following the administration of the epinephrine auto-injector, the school shall provide notice to the parent of a student who received an auto-injection.

A school nurse or trained and authorized nonmedical school personnel who administer an epinephrine auto-injection to a student or to school personnel is immune from liability for any civil action arising out of an act or omission resulting from the administration of the epinephrine auto-injection unless the act or omission was the result of the school nurse or trained and authorized nonmedical school personnel's gross negligence or willful misconduct.

The Boards may participate in free or discounted drug programs from pharmaceutical manufacturers to provide epinephrine auto-injectors to its schools.

The Board is required to collect and compile aggregate data on incidents of anaphylactic reactions resulting in the administration of school maintained epinephrine auto-injectors during a school year and forward the data to State Superintendent of Schools.

### **Medication Storage, Inventory, Access and Disposal**

Each school shall designate space in the building to store student medication, at the correct temperature, in a secure, locked, clean cabinet or refrigerator, as required. All medication shall be entered on a medication inventory and routinely monitored for expiration and disposal.

Access to medications shall be under the authority of the administrator of the school in conjunction with the school nurse assigned to that school.

An appropriate supply of long-term and emergency prescribed medication may be maintained at the school in amounts not to exceed school dosages within each calendar month. School personnel shall dispose of unused or outdated medicine unclaimed by the parent/guardian no later than 30 days after the parent/guardian medication authorization expires or on the last day of school. Medication disposal shall be done in a manner in which no other individual has access to any unused portion. Two individuals will witness the disposal of the medication and the procedure must be documented on the appropriate form related to the specific student.

Student information related to diagnosis, medications ordered and medications given must be maintained according to The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g; 34 CFR Part 99) and in such a manner that no one could view these records without proper authorization as specified in West Virginia Board of Education Policy 4350 - Procedures for the Collection, Maintenance and Disclosure of Student Data (126CSR94)).

Documentation of medication administration shall include the student name, medication(s) name, dosage, time and route of medication(s) administration, reaction(s) or untoward effects, reason(s) the medication was not administered; and date and signature of person administering medication.

### **Consequences of Policy Violation**

If a student violates the policy regarding medication administration, action will be based upon West Virginia Board of Education Policy 4373 - Student Code of Conduct (126CSR99) and/or West Virginia Board of Education Policy 2422.5 - Substance Abuse (126CSR23).

Failure of school personnel to comply with the above rules shall result in personnel disciplinary actions based on West Virginia Board of Education Policy 5310 - Performance Evaluation of School Personnel (126CSR142) and West Virginia Board of Education Policy 5902 - Employee Code of Conduct (126CSR162).

### **Severability**

If any provision of this rule or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of this rule.

Source: Board of Education Minutes:  
Authority - WV Constitution, Article XII, 2 and WV Code 18-1-1, 18-2-5, 18-5-22, 18-5-22a, 18-5-22b, 18-5-22c, 18A-4-8, and 30-7-1, et seq.

Date: 2/17/14, 7/2/12, 12/21/09, 1/15/07, 3/7/05