

**POLICIES AND PROCEDURES: 105 CMR 210.00
REGULATIONS GOVERNING THE ADMINISTRATION OF
PRESCRIPTION MEDICATIONS IN PUBLIC SCHOOLS**

SCITUATE PUBLIC SCHOOLS POLICY FOR THE ADMINISTRATION OF MEDICATIONS

The Scituate School Committee approves the following policies governing administration of medications in the schools under its jurisdiction:

1. Management of the Medication Administration Program

A. The school nurse shall be the supervisor of the medication administration program in the school.

B. The school nurse and the school physician shall develop and propose to the School Committee policies and procedures relating to the administration of medications including emergency Epinephrine.

C. Medication Orders/Parental Consent:

1. The school nurse shall ensure that there is a proper medication order from a licensed prescriber which is renewed as necessary, including at the beginning of each academic year. Only the school nurse shall receive an electronic or phone order for any change in medication. Any such order must be followed by a written order within three school days. Whenever possible, the medication order shall be obtained and the medication administration plan shall be developed before the student enters or re-enters school.

a. In accordance with standard medical practice, a medication order from a licensed prescriber shall contain:

- (1) the student's name;
- (2) the name and signature of the licensed prescriber and business and emergency numbers;
- (3) the name of the medication;
- (4) the route and dosage of medication;
- (5) the frequency and time of medication administration;
- (6) the date of the order and discontinuation date;
- (7) a diagnosis and any other medical condition(s) requiring medication, if not a violation of confidentiality or if not contrary to the request of a parent, guardian or student to keep confidential;
- (8) prn orders provide clear indications for when to administer medication.

b. Every effort shall be made to obtain from the licensed prescriber the following additional information, if appropriate:

- (1) any special side effects, contraindications and adverse reactions to be observed;

- (2) any other medications being taken by the student;
- (3) the date of the next scheduled visit, if known.

c. Special Medication Situations

- (1) For short-term medications, i.e., those requiring administration for ten school days or fewer, the pharmacy-labeled container may be used in lieu of a licensed prescriber's order; if the nurse has a question, she may request a licensed prescriber's order.
- (2) For "over-the-counter" medications, with parental written consent, the school nurse shall follow the school physician's orders for administration of acetaminophen, ibuprofen, and diphenhydramine. All other over-the-counter medications require an order from the student's private physician.
- (3) No "holistic" medications will be given by the school nurse.
- (4) Investigational new drugs may be administered in the schools with:
 - (a) written order by a licensed prescriber;
 - (b) written consent of the parent or guardian;
 - (c) a pharmacy-labeled container for dispensing.

If there is a question, the school nurse may seek consultation and/or approval from the school physician to administer the medication in the school setting.

2. The school nurse shall ensure that there is a written authorization by the parent or guardian which contains:
 - a. the parent or guardian's printed name, signature and an emergency telephone number;
 - b. a list of all medications the student is currently receiving, if not a violation of confidentiality or contrary to the request of the parent, guardian or student that such medications not be documented;
 - c. approval to have the school nurse administer the medication or to delegate the administration of other prescription medications to trained willing school personnel for special school events or to administer Emergency Epinephrine;
 - d. persons to be notified in case of a medication emergency in addition to the parent or guardian and licensed prescriber.

D. Medication Administration Plan:

1. The medication administration plan is part of the parent/guardian consent form and will be completed by the school nurse in collaboration with the parent or guardian for each student receiving a medication. Whenever possible, a student who understands the issues of medication administration shall be involved in the decision-making process and his/her preferences respected to the maximum extent possible. * If appropriate, the medication administration plan shall be referenced in any other health or educational plan developed pursuant to the Massachusetts Special Education Law (Individual Education Plan under

2. Chapter 766) or federal laws, such as the Individuals with Disabilities Education Act (IDEA) or Section 504 of the Rehabilitation Act of 1973.

*The Department of Education Guidelines for special education require student consent for the 18-21 age group and student participation in planning after age 14 if appropriate.

3. Prior to the initial administration of the medication, the school nurse shall assess the child's health status and develop a medication administration plan which includes:
 - a. the name of the student;
 - b. an order from a licensed prescriber, including business and emergency telephone numbers;
 - c. the signed authorization of the parent or guardian, including home and business telephone numbers;
 - d. any known allergies to food, insects, latex or medications;
 - e. the diagnosis, unless a violation of confidentiality or the parent, guardian or student requests that it not be documented;
 - f. the name of the medication;
 - g. the dosage of the medication, frequency of administration and route of administration;
 - h. any specific directions for administration;
 - i. any possible side effects, adverse reactions or contraindications;
 - j. the quantity of medication to be received by the school from the parent or guardian;
 - k. the required storage conditions;
 - l. the duration of the prescription;
 - m. the designation of unlicensed school personnel, if any, who will administer the emergency Epinephrine to the student in the absence of the nurse, and plans for back-up if the designated persons are unavailable;
 - n. plans, if any, for teaching self administration of the medication;
 - o. with parental permission, other persons, including teachers, to be notified of medication administration and possible adverse effects of the medication;
 - p. a list of other medications being taken by the student, if not a violation of confidentiality of contrary to the request of the parent, guardian or student that such medication not be documented;
 - q. when appropriate, the location where the administration of the medication will take place;
 - r. a plan for monitoring the effects of the medication;
 - s. provision for medication administration in the case of field trips and other short-term special school events. Every effort will be made to obtain a nurse to accompany students at special school events. In the case of emergency Epinephrine, a school staff member trained in emergency Epi-Pen administration may accompany students on special school

events or a parent may be asked to attend. Students who have parental and physician permission to carry and self-administer inhalers or Epi-Pens may do so after consultation with the school nurse. If a nurse is not available to attend a field trip or other short-term event, the school nurse may delegate prescription medication administration to another responsible school employee. Written consent from the parent or guardian for the named responsible adult to administer the prescription medication must be obtained. The school nurse shall instruct the responsible school employee on how to administer the prescription medication(s) to the student(s).

- E. The school nurse shall determine the positive identification of the student who receives the medication.
- F. The school nurse shall communicate significant observations relating to medication effectiveness and adverse reactions or other harmful effects to the child's parent or guardian and/or licensed prescriber.
- G. In accordance with standard nursing practice, the school nurse may refuse to administer or allow to be administered any medication, which, based on her/his individual assessment and professional judgment, has the potential to be harmful, dangerous or inappropriate. In these cases, the school nurse shall notify the parent/guardian and licensed prescriber immediately and explain the reason for refusal.
- H. The school nurse shall have current pharmaceutical reference available for her/his use.
- I. Delegation/Supervision

1. Scituate Public Schools is registered with The Massachusetts Department of Public Health and holds a current certification allowing delegation of prescription medications to unlicensed, properly trained responsible adult(s) for students on field trips and short term special events, when a school nurse (R.N.) is not available provided that the conditions defined in 105 CMR 210.005 are met.

Current Registration Valid to: 06/30/12

2. Scituate Public Schools is registered with The Massachusetts Department of Public Health and holds a current certification for the limited purpose of permitting unlicensed, properly trained personnel to administer epinephrine (by auto-injector) to students with a life-threatening allergic condition when a school nurse (RN) is not immediately available, provided that the conditions defined in 105 CMR 210.100 are met.

Current registration Valid to: 06/30/12

SCITUATE PUBLIC SCHOOLS
PROCEDURES FOR THE ADMINISTRATION OF MEDICATION

1. The school nurse follows all the guidelines listed under Medication Administration Plan, section I – D and E.
2. The school nurse, in consultation with the school physician, shall have final decision-making authority with respect to delegating administration of emergency medications or medication administration for special school events to unlicensed personnel in school systems registered with the Department of Public Health.
3. The administration of parenteral medications may not be delegated, with the exception of Epinephrine in a life-threatening situation where the child has a known allergy or pre-existing medical condition and there is an order for administration of the medication from a licensed prescriber and written consent of the parent or guardian. (See Protocol and Procedures for Management of Life Threatening Allergies)
4. In the case of emergency medications for seizures the medication Diastat may not be delegated.
5. Supervision of Unlicensed Personnel

Authorized unlicensed personnel administering emergency Epinephrine or other prescription medications for special school events shall be under the supervision of the school nurse. The School Committee shall provide assurance that sufficient school nurses are available to provide proper supervision of unlicensed school personnel. Responsibilities for supervision at a minimum shall include the following:

- (a) After consultation with the principal of a given school, the school nurse shall train and supervise willing individuals, who may administer emergency Epinephrine.
- (b) For the purpose of prescription medication administration for special school events for which a nurse is unavailable to attend, the school nurse in consultation with the building principal may delegate this responsibility to a willing school employee.

- (1) The school nurse shall document the training and evidence of competency of unlicensed personnel designated to assume the responsibility for emergency Epinephrine administration.
- (2) The school nurse shall provide a training review and informational update, at least two times per year for those school staff authorized to administer emergency Epinephrine.
- (3) The school nurse shall provide training for school staff willing to take responsibility for administration of prescription medications for special school events. The training shall include reviewing of student medication orders, possible side effects, adverse reactions and other pertinent information.

- (4) The school nurse shall support and assist persons who have completed the training to prepare for and implement their responsibilities related to the administration of emergency Epinephrine.
 - (a) The degree of supervision required for each student shall be determined by the school nurse after an evaluation of the appropriate factors involved in protecting the student's health including, but not limited to the following:
 - (a) health condition and ability of the student;
 - (b) the extent of training and capability of the unlicensed school personnel to whom the prescription medication administration is delegated;
 - (c) the type of medication; and
 - (d) the proximity and availability of the school nurse to the unlicensed person who is performing the emergency Epinephrine administration
 - (b) Personnel designated to administer emergency Epinephrine shall be provided with the names and locations of school personnel who have documented certification in cardiopulmonary resuscitation. Schools should make every effort to have a minimum of two school staff members with documented certification in cardiopulmonary resuscitation present in each school building throughout the day.

II. Self Administration of Medications

“Self administration” means that the student is able to administer medication to themselves in the manner directed by the licensed prescriber, without additional assistance or direction.

A student may be responsible for taking his/her own inhaled or emergency medication after the school nurse has determined that the following requirements are met:

- A. the student, school nurse and parent/guardian, where appropriate, enter into an agreement which specifies the conditions under which medication may be self administered;
- B. the school nurse, as appropriate, develops a medication administration plan which ensures safe self administration of medication;
- C. the student's health status, knowledge and abilities have been evaluated by the school nurse who then deems self administration safe and appropriate. The school nurse shall observe initial self administration of the medication;
- D. the school nurse is reasonably assured that the student is able to identify the appropriate medication, knows the frequency and time of day for which the medication is ordered;
- E. there is written authorization from the student's parent or guardian that the student may self medicate, unless the student has consented to treatment under M.G.L. c. 112, s. 12F or
- F. if requested by the school nurse, the licensed prescriber provides a written order for self administration;
- G. the student will notify the school nurse immediately if medication is self administered;
- H. the school nurse establishes a procedure for the safe storage of self-administered medication, disposal of sharps or blood products and, as necessary, consults with teachers, the student and parent/guardian, if appropriate, to determine a safe place for storing the medication for the

individual student, while providing for accessibility if the student's health needs require it. This information shall be included in the medication administration plan. In the case of an inhaler or other preventive or emergency medication, whenever possible, a backup supply of the medication shall be kept in the health room or a second readily available location;

- I. the student's self administration is monitored based on his/her abilities and health status. Monitoring may include teaching the student the correct way of taking the medication, reminding the student to take the medication, visual observation to ensure compliance, recording that the medication was taken, and notifying the parent, guardian or licensed prescriber of any side effects, variation from the plan, or the student's refusal or failure to take the medication;
- J. with parental/guardian and student permission, as appropriate, the school nurse may inform appropriate teachers and administrators that the student is self-administering a medication.
- K. with respect to insulin self management the student will demonstrate competency of *Proficiency Standards for Glucose Monitoring Systems*. (see attached)

III. Handling, Storage and Disposal of Medications

- A. A parent, guardian or parent/guardian-designated responsible adult shall deliver all medications to be administered by the school nurse or to be taken by self-medicating students, if required by the self-administration agreement, to the school nurse.
 - 1. The medication must be in a pharmacy or manufacturer labeled container.
 - 2. The school nurse shall document the quantity of the medication delivered with parental and nurse signatures as required.
 - 3. In extenuating circumstances, as determined by the school nurse, the medication may be delivered by a designated adult; provided that the nurse is notified in advance by the parent/guardian of the arrangement and the quantity of medication being delivered to the school.
- B. All medications shall be stored in their original pharmacy or manufacturer labeled containers and in such manner as to render them safe and effective. Expiration dates shall be checked.
- C. All medications to be administered with the exception of prescribed inhalers and emergency Epinephrine shall be kept in a securely locked cabinet used exclusively for medication, which is kept locked except when opened to obtain medications. The cabinet shall be substantially constructed and anchored securely to a solid surface. Medications requiring refrigeration shall be stored in either a locked box in a refrigerator or in a locked refrigerator maintained at temperatures of 38 to 42 degrees Fahrenheit.
- D. Inhalers and emergency Epinephrine will be stored in the health office in unlocked modular cabinets with the student's name clearly labeled (black pen for inhalers and red pen for Epinephrine).
- E. Access to locked medications shall be limited to the school nurse. Access to keys and knowledge of the location of keys shall be restricted to the maximum extent possible. Students who are self-medicating shall not have access to other students' medications.

- F. Parents or guardians may retrieve their child's medication from the school nurse during school hours.
- G. No more than a thirty (30) school day supply of the medication for a student shall be stored at the school.
- H. Where possible, all unused, discontinued or outdated medications shall be returned to the parent or guardian and the return appropriately documented. In extenuating circumstances, with parental consent when possible, such medications may be destroyed by the school nurse in accordance with any applicable policies of the Massachusetts Department of Public Health, Division of Food and Drugs. All medications should be returned to the parent/guardian at the end of the school year.
- I. If parents do not pick up medication as requested by nurse by one day following the end of school for students, the following procedures will take place:
 - 1. Nurse and witness will count remaining medication and record on student's medication log;
 - 2. Prescription medication will be placed in a sharps container or crushed and mixed with an undesirable substance and placed in an impermeable container and properly disposed of in the trash. Flushing prescription medications down the toilet will occur only if the label or accompanying patient information specifically instructs this practice. The nurse will have a witness observe this process.
 - 3. Nurse and witness will sign the student's medication log.

IV. Documentation and Record-Keeping

- A. School nurses administering medications shall maintain an electronic medication administration record for each student who receives medication during school hours.
 - 1. Such record at a minimum shall include a daily medication log; the physicians medication order form and the medication administration plan/parent guardian consent for administration form.
 - 2. The medication administration plan shall include the information as described in Section 210.005(E) of the Regulations Governing the Administration of Prescription Medications in Public and Private Schools.
 - 3. The daily log shall contain:
 - a. the dose or amount of medication administered;
 - b. the date and time of administration or omission of administration, including the reason for omission;
 - 4. The school nurse shall document in the medication administration record significant observations of the medication's effectiveness, as appropriate, and any adverse reactions or other harmful effects, as well as any action taken.

- B. The school district shall comply with the Department of Public Health’s reporting requirements for medication administration in the schools.
- C. The Department of Public Health may inspect any individual student medication record or record relating to the administration or storage of medications without prior notice to ensure compliance with the Regulations Governing the Administration of Prescription Medications in Public and Private Schools.

V. Reporting and Documentation of Medication Errors

- A. A medication error includes any failure to administer medication as prescribed for a particular student, including failure to administer the medication:
 - 1. within appropriate time frames; (The appropriate time frame should be addressed in the medication administration plan.)
 - 2. in the correct dosage;
 - 3. in accordance with accepted practice i.e. right medication, right route of administration
 - 4. to the correct student
- B. In the event of a medication error, the school nurse shall notify the parent or guardian immediately and the nursing coordinator. (The school nurse shall document the effort to reach the parent or guardian.) If there is a question of potential harm to the student, the nurse shall also notify the student’s licensed prescriber.
- C. Medication errors shall be documented by the school nurse on the Medication Error report form. These reports shall be sent to the nurse leader. They shall be made available to the Department of Public Health upon request. All medication errors resulting in serious illness requiring medical care shall be reported to the Department of Public Health, Bureau of Family and Community Health. All suspected diversion or tampering of drugs must be reported to the Department of Public Health, Division of Food and Drugs and Scituate Police Department.
- D. The nurse leader shall review reports of medication errors and take necessary steps to ensure appropriate medication administration in the future.

VI Response to Medication Emergencies

- 1. Emergency Medical Services will be contacted if warranted – call 9-1-1;
- 2. Parents/Guardians will be contacted followed by the licensed prescriber;
- 3. Poison Control will be contacted if necessary (1-800-222-1222) and instructions followed;
- 4. Close observation of the student will be provided and if necessary, the child will be dismissed to parent/guardian. If further medical evaluation is deemed necessary, the child will be referred to the prescribing physician;
- 5. A medication error report will be completed and given to the nurse leader. The building principals shall be notified of incident.

6. Follow-up calls will be made to determine status of student's condition.

VII Dissemination of Information to Parents or Guardians Regarding Administration of Medication

The medication policy will be available for review on the website and a copy will be provided to parents and guardians upon written request.

VIII Policy Review and Revision

Review and revision of these policies and procedures shall occur as needed but at least every two years.

Approved by School Physician: Dr. Stephen K. Lane

Signature: _____ On File _____ Date: _____

Approved by Nurse Leader: Marge Rossi R.N

Signature: _____ On File _____ Date: _____

Approved by the School Committee:

Authorizing Signature: _____ On File _____ Date: _____

Superintendent of School's Signature: Dr. Susan Martin

_____ Date: _____

Date registered by the Massachusetts Department of Public Health for Approval to

Delegate to Unlicensed Personnel, if applicable: 10/22/10 (see attached)

Prepared and Submitted by: Marge Rossi R.N.

