

PROCEDURE NO. 3416P Series 3000 – Students Document Date: 02/26/03 Revised 03/04/15, 03/07/18, 06/15/22

MEDICATION AT SCHOOL

Each school principal shall authorize at least two staff members to administer prescribed or over-the-counter medication. These designated staff members will participate in an in-service training session conducted by a physician or certificated school nurse or advanced registered nurse practitioner prior to the opening of school each year.

For the purpose of this procedure, "medication" means oral medication, topical medication, eye drops, ear drops and nasal spray. This definition DOES NOT include over-the-counter topical sunscreen products regulated by the US Food and Drug Administration (as described in Policy 3416). Oral medications are administered by mouth either by swallowing or inhaling and may include administration through a mask that covers the mouth or mouth and nose.

Prescribed or over-the-counter medication may be administered to students upon written authorization from a parent/guardian and with written request by a Licensed Health Professional (LHP) prescribing within the scope of their prescriptive authority. If the medication is to be administered more than fifteen consecutive days the written request must be accompanied by written instructions from a licensed health professional. Requests shall be valid for not more than the current school year.

Medication authorization may be given via the MVSD Authorization for the Administration of Medication at School form, or any form from a provider office that identifies the student, medication, dosing indications and instructions, and is signed/dated by the LHP and parent/guardian.

The prescribed or over-the-counter medication must be properly labeled and be contained in the original container (it is preferred that pharmacists or parents cut any tablets needing division before delivery to school. When this is not possible, the certificated school nurse may cut a tablet that has been scored by the manufacturer). The trained staff member who will be administering the prescribed or over- the-counter medication shall:

A. Collect the medication directly from the parent/guardian (students should not transport medication to and from school except for medications needed for the treatment of medical emergencies). Collect a medication request and authorization form properly signed by the parent/guardian and by the LHP including instructions from the LHP if the medication is to be administered for more than fifteen consecutive days. All new orders for medication or medication order changes, must be approved by the supervising RN prior to school staff administering the first dose.

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- B. All medications must be in properly labeled medication containers with name of the medication, student name, date, quantity, and strength per dosage unit, LHP name, frequency of administration, and other instructions for giving medications.
- C. Count the medication and record the number pills or amount of liquid medication received, with initials and date received, on the medication log. It is preferable to have two people count and initial; Counting of controlled substances at least weekly as recommended by the Board of Pharmacy. On weekly medication counts, the nurse must have assistance and a witness to the actual count of the medications.
- D. Store the prescription or over-the-counter medication (not more than a twenty) in a locked substantially constructed cabinet or in a limited access area (e.g. teacher backpack during field trips).
- E. Administer medications consistent with the SIX Rights for medication administration:
 - 1. Right student
 - 2. Right medication
 - 3. Right dose
 - 4. Right time
 - 5. Right route
 - 6. Right documentation
- F. Maintain a daily record, which indicates that the prescribed or over-the-counter medication was administered, including errors, reactions, or side effects. If a dose is missed, note the reason, e.g. "absent." Documentation in the electronic medical record is preferred. This record must be kept for 8 years.
- G. All information regarding a student's health status and his/her medication is confidential, and without parent/guardian (or student if applicable) permission cannot usually be discussed by UAP administering medication with anyone except the delegating nurse. Students are entitled to privacy during the administration of their medication.
- H. Medications may not be given after the date specified on the authorization form or expiration date on the label.

Student Carrying and Self-Administering Own Medication:

Under limited circumstances, if a LHP and a student's parent/guardian request that a student be permitted to carry his or her own medication and/or be permitted to self-administer the medication, the principal may grant permission after consulting with the certificated school nurse. Parent/guardian and school approvals will be documented annually on the MVSD Approval to Carry and Self-Administer Medications form.

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Disposal of Medication (<u>Guidelines for Medication Administration at School</u>, p. 22)

At least two weeks prior to the end of the school year, or when a medication is discontinued, parent/guardian of students with leftover medication should be notified in writing and provided the opportunity to pick up any unused medication.

If parent/guardian does not pick up the medication by the date specified, the medication should be counted by two school district staff and properly disposed. Documentation should include the name of the medication, the amount of medication disposed of, the date and signatures of two staff members (recommend one staff be the school nurse) witnessing the disposal.

FDA disposal considerations:

- A. Follow any specific disposal instructions on the prescription label or patient information that accompanies the medication. Do not flush prescription drugs down the toilet unless otherwise directed by FDA disposal guidance.
- B. Take advantage of community drug take-back programs that allow the public to bring unused medications to a central location for proper disposal. Call your city or county government's household trash and recycling service to see if a take-back program is available in your community.
- C. Take the medication out of the original container and mix with an undesirable substance, such as used (wet) coffee grounds or kitty litter. The medication will be less appealing to children and pets, and unrecognizable to people who may intentionally go through your trash. Put medication in a sealable bag or other container to prevent the medication from leaking or breaking out of a garbage bag.
- D. Depending on the type of product and where you live, inhalers and aerosol products may be thrown into the trash or recyclables, or may be considered hazardous waste and require special handling. Read the handling instructions on the label, as some inhalers should not be punctured or thrown into a fire or incinerator.
- E. Prefilled syringes-the medication in the syringe may be disposed of as indicated above. If there is a needle on the empty syringe it should be placed in a sharps container (Note: do not remove needle from syringe or attempt to re-cap). Expired or used epinephrine auto-injectors are considered hazardous medical waste and need to be disposed of safely. The auto injectors should be left in their original plastic container and put into a sharps or bio-hazard container for disposal.

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- F. When in doubt about proper disposal, consult with the pharmacist.
- G. Before discarding a medication container, scratch out all identifying information on the prescription label to make it unreadable. This will help protect the students' identity and the privacy of their personal health information.

Medication Error

The correct medications must be administered to the correct student at the correct time (within 30 minutes before or after the prescribed dose is ordered) in the correct dosage, by the correct route, with accurate documentation. Deviation from this standard may constitute a medication error. A dose that is missed (omitted) for whatever reason may also be considered a medication error. All medication errors must be documented and reported to the nurse who provides supervision for the UAP giving the medications for the school under RCW 28A.210.260 and 270.

Parent-Designated Adult (PDA) Care of Students with Epilepsy or Diabetes: Parent/Guardian of students with epilepsy or diabetes may designate an adult to provide care for their student consistent with the student's Individual Health Plan (IHP). The parent/guardian must complete the Designation of a Parent-Designated Adult (PDA) form (form 3416 F.1) and file with the certificated school nurse. At parent/guardian request, an unlicensed school district employee may volunteer to be a PDA under this policy, but they will not be required to participate. The PDA who is an unlicensed school employee will file a voluntary, written, current, and unexpired Documentation of Training and Notice of Intent form. The PDA who is an unlicensed school employee is required to meet with the certificated school nurse to review the student's IHP. The PDA shall receive additional training from a parent/guardian selected LHP or expert in epileptic seizure care/diabetes to provide the care (including medication administration) requested by the parent/guardian.

Documentation of Training and Notice of Intent form (Form 3416 F.2) will be filed with certificated school nurse. The certificated school nurse is not responsible for the supervision of procedures authorized by the parent/guardian and carried out by the PDA.

PDAs who are not school employees are required to meet school district requirements for volunteers. A PDA who is not a school employee will receive training from a parent-selected LHP or expert in epileptic seizure care/diabetes to provide the care requested by the parent/guardian.

Documentation of Training and Notice of Intent form (Form 3416 F.2) will be filed with certificated school nurse. The certificated school nurse is not responsible for the supervision of procedures authorized by the parent/guardian and carried out by the PDA.

References: Guidelines for the Administration of Medication at School, 2015 OSPI