

ADMINISTRATIVE REGULATION

Placentia-Yorba Linda Unified School District

Students

5141.31 - AR

ADMINISTRATION OF MEDICATION

A. Purpose and Scope

To provide the procedures for the administration or self-administration of medication to students during school hours.

B. General

1. Pursuant to Education Code Section 49423 and subdivision (b) of Section 49423.6 any pupil who is required to take, during the regular school day, prescribed medication may be assisted by a school nurse or other designated school personnel if both of the following conditions are met:
 - a) The pupil's authorized health care provider executes a written statement specifying, at a minimum, the medication the pupil is to take, the dosage, and period of time during which the medication is to be taken, as well as otherwise detailing (as may be necessary), reason for the medication, the method, and time schedule by which the medication is to be taken.
 - b) The pupil's parent or legal guardian provides a written statement initiating a request to have the medication administered to the pupil or to have the pupil otherwise assisted in the administration of the medication, in accordance with the authorized health care provider's written statement.
2. "**Authorized health care provider**" means an individual who is licensed by the state of California to prescribe medication. Authorized health care providers include the following persons: California-licensed physicians and surgeons; California-licensed dentists, optometrists, and podiatrists; California-licensed nurse practitioners and California-certified nurse midwives; California-licensed physician assistants.
3. "**Medication**" may include not only a substance dispensed in the United States by prescription, but also a substance that does not require a prescription, such as over-the-counter remedies, nutritional supplement and herbal remedies.
4. "**Regular school day**" may include not only the time the pupil receives instruction, but also the time during which the pupil otherwise participates in activities under auspices of the local education agency, such as field trips, extra-curricular and co-curricular activities, before- or after-school programs (*does not include child care*), and camps or other activities that typically involve at least one overnight stay away from home.
5. "**School nurse**" means an individual employed by the district who is a currently licensed registered nurse and is credentialed pursuant to Education Code section 44877.

6. **“Licensed Vocational Nurse” (LVN)** means an individual employed by the district who is licensed by the California Board of Vocational Nursing and Psychiatric Technicians as a Vocational Nurse.
7. **“Specialized physical health care services”** are services prescribed by a physician that may require medically related training to perform, and are necessary for the student to attend school.
8. **“Administer”** means the direct application of a drug or device to the body of a student by injection, inhalation, ingestion or other means.
9. **“Assist in the administration of medication”** means to take an action that will facilitate the self-administration of medication by the student or the administration of medication by a school nurse or other qualified individual that does not constitute the direct application of a drug or device to the body of the student by injection, inhalation, ingestion or other means.
10. **“Unlicensed assistive personnel”** (UAP) includes any person employed by the district who does not possess a current California license for health care.
11. **Parent notification:** At the beginning of each school year the district, with the input of the lead nurse, shall notify all parents/guardians that, pursuant to Education Code Section 49423, they may request that the district provide assistance for the administration of prescription and/or over the counter medication as long as the district receives written statements from the student’s health care provider and parent/guardian in accordance with law, and these administrative regulations.
12. A student with an individualized education program (IEP) or Section 504 plan who requires medication during the school day is entitled to receive such medication in accordance with his or her written plan (CCR, Title 5, Section 610(b)).

C. Forms Used and Additional References

1. *Allergy/Anaphylaxis Action Plan*
2. *Asthma Action Plan*
3. *Parent/guardian and Authorized Health Care Provider Request for Medication (separate forms for diabetes, allergies, etc.)*
4. *Seizure Action Plan*
5. *Parent Seizure Update Form*
6. *Volunteer Training for Administration of Emergency Naloxone Hydrochloride or Another Opioid Antagonist Medication*
7. *Indemnification Agreement for Voluntary Employees Administering Naloxone Hydrochloride or Another Opioid Antagonist*

D. Procedure

1. **Authorization for the administration of medication at school. This applies to health care provider prescribed and/or over the counter medication.**

- a) The parent/guardian shall inform the school nurse, health clerk, principal, or secretary of the need to have medication administered at school.
- b) A written statement authorizing a medication to be administered in the school must be provided by an authorized health care provider who is licensed by the State of California to prescribe medication. The parent or guardian must also provide a written statement indicating their desire that the school assist the student with medication administration as set forth in the written statement from the authorized health care provider.
- c) The written statements of the parent and health care provider shall be completed using one of the forms listed in Section C, Forms 1-5. Parents/guardian and health care provider must complete the forms and return to the school prior to the administration of any medication.
- d) Telephone authorization is not permitted.
- e) In some cases, the nurse may want to talk to the parent about the possibility of administering the medication at home outside of school hours.
- f) A new written statement from the authorized health care provider and parent/guardian must be provided whenever there are:
 - Changes in medication dose, time and method of administration.
 - A change in the medication.
 - A change in the authorized health care provider.
- g) Written statements authorizing medications to be administered at school must be renewed annually.
- h) A school nurse shall review all written statements provided by authorized health care providers and parents to ensure that they are complete and contain all of the legally required and recommended content and that the medication may safely be administered in accordance with the written statements.
- i) If the school nurse has questions or concerns regarding the written statements, he or she shall contact the student's authorized health care provider or pharmacist to resolve those questions or concerns. If concerns remain, the nurse shall notify the school administrator and inform the parent/guardian of these concerns and attempt to resolve the problem.

2. **Delivery, storage and disposal of medication.**

- a) The parent must bring all prescription medications to the school in a properly labeled, original container from the pharmacist. The label must include the student's name, date, the name and telephone number of the health care provider, the name and telephone number of the pharmacy, and health care provider's instruction, including dosage, time and the method of administration.

- b) If pill splitting is needed, pills shall be split by the parent prior to providing the school with the medication.
- c) If multiple medications are to be administered at school, each medication must be delivered to the school in a separately labeled container.
- d) Over-the-counter medication/product must be in the original container and shall be delivered to the school by the parent or designated adult. Medications/ products that are not in their original container will not be accepted or administered.
- e) All medications, with the exception of those medications that individual students have been authorized to carry and self-administer (see below), must be kept in a locked medication container or refrigerator in a designated area on the school site and be available only to persons authorized to administer medications.
- f) All discontinued or outdated medications shall be returned to the parent/guardian and documented on the student's medication log.
- g) At the end of the school year, all the remaining medication shall be picked up by the parent or it will be destroyed.
- h) Medications not claimed at the end of the school year shall be discarded as recommended by the local health officer and appropriate OSHA guidelines. Medications shall not be flushed down the toilet and shall not be disposed of in the school trash.

3. Documentation of the administration of medication.

- a) The principal/designee shall maintain a list of students needing medication during school hours. The list shall be kept in the administration office or health office. The principal/designee shall also ensure that confidentiality is appropriately maintained.
- b) The principal/designee, with assistance from school nurse, shall ensure the daily counting and logging of the administration of medications classified as "controlled substances" as defined by CFR, Title 21, Section 1300.01 be provided as follows:
 - All controlled substances are counted and recorded upon arrival at school in the presence of the parent/guardian delivering the medication.
 - Each dose of the controlled substance that is administered is recorded and subtracted from the total count remaining.
 - Discrepancies between what has been documented as administered and the amount remaining are reported immediately upon discovery to the site administrator, the lead nurse and if necessary, to the appropriate law enforcement agencies.
- c) The principal/designee shall establish and maintain a student medication log documenting all medications administered at school. The medication log shall include the student's name; name of medication the student is required to take; dose of medication; method by which the student is required to take the medication; time the medication is to be taken during the regular school day; date on which the student is required to take the medication; health care provider's name and contact information; and a space for signatures and daily recording of medication administration.

- d) The principal/designee shall also report any refusal of a student to take his/her medication to the parent/guardian.

4. **Persons authorized to administer medication at school.**

- a) The principal, with the input of the school nurse, shall determine who is to administer and/or assist in the administration of the medication.
- b) Medication shall be administered by the school nurse, a registered nurse not credentialed as a school nurse, a licensed vocational nurse supervised by a school nurse, the parent or guardian or their designee as allowed by law, a contracted licensed health care professional whose licensure permits administration of the medication, or by the student under specified conditions.
- c) Unlicensed assistive personnel (i.e. instructional aide, secretary, clerk) may assist in the administration of medication or may administer some medications if:
 - Designated by the district to do so within the scope of their job description.
 - The UAP is trained and determined to be capable and competent to be able to safely and accurately administer or assist in the administration of the medication by a licensed health care professional who is legally authorized to provide such training and determine competence.
 - The UAP is supervised (immediate, direct or indirect supervision as determined to be required by the school nurse) by the licensed health care professional who provided the training, and the supervision, review, and monitoring of the medication is documented.
- d) All nurses, UAP and contracted personnel administering life-sustaining emergency medication as allowed by law should have documented training and current certification in cardiopulmonary resuscitation (CPR) from a recognized source of such training.
- e) The school nurse shall be responsible for the training of UAP to perform tasks allowable by law and shall provide documentation of the training and the supervision required. Periodic evaluation and retraining shall be determined by the school nurse.
- f) If necessary, UAP may receive training from career and continuing education programs approved by the appropriate licensing board or through public or private medical institutions (i.e. hospitals, public health agencies, Visiting Nurses Associations and Red Cross (CCR, Title 5, section 3051.12(b)(2)(B))).
- g) The parent/guardian or a person designated by the parent who is not employed by the district may administer medication, including over-the-counter, to a child if the parent provides written permission to the principal/designee identifying who will administer the medication, the conditions under which the medication will be administered, and releasing the district from the responsibility of administering the medication. The parent/guardian or designee must adhere to a prearranged schedule.

h) Under certain circumstances, a student may self-administer medications. Students who need medication while at school may carry necessary emergency medication (i.e. asthma inhalers, epinephrine auto-injectors) if ordered by the student's health care provider and may self-administer such medication. The principal/ designee must obtain both a written statement from the health care provider detailing the name of the medication, method, amount and time schedules by which the medication is to be taken and confirming that the pupil is able to self-administer the epinephrine auto-injector or the inhaled asthma medication, and a written statement from the parent, foster parent or guardian of the pupil consenting to the self-administration. Additionally, the following conditions must be met:

- The student is physically, mentally, and behaviorally capable, in the written opinion of the parent, health care provider, and credentialed school nurse, to assume that responsibility and has been adequately instructed at home.
- The medication is necessary to the student's health and must be taken during school hours.
- The student has successfully demonstrated self-administration of the medication to the credentialed school nurse.
- Supervision is provided by the credentialed school nurse, when available, or by designated school personnel.
- The school nurse has reviewed each order and has confirmed that the student is able to safely self-administer the medication. The school nurse must obtain a release of information, if necessary, to consult with the health care provider regarding any questions that may arise with regard to the medication.

Similarly, over-the-counter or prescription medications in single or two doses may be carried by the student and self-administered for an episodic condition if it is approved by the health care provider, parent, principal/designee and school nurse and the student meets the above criteria. The medication should be kept in a labeled container.

i) The school district may provide emergency epinephrine auto-injectors to trained school personnel, and trained personnel may utilize those epinephrine auto- injectors to provide emergency medical aid to persons suffering from an anaphylactic reaction. A school nurse shall provide appropriate training to designated school personnel in the symptoms of Anaphylaxis and the proper use of the epinephrine auto-injectors. Any school employee who administers epinephrine via an auto-injector must also be certified in CPR (E.C. 49414). Training for the administration of epinephrine via auto-injectors shall be conducted on an annual basis.

j) The school shall call 911 anytime the administration of epinephrine is required in order to provide necessary follow-up medical care.

5. Treatment and Care of Students with Diabetes (either type I or type II).

- a) Students diagnosed with diabetes shall be referred to the school nurse.
- b) The school nurse shall ensure that the proper diabetes management orders are completed by the health care provider, and signed by the parent and provided to the school or school nurse by the parent/guardian.
- c) When the school receives the orders from the health care provider, the nurse, with parent input, shall develop an *Individualized Health Plan (IHP)*. The nurse/designee is responsible for the distribution of the plan to staff members that have a "legitimate educational interest" or "need to know" about the student's diabetes care. Further distribution of the IHP requires specific parental consent.
- d) The school nurse shall be responsible for the training of school staff in the appropriate responses to students with diabetes.
- e) The parent, nurse or other staff member may refer the student for an assessment to determine eligibility as a student with a disability pursuant to Section 504 of the Rehabilitation Act of 1973, or IDEA and establish any necessary accommodations that the student may require in order to receive a free and appropriate public education.
- f) The parent is responsible for obtaining and providing all supplies needed for the management of the diabetes, including blood glucose meters, syringes, ketone testing supplies, insulin if needed, low blood glucose supplies such as juice, tablets, glucagon if ordered, and additional pump supplies if appropriate.
- g) The school principal, in coordination with the nurse, teacher and parent, shall establish an appropriate setting for the necessary blood glucose testing, insulin administration and all other procedures required in the health care provider's order. The student shall have immediate access to all items necessary for the treatment of diabetes, including but not limited to blood glucose testing equipment, insulin and glucagon.
- h) Blood glucose testing and monitoring of blood glucose levels may be performed by either the pupil or by trained voluntary unlicensed school personnel (E.C. 49414.5). With authorization of the licensed health care provider and permission of the parent, the pupil shall be allowed to perform diabetes self-care pursuant to the pupil's IHP. If the pupil is not able to perform independent blood glucose testing, a voluntary school staff member may be trained by the credentialed school nurse to perform the test and monitor the blood glucose level.
- i) With the exception of pupils who independently provide their diabetes self-care, all glucose test results, administration of insulin, and medical care provided (ketone testing, treatment of low-blood sugars, emergency procedures) shall be documented on the student's individual medical log. The log may be maintained in the health office, classroom or other setting in which the student or school staff member performs the diabetes care.
- j) If a student who independently provides their diabetes self-care comes to the office requiring assistance, this visit and assistance must be documented on the medical log.

- k) Any change to the diabetes management plan requires written authorization from the health care provider. The school nurse shall ensure that no change to the insulin dosage occurs without health care provider orders. Parent requests for a change in the testing, administration or dosage shall be referred to the school nurse immediately.
- l) The administration of insulin shall be performed by the following:
- The student (self-administration), with authorization of the student's licensed health care provider and parent/guardian.
 - A school nurse employed by the school district.
 - An appropriately licensed school employee such as a registered nurse or licensed vocational nurse, supervised by a school nurse.
 - A contracted registered nurse or licensed vocational nurse from a private agency or registry, or by contract with a public health nurse through the county health department.
 - A parent/guardian who volunteers to administer the insulin.
 - A designee of the parent guardian who volunteers to administer the insulin and who is not a school employee.
 - An unlicensed voluntary school employee with appropriate training by the school nurse.
- m) In the absence of a school nurse, or other licensed nurse onsite at the school, glucagon may be administered to pupils with diabetes suffering from severe hypoglycemia by voluntary school personnel trained to provide emergency medical assistance to pupils (E.C. 49414.5). Emergency Medical Services (911) shall be called upon the initiation of the administration of glucagon.

6. Treatment and Care of Students with Seizure Disorders

- a) Students identified as having a seizure disorder shall be referred to the school nurse.
- b) The school nurse shall ensure that the Seizure Action Plan is completed by the health care provider, and the *Parent Seizure Update Form* is provided to the school or school nurse by the parent/guardian. Health care providers may use their office form in-lieu of the Seizure Action Plan (Form 4-5).
- c) If the student requires medication for control or treatment of seizures while at school and the health care provider order form does not provide a legally required request for administration of medication as described above, the parent must provide the *Parent/guardian and Authorized Health Care Provider Request for Medication*.
- d) When the school receives the Seizure Action Plan (or alternative forms) and the Parent Seizure Update Form, the nurse, with parent input, shall develop an *Individualized Health Plan (IHP)*. The nurse/designee is responsible for the distribution of the plan to staff members that have a "legitimate educational interest" or "need to know" about the student's seizure care. Further distribution of the IHP requires specific parental consent.

- e) The parent, nurse or other staff member may refer the student for an assessment to determine eligibility as a student with a disability pursuant to Section 504 of the Rehabilitation Act of 1973, or IDEA and establish any necessary accommodations that the student may require in order to receive a free and appropriate public education.
- f) The school nurse shall be responsible for the training of school staff in the appropriate responses to students with seizure disorders.
- g) The procedure for the administration of rectal Diastat shall be specified as part of the student's *Specialized Physical Health Care Service/IHP* and shall become part of an IEP, or a Section 504 plan, as appropriate to the student's eligibility as a student with a disability.
- h) As with other medications, Diastat can only be administered to the student if the school nurse has obtained (1) a written statement from the student's health care provider indicating the circumstances under which the medication should be administered, and (2) the pupil's parent or legal guardian written statement initiating a request to have the medication administered in accordance with the authorized health care provider's written statement.
- i) Diastat must be provided to the school in a properly labeled pharmaceutical container with specific instructions for administration. The school nurse shall verify that the dosage received from the parent matches the health care_provider's order and shall ensure that the medication is properly readied for administration.
- j) Whenever possible Diastat shall be administered by a school nurse, registered nurse, or LVN, under the supervision of the school nurse. Designated UAP properly trained in the administration of Diastat may administer Diastat under the direct or indirect supervision of the school nurse.
- k) Training of UAP in the administration of Diastat is the responsibility of the district. Training may be provided by a school nurse, public health nurse, health care provider, career and continuing education program approved by the appropriate licensing board, training programs through public or private medical institutions, i.e. Hospitals, public health agencies, visiting nurses associations, and Red Cross. (CCR, Title 5, section 3051.12(b)(2)(B)1-3)
- l) The district shall make every effort to ensure that an appropriately licensed school staff member or a properly trained UAP is available to a student with a seizure disorder who requires Diastat through school assignments and defined responsibilities.
- m) In all cases involving the administration of Diastat the school shall notify the parent of the seizure and the administration of Diastat. At the request of the nurse or other licensed personnel, the parent shall come to the school to take the student home.

7. Treatment and Care of Students Suffering, or Reasonably Believed to be Suffering, from an Opioid Overdose

- a) The school district shall make naloxone hydrochloride or another opioid antagonist available at schools for the purpose of providing emergency medical aid to persons suffering, or reasonably believed to be suffering, from an opioid overdose.

- b) A school nurse or district administrator shall obtain a prescription for naloxone hydrochloride for each school from an authorized health care provider or by obtaining a standing order through The Department of Health Care Services (DHCS) Naloxone Distribution Project.
- c) At least once per year, the Superintendent or designee shall distribute to all staff a notice requesting volunteers to be trained to administer naloxone hydrochloride or another opioid antagonist, describing the training that the volunteer will receive, and explaining the right of the volunteer to rescind the offer to volunteer at any time, including after receiving training. The notice shall also include a statement that no benefit will be granted to or withheld from any employee based on the offer to volunteer and that there will be no retaliation against any employee for rescinding the offer to volunteer (Form 6).
- d) Information regarding defense and indemnification provided by the district for any and all civil liability for volunteers administering naloxone hydrochloride or another opioid antagonist for emergency aid shall be provided to each volunteer and retained in the employee's personnel file (Form 7).
- e) Training of all staff in the administration of naloxone hydrochloride is the responsibility of the district. Training may be provided by a school nurse or other organizations and providers with expertise in administering naloxone hydrochloride in a school setting. Training shall include all of the following:
 - Techniques for recognizing symptoms of an opioid overdose.
 - Standards and procedures for the storage, restocking, and emergency use of naloxone hydrochloride.
 - Basic emergency follow-up procedures, including school staff to call 911 and to contact the student's parent or guardian.
 - Recommendations on the necessity of instruction and certification in CPR.
 - Written materials covering the above training.
- f) The school nurse or other trained designated staff shall provide emergency naloxone hydrochloride for emergency medical aid to any person exhibiting potentially life-threatening symptoms of an opioid overdose at school or a school activity.
- g) If the medication is used, the school nurse shall restock the medication as soon as reasonably possible after it is used. In addition, the medication shall be restocked before its expiration date.
- h) Storage of naloxone hydrochloride will be in a place accessible to trained personnel. In most instances, the naloxone hydrochloride will be stored in the same cabinet as the AED. Naloxone hydrochloride should be stored below 77 degrees Fahrenheit. Excursions up to 104 degrees Fahrenheit. Do not freeze or expose to excessive heat above 104 degrees. Protect from light.

E. Reports Required

Forms signed by health care provider and parent/guardian shall be filed by the school nurse or designee in the school health office.

F. Record Retention

1. Health care provider orders, Individual Health Plans, Section 504 plans and IEP's shall be maintained in the student's legal file.
2. Medication Logs and other forms shall be retained in the school's health files.
3. All health care provider order forms must be resubmitted each year.

G. Responsible Administrative Unit

Executive Services

H. Approved by:

Richard McAlindin	12/6/2022	Dr. Michael D. Matthews	12/6/2022
Responsible Division Head	Date	Superintendent	Date

LEGAL REFERENCE:

<u>Education Code</u>	<u>Section</u>
	44871
	44873-8
	49400
	49422
	49423
	49423.5
	49414
	49414.3
	49414.5

<u>California Code of Regulations (CCR)</u>	Title 5, Division 1, Chapter 2, Subchapter 3, Article 4.1, Sections 600 – 613
	Title 5, Section 3051

California Program Advisory on Medication Administration, 2005

Nursing Practice Act

<u>California Business and Professions Code</u>	2725(b)
	2727
	4016