

MEDICATION ADMINISTRATION PROCEDURES

I. MANAGEMENT OF THE MEDICATION ADMINISTRATION PROGRAM

A. Physician's Orders

A written order from the student's physician (including a dentist) relating to each medication must be on file. The order must state that a health reason exists making administration of such medication necessary during school hours. The physician's orders must indicate:

1. the student's name
2. the name of the medication
3. the dosage and route
4. the frequency and time to be given
5. specific directions for administration, if needed
6. the termination date for administering the medication
7. the physician's signature and date

Telephone orders from licensed prescribers may be accepted, but a follow-up fax or written order must be received within 3 school days in order to continue administering the medication. Medication orders will be valid for a period of one school year (September through June) unless written otherwise. A physical exam must be on file in the health office in order for medications to be dispensed by the nurse.

B. Special Medication Situations

1. Short Term Prescriptions

For short term prescription medications -- i.e. those requiring administration for 10 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 written licensed prescriber's order. Written parent permission is required.

2. Over-the-counter ("OTC") Medications

For over-the-counter medications -- i.e. (but not limited to) non-prescription medications such as Tylenol, Advil, Motrin, Benadryl, Lactaid, Turns, cough drops, cough medicine -- the original labeled container, licensed provider's order for medications that are not covered by protocols, and written parent permission are required.

3. Investigational Drugs

For investigational drugs, the pharmacy labeled container, licensed prescriber's order and written parent permission are required. A copy of the FDA Approved Investigator Certificate is also requested. If there is a question, the school nurse may seek consultation and/or approval from the school physician to administer the medication in a school setting.

4. Additional Medication Doses at School

The school nurse will administer only doses prescribed to be given during the school day. If a student misses a dose at home, the parent must come in to give the medication.

- C. Check-in Procedures
All medications must be brought to school by a responsible adult. Medication may not be brought to school with a student. Medication can be dropped off or picked up by a responsible adult at any time when school is in session. The school nurse will record the date medication is brought in, ensure that the required authorization is on file, and count and record the number or amount of medication in the presence of the person who delivered it. Parents/guardians should provide the school nurse with only the amount of medication to be administered during school. It is the parent's/guardian's responsibility to contact the physician or pharmacy if they require an additional supply of medication when school is not in session.
- D. Original Containers
All medication must be in the original labeled container and be labeled with the student's name. Pharmacies will provide a second bottle to be kept at school upon request. Medication will not be sent back and forth to school daily. Parents/guardians should keep a supply at home and send the required doses to school in the labeled pharmacy container. The school may accept no more than a 30 day supply. The school nurse will not administer the following: expired medications, medications delivered in containers which are not labeled, and medications in inappropriate containers such as zip-loc bags.
- E. Changes to Prescriptions
It is the responsibility of the parents/guardians to notify the school nurse of any changes to the original prescription, and a new pharmacy label and container must be submitted with any change. A parent/guardian or a designated adult must pick up the unused supply of medication. The school nurse can appropriately discard medication if it is not picked up, or by request of the parent.
- F. Medication Information Resources
The school nurse will have a current pharmaceutical reference available for her/his use, such as the Physician's Desk Reference (PDR) or other drug reference book.

II. DOCUMENTATION OF THE ADMINISTRATION OF MEDICATIONS

- A. Medication Administration Records
Each school will maintain a medication administration record of prescription medication administered during school hours. Medication records will include:
1. Medication form ("MAR")
 - a. Initials and full signature of nurse
 - b. Written time and initials for each administered dose
 - c. Documentation of missed dose according to code on form
 2. Medication administration plan
 3. Licensed prescriber's order
 4. Parent/guardian permission
 5. Individual health care plan as necessary
 6. Massachusetts Health Records

All documentation will be recorded in ink and will not be altered. The completed medication administration record and records pertinent to self-administration (see following section III) will be filed in the student's cumulative health record.

- B. Medication Errors
In the event of a medication error, the school nurse will notify and/or document the effort to contact the parent/guardian immediately. If there is a question of potential harm to the student, the nurse will also contact the licensed prescriber or the school physician. Medication errors will be documented by the school nurse on the Medication Error Report Form, and will be kept in a file in the offices of the Chairperson of Nursing and the Director of Pupil Services.

III. SELF-ADMINISTRATION OF MEDICATIONS

The school nurse may permit self-medication of inhalers, insulin, Epipens, and certain select medications using the following guidelines:

- A. The student, parent/guardian, school nurse, and student's physician, where appropriate, enter into a written agreement, which specifies the conditions under which prescription medication may be self-administered.
- B. The school nurse develops a medication administration plan [105 CMR 210.005(E)] containing any elements necessary to ensure safe self administration of the prescription medication.
- C. The school nurse evaluates the student's health status and abilities for self-administration as appropriate. As necessary, the school nurse should observe the initial dose of self administration of prescription medication.
- D. The school nurse is reasonably assured that the student is able to identify the appropriate prescription medication, knows the frequency and indications for which the prescription medication is ordered, and follows the medication administration plan.
- E. There is written authorization from the student's parent/guardian that the student may self-medicate, unless the student has consented to treatment under M.G.L.c112, 12F Emergency treatment of minors or other authority permitting the student to consent to medical treatment without parental permission (i.e. an emancipated minor).
- F. The licensed prescriber provides a written order for self administration.
- G. The school nurse establishes a policy for the safe storage of self-administered prescription medication 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 he the student's health needs require it.
- H. The school nurse may monitor the student's self-administration, based on the student's 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.
- I. With parent/guardian and student permission, the school nurse may inform appropriate teachers and administrators that the student is self-administering prescription medication.
- J. If the student does not comply with the medication administration plan, the nurse may cancel the self-administration permission notifying all those involved.

IV. FIELD TRIPS

The Chairperson of Nursing, in collaboration with the school physician and the approval of the Acton Public and Acton-Boxborough Regional School Committees, will be responsible for submitting to the Massachusetts Department of Public Health (DPH) appropriate requests/registration “for the limited purpose of permitting the delegation of prescription medications to unlicensed, properly trained responsible adults for students on field trips and short term special school events, when a school nurse (RN) is not available and provided ~at the conditions defined in 105 CMR 210.005 are met.” Said personnel will receive training in the administration of the medication to the specific child.

When the health condition of the student warrants it, the parent/guardian will be encouraged to accompany the child on field trips. A registered nurse will accompany the field trip if, in the school nurse’s judgment, a student requires assistance for safe medication administration.

V. ADMINISTRATION OF EPINEPHRINE BY NON-NURSING PERSONNEL

The Chairperson of Nursing, in collaboration with the school physician and the approval of the Acton Public and Acton-Boxborough Regional School Committees, will be responsible for submitting to the Massachusetts Department of Public Health (DPH) appropriate requests/registration “for the limited purpose of permitting unlicensed, properly trained school personnel to administer epinephrine (by auto injector) to students with a diagnosed 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.” Said school personnel will receive training in the administration of Epinephrine via auto injector, and will be identified on the child’s medication administration plan.

The school nurse will document the training and evidence of competency of unlicensed personnel designated to administer epinephrine via auto injector. The school nurse will provide a training review and informational update for those school staff authorized to administer epinephrine via auto injector.

VI. RESPONSE TO MEDICATION EMERGENCIES

- A. The school nurse will develop procedures for responding to medication emergencies, i.e. any reaction or condition related to administration of medication which poses an immediate threat to the health or well-being of the student. These procedures will be consistent with the school’s policy for handling all health emergencies, and will include a list of persons to be notified in case of a medication emergency.
- B. The Chairperson of Nursing in collaboration with the school physician will develop a plan for the treatment of anaphylaxis. This plan will include a protocol for the emergency administration of epinephrine by school nurses. This plan and protocol must be reviewed/renewed annually.
- C. A completed accident/incident report will be completed by the school nurse, and a copy sent to the Chairperson of Nursing immediately. A Report of Epipen Administration form must also be completed by the school nurse and sent to the Massachusetts DPH, with a copy kept on file in the health office.
- D. A list of school personnel certified in CPR within each individual school will be kept on file with the school nurse.

VII. STORAGE OF MEDICATIONS

- A. All medication will be stored in a securely locked wall-mounted cabinet located in the school health office. Access to this cabinet is strictly limited to the school nurse, school nurse substitute, and the building administrator. No medication should be removed from the medication cabinet by anyone without notification of the school nurse or school nurse substitute.
- B. Where possible, all unused, discontinued, or outdated medications will be returned to the parent/guardian and the return appropriately documented. Medications will be destroyed by the school nurse at the end of the school year if not retrieved by parent/guardian.
- C. Emergency medications, i.e. Epipens, are to be kept in an acceptable place in the health office so that they are readily available for administration by those who have been trained according to state regulations. Alternate sites for additional emergency medication will be designated in the individual student's emergency health care plan or individualized health care plan (JHCP).

VIII. DISSEMINATION OF INFORMATION TO PARENTS/GUARDIANS REGARDING ADMINISTRATION OF MEDICATION

These medication regulations will be available in each school health office.

IX. RESOLUTION OF QUESTIONS BETWEEN THE SCHOOL AND PARENT/GUARDIAN REGARDING ADMINISTRATION OF MEDICATION

In order to resolve questions regarding the school's medication administration policy, a meeting may be held between the parent/guardian, school nurse, student (if appropriate), Chairperson of Nursing, and the Director of Pupil Services.

LEGAL REF.: M.G.L. c.71, s.54B; 105 CMR 210.000: The Administration of Prescription Medications in Public and Private Schools

REFS.: Comprehensive School Health Manual: Massachusetts Department of Public Health, January 1995
Massachusetts Board of Registration in Nursing Advisory for the Administration of Over-the-Counter Medications, July 2002
National Association of School Nurses Position Statements, 1999 and 2000