

Administration of Medication

Policy No. 302.7R

REGULATIONS

FORM: 302.7F – STUDENT MEDICAL ALERT FORM

FORM: 302.7F – ADMINISTRATION OF PHYSICIAN-PRESCRIBED MEDICATION FORM

FORM: 302.7F – SCHEDULE OF ADMINISTRATION OF MEDICATION FORM

***Please refer to **Policy 302.8 – Allergic Shock (Anaphylaxis)** for **FORMS** regarding allergies that produce an anaphylactic response.

For certain students, it is essential that medication be administered during school hours. In such circumstances it is the Principal/Vice Principal's responsibility to ensure that a staff member is clearly designated to carry out this task. This duty may fall to the Principal/Vice Principal, teacher, teacher assistants or other staff members.

1. Definitions:

Administration: in addition to its literal sense, includes dispensing medication as well as directly assisting and supervising students who take their own medication.

2. Types of Medication:

2.1. Prescribed

Most requests received by schools involve the routine administration of prescribed medication for chronic conditions such as asthma or attention disorders. These are normally given in a standard dosage at preset times.

2.1.1. School district employees should honor administering physician-prescribed medication requests and adhere to the procedures laid out in “section 4.2-Request for Administration of Physician-Prescribed Medication” below.

2.1.2. Some requests involve awareness of students self-administering physician-prescribed medication and should adhere to the procedures laid out in “section 4.3-Student Responsibility for Self-Administration of Physician-Prescribed Medication” below.

2.2. Non-Prescription

Sometimes parents or students will request that a school administer over-the counter drugs such as acetaminophen (Tylenol), Ibuprofen (Advil) or cough syrup. Such medications are not generally prescribed by a physician and dosages are not clearly defined.

- 2.2.1. It is recommended that school staff not administer medication under such circumstances.

2.3. Emergency

Some students may require the administration of medication in life-threatening or extreme emergencies. Such situations would be listed on a:

1. Student Medical Alert Form

(Used for: diabetes, epilepsy, blood clotting disorders, serious heart disorders, or any other serious medical conditions)

A **Health Care Plan** may be developed in Medical Alert situations:

Health Care Plans are developed as per procedures laid out in “section 4.1-Medical Alert Conditions (not including anaphylaxis)” below. A copy of this plan should be placed in the student’s file.

OR:

2. Student Emergency Anaphylaxis Plan

If the situation involves allergies that produce an anaphylactic response, refer to *Policy 302.8 – Allergic Shock (Anaphylaxis)*.

- 2.3.1. School district employees are obliged to administer such emergency care and should adhere to the procedures laid out in “section 4.1-Medical Alert Conditions and Health Care Plans (not including anaphylaxis)” below.

In order to provide for a level of supervision and care that secures the safety and well-being of these pupils, the following guidelines and procedures should be followed:

3. Registration Procedures:

- 3.1. At the time of registration, using the district registration form, parents are asked to report on their child’s medical conditions.
- 3.2. Information on a student’s life-threatening conditions will be recorded and updated on the student’s Permanent Student Record annually.
- 3.3. This information should include identification of the medical problem or disability, symptoms, precautions to watch for, medication or procedural interventions, physician’s name and number, as well as emergency numbers. If administering medication is required during school hours, please refer to the procedures listed below for required forms.
- 3.4. The medical information should be entered into the current Student Information System (i.e. MyEducationBC).

- 3.5. If there is a Medical Alert Condition, refer to procedures laid out in “Section 4.1-Medical Alert Conditions (not including anaphylaxis)” for paperwork requirements. If the student has allergies that produce an anaphylactic response refer to *Policy 302.8 – Allergic Shock (Anaphylaxis)*.

It is the responsibility of the Parent/Guardian to:

- 3.6. Provide the school with accurate medical information at the time of registration, each September, or as medical conditions arise, and should be updated on a regular basis;
- 3.7. In a timely manner, fill out the required forms;
- 3.8. If required, discuss with the school the distribution or posting of the Student Medical Alert Emergency Plan (page 2). Parental permission is required to post or distribute the plan;
- 3.9. Inform service providers of programs delivered on school property by non-school personnel of their child’s medical alert condition, as these programs are not the responsibility of the school.

4. School Based Procedures:

Precautionary measures as well as consistent procedures, careful communication and record keeping are essential in assisting school-based personnel support children requiring special attention and/or medication in order to regularly attend school and benefit from instruction.

4.1. Medical Alert Conditions (not including anaphylaxis):

(Refer to Policy 302.8–Allergic Shock (Anaphylaxis) for procedures for allergies that produce an anaphylactic response)

*****NOTE: Contact the District Principal of the Learner Services Department for consultation on all Medical Alert Conditions.**

- 4.1.1. If the ‘Medical Alert Condition’ has been checked on the registration form, have parents/guardians fill out the ‘Student Medical Alert Form.’

The ‘Student Medical Alert Form’ should identify the medical condition or health-related disability, family physician’s name and number as well as an emergency contact. Information listed should include: symptoms, precautions to watch for, need for staff training, medication where required, and a daily care plan, including medical interventions, as well as a step-by-step plan in case of emergency.

- 4.1.2. A Health Care Plan may be developed with Nursing Support (Northern Health), Learner Services Department, Principal/Vice Principal, and the Parents/Guardians.

- 4.1.3. The Principal/Vice Principal will ensure that all assigned staff understand the Student Medical Alert Plan / Health Care Plans of students in their care. For communication to other staff, refer to procedures laid out in “Section 8-Communication” below.
- 4.1.4. A copy of the Student Medical Alert Plan / Health Care Plan should be kept in the student’s file and other locations as deemed appropriate.

If the Student Medical Alert Emergency Plan (Page 2) is deemed necessary to post in key areas, parental permission is required to post and distribute the plan. (refer to 3.8)

- 4.1.5. Should the child be a bus student, the bus driver is included in any training as deemed necessary by the Nursing Support (Northern Health)
- 4.1.6. Where specialized training is required, as in the case of situations where medication is to be administered through injection on a regular or predictable basis, or where other specialized medical procedures are involved (e.g. catheterization, ostomy care etc.), all designated personnel will be trained by Nursing Support (Northern Health).

4.2. Request for Administration of Physician-Prescribed Medication:

******NOTE: Contact the District Principal of the Learner Services Department for consultation on any medication that is not in pill form, such as eye drops, etc.***

- 4.2.1. Where it is deemed necessary by a physician that a student requires medication at school in order to regularly attend school and benefit from instruction, and where the child is not able to self-administer the medication, the Principal/Vice Principal will designate personnel, in consultation with involved staff, to administer this medication and to maintain a daily log.
- 4.2.2. The Request for Administration of Physician-Prescribed Medication Form should be filled out both by the parent/guardian and by the family physician listing the medication name, dosage and directions for use and storage. School staff responsible for the administration of medication should sign the form as well. This will occur prior to any administration of medication.
- 4.2.3. A copy of the form should be kept in the student’s file and a copy should be kept with the medication.

4.3. Student Responsibility for Self-Administration of Physician-Prescribed Medication:

If a student is 13 years and older, and is deemed responsible for this task, they may self-administer physician-prescribed medication during school hours.

Should staff members become aware of circumstance where a student may be misusing this privilege, the Principal/Vice Principal may want to contact the parent to determine whether or not the parent is aware of or approves of the self-medication of the student. The Principal/Vice Principal should stress that the school can take no responsibility for the administration of such medication and should keep a record of the conversation.

4.4. Students Self-Administration of Non-Prescriptive Medication

Should staff members become aware that a student is self-administering non-prescriptive medication on a frequent basis, depending upon the age of the student and other circumstances, the Principal/Vice Principal may want to contact the parent to determine whether or not the parent is aware of or approves of the self-medication of the student. The Principal/Vice Principal should stress that the school can take no responsibility for the administration of such medication and should keep a record of the conversation.

5. Storage of Medications:

- 5.1. Procedures should be established for the safe and secure storage of medication within the school.
- 5.2. Medication should be brought to the school by the parent in a container appropriately labeled by the physician or pharmacist.
- 5.3. Medication should be stored out of the reach of students in a designated place which is cool, dry and dark.
- 5.4. Emergency medication, such as epi-pens and inhalers, should be easily accessible and should not be locked up. Most emergency medication will be carried by the student.

6. Safe and Hygienic Administration of Medication

The following are guidelines for administering medication in a safe and hygienic way:

- a) Staff to wash hands with hot water and soap or wear plastic gloves (if the student is not allergic to plastic)
- b) Give the student their medication, let the student take the medication themselves
- c) Watch student take medication
- d) Follow the procedures in Section 7 on Recording Administering of Medication

7. Recording Administering of Medication:

- 7.1. A record of all medication administered must be kept, and the record should be stored with the medication. This applies to both routine and emergency situations.
- 7.2. The Schedule of Administration of Medication Form could be used for this purpose.

8. Communication:

- 8.1. Staff should communicate with the parent/guardian as quickly as possible in any emergency situation or concerning any problems encountered with medication. This is particularly important where the dosage may need to be regulated following a trial period.
- 8.2. Lists of all students with known Medical Alert Conditions and their causes should be circulated to staff members deemed appropriate by the Principal/Vice Principal, parent/guardian and the District Principal of Learner Services. Whenever possible, this knowledge should be used in order to provide a safe environment.

In the case of children with life-threatening allergies see: *Anaphylaxis: A Handbook for School Boards*, pages 21 to 29 and refer to *Policy 302.8 – Allergic Shock (Anaphylaxis)*.

- 8.3. In life-threatening Medical Alert Conditions, if parental permission is obtained, and in conjunction with Learner Services Department and the Principal/Vice Principal, a letter to parents informing the parents/guardians of the presence of a student with life-threatening medical alert condition may be deemed appropriate/necessary.

The sample newsletter from *Policy 302.8 – Allergic Shock (Anaphylaxis)* could be modified and used for this purpose.

9. In-service:

Where there is a need for information or training for current staff, bus drivers or TTOC teachers, training can be arranged through Nursing Support (Northern Health) assigned to each school.