

LCSD Medication administered in school...

LCSD follows the New York State Education Department GUIDELINES FOR MEDICATION MANAGEMENT IN SCHOOLS with regards to medication administration in school.

Below are highlighted areas taken from the NYS Medication Guidelines and district specific information parents/guardians may find helpful in understanding the process of medication administration in schools.

Medications should be administered by parents/guardians outside of school hours whenever possible per the NYSED Administration of Medication in the School Setting Guidelines. The School Nurse will administer medications when it is not feasible for parents/guardians to administer medication to a student at home.

Strict guidelines must be followed for medication to be administered at school.

- Parent/guardian must provide a written medication order from the student's NYS licensed health care provider containing information necessary for identification and administration of all medications, including over-the-counter medications.
- Parent/guardian must sign, giving permission for the medication to be administered at school.
- Parent/guardian must bring the medication to the school nurse, in its original labeled container which matches the health care provider's medication order. Over-the-counter medications must be labeled with the student's name.
- The pharmacy label or prescription do not constitute a written order and cannot be used in lieu of a written order from the licensed prescriber.
- Medications should not be transported daily to and from school. Parents should request the pharmacist provide two labeled containers-one for home, one for school.
- Parents must discuss with the school nurse the condition for which the medication is being administered, the specific indications, the potential complications, timing of administration, and plan for ongoing communication
- Medications should only be accepted by the school nurse, and only from a parent or guardian. For extenuating circumstances the parent must contact the school nurse to arrange an acceptable alternate plan.
- All medication orders and parental permission must be renewed yearly at the beginning of each school year for each medication.
- Medications will be kept in the school health office.
- For self-carry/self-administered medications, parents should discuss this with the school nurse.

Administration of Medication

All medication will be administered reflective of the New York State Education Department

GUIDELINES FOR MEDICATION MANAGEMENT IN SCHOOLS

When administering medications in school it is important to take into account WHO can administer the medication, WHERE the medication is to be administered or taken by the student, and WHEN the medication is to be administered or taken by the student.

WHO

- Medications must be administered by an appropriately licensed health professional. As stated earlier, these professionals include but are not limited to: physicians, nurse practitioners (NP), physician assistants (PA), registered professional nurses (RN), and licensed practical nurses (LPN) under the direction of an RN or the other health professionals listed above. Supervised Students and Independent Students may be assisted by trained unlicensed personnel to take their own medications. In both scenarios, whether the medication is administered to the student or the student is taking their own medication with assistance, documentation of the medication dose must be recorded in the individual student's cumulative health record (CHR). Anytime a dose of medication is not taken or administered, the occurrence and related information (e.g. student absent, refused, parameters for administration not met, etc.) is to be documented in the CHR. • Medications that have expired should not be administered by a licensed health professional, per Rules of the Board of Regents Part 29.14 (2)(i): <http://www.op.nysed.gov/title8/part29.htm>. The parent/guardian should be notified of the need to bring in new medication to replace the expired one at least one month in advance of expiration. An easy method to track expiration dates is to note it at the top of the medication administration record (MAR). • Medication delivery systems where medicines are transferred into holding containers until needed, also referred to as pre-poured, are not considered best practice, may be considered professional misconduct for licensed health professionals, pose risks of spillage, contamination, and medication dosage errors. Such systems should not be used.

WHERE

- Students will generally need to go to the health office for an appropriate licensed health professional to administer the medication to the student, or to take their own medication. Ideally a photo of the student should be attached to the medication administration record for identification purposes, which is particularly helpful for substitute personnel.
- Some students may be able self-administer and manage their own medications at school.
- NYSED Guidelines for Medication Management in Schools Last Updated September 2015 Page 26
- School policies and protocols should be developed to address students' increasing independence, and allow the need for timely administration of certain medications by permitting the student to independently self- carry and self- administer that medication anywhere in the school or at school events. Education Law Article 19 §916, §916-a, §916-b effective July 1, 2015 require that schools permit students who have both written provider orders and parent guardian consent to carry and self-administer: o inhaled rescue medications; o epinephrine auto-injector, and o insulin, glucagon and other supplies for diabetes management. As stated earlier, schools should extend the right to self-carry and self-administer medications to Independent Students with other conditions that require rapid

administration of medications to prevent negative health outcomes. Schools should consult their medical director for any questions or concerns regarding students with other conditions who have a provider order to carry and self-administer their medication.

WHEN

- All medications should be administered as close to the prescribed time as possible. Given student schedules and students' compliance with coming to the health office in a timely fashion, medications accepted for school administration generally may be given up to one hour before and no later than one hour after the prescribed time, which is considered best practice. Parents/guardians and the ordering provider should be notified of the district's protocols on time of administration. Orders that may present challenges due to school schedules should be discussed with the provider and parent/guardian by the school nurse or the district medical director. Parent/guardians, providers, students, and school nursing personnel should work together to ensure the student receives his/her medication at an appropriate time.
- If a student fails to come to the health office for a dose, school administration should provide support to health office personnel to locate the student. If the medication has not been given for any reason within the prescribed time frame, the school must make all reasonable efforts to notify the parent/guardian that day, as the parent/guardian may need to adjust a home dose accordingly. The missed dose and communication to the parent/guardian should be documented in the CHR.
- If students chronically fail to come to the health office for their medications, the school nurse should notify the parent/guardian, administration, and the ordering provider about the issue, including any steps taken by the school to remind and/or locate the student. Ideally school administration along with health services personnel, should meet with the parent/guardian to develop a plan that will ensure the student receives their medication as ordered during school hours. Alternatively, the ordering provider may choose to change the medication order- however this remains within the provider's discretion.
- NYSED Guidelines for Medication Management in Schools Last Updated September 2015 Page 27
- A medication dose may be changed or discontinued by a written order of the provider at any time. Parent/guardian consent forms that specify both the medication name, time of administration, and/or dosage will necessitate a new consent from the parent/guardian for the new order. If a parent/guardian withdraws consent in writing for the school to administer a particular medication to their child without the provider's written order to do the same, the school will need to comply with the parent's/guardian's instructions and contact the provider to inform him/her and obtain a written order to discontinue the administration of the medication at school. Parent/guardians making verbal requests to withdraw consent should be instructed to do so in writing. School protocols may permit acceptance of verbal parent/guardian requests if followed up by written request within a specific time frame.
- Certain medications may need to be administered in such a short time from symptom onset that licensed health professionals may need to go to the student's location to administer.

- Medications that are administered in emergencies to students with patient specific orders (such as epinephrine, glucagon, and Diastat) should be stored as close to the student's location as practicable. Options for this include:
 - ☐ the medication is carried by a trained staff member (for epinephrine via autoinjector or glucagon); or licensed health professional that is in close proximity to the student's location; or
 - ☐ The medication is stored in a secure location in the student's classroom; or
 - ☐ The medication is stored in a secure location near the student's classroom.
- Where the medication is located should be specified in the student's emergency action plan. Delay in administration may result in negative health outcomes for the student. Such medications should not be stored in the health office unless the health office is within a very short distance from the student's location at all times during the day, and the medication can be obtained and administered in the time frame prescribed by the provider.
- If the parent/guardian fails to provide an emergency medication for a student with a diagnosis that requires such medication, the student should not be excluded. The school should communicate in writing to the parent/guardian that in the absence of the medication, they will have to call emergency medical services (EMS) for the student per district policy should the need arise for transport to local emergency room. The district medical director or school nurse should communicate this information to the student's provider if orders for the medication had been provided to the school previously. Schools should be cognizant of financial constraints a family may face in obtaining the medication, and assist by providing information on obtaining insurance or reduced cost medications from manufacturers if available: (http://www2.nami.org/Content/ContentGroups/Hotline1/Prescription_Drug_Patient_Assistance_Programs.htm) If the provider confirms that the student must have such medication available at school, the school should work with the parent/guardian to resolve the need for the emergency medication to ensure the safety of their child at school. If all attempts to have the parent/guardian provide the medication fail, the school will need to consider notifying Child Protective Services (CPS).

Storage of Medication in the Health Office

- Medications must have a student's name on each container-either a pharmacy label or written on OTC medications.
- In addition, each nurse will label medication/container with the student's picture and date of birth for proper identification of each student prior to medication administration. The school nurse will utilize the picture and date of birth when implementing the 6 Rights of Medication Administration.

Medication Errors

Carefully designed and executed medication protocols developed and implemented by registered professional nurses are the single best deterrent to medication errors. However, errors may occur

despite everyone's best efforts particularly in busy health offices seeing large volumes of students. A medication error includes any failure to administer medication as prescribed for a particular student. This includes failure to administer the prescribed medication to the correct student, at the correct time, at the correct dose, or by the correct route.

The school nurse (RN) should assess the student and, if appropriate, contact the Poison Control Center (if wrong medication or overdose given) and/or 911 - per school policy. If a school nurse is not present to assess the student, the medical director should be immediately consulted for direction. If he/she is unavailable the parent/guardian should be notified to pick up their child for follow up care, or if deemed necessary, informed that the student is being transported for follow up emergency care.

The following steps should be taken for medication errors:

1. Notify the licensed prescriber as soon as possible, particularly if wrong dose administered;
2. Notify supervisor and/or school administrator, and school medical director;
3. Notify the parent/guardian; and
4. Complete a written report of the medication error detailing student's name, specific statement of the medication error, results of the school nurse assessment, who was notified, and what remedial action was taken.

School nursing personnel and the medical director should review reports of medication errors and take necessary steps to adjust protocols to lessen the likelihood of a future medication error

Carry and Self-administer Medication

For students to self carry/self administer medication at school the decisions is made on an individual basis and in accordance with the following criteria:

- Severity of health care problems, particularly asthmatic or allergic conditions.
- Licensed prescriber's order directing that the student be allowed to carry her/his medication and self-administer.
- Parent statement requesting compliance with licensed prescriber's order.
- Student has been instructed in the procedure of self-administration and can assume responsibility for carrying properly labeled medication in original container on her or his person or keeping in school or physical education locker.
- School nursing assessment that student is self-directed to carry and self-administer her/his medication properly.
- Parent contact made to clarify parental responsibility regarding the monitoring of the student on an ongoing/daily basis to ensure that the student is carrying and taking the medication as ordered. This contact should be documented.
- Any student self-administering medication without proper authorization should be counseled by the school nursing personnel. In addition, the parents should be notified.

In some instances, school administration should also be informed. Periodic re-evaluation of the effectiveness of procedure should be instituted.

- ***Contact the school nurse to arrange self carry/self administration of medication or for any questions or concerns.***

Also see the Lansing Central School District policy 7513 Administration of Medication.