

Prescription/Nonprescription Medication**

Students may, subject to the provisions of this administrative regulation, have prescription or nonprescription medication administered by designated, trained staff and/or trained volunteer coaches. Self-medication by students may also be permitted in accordance with this administrative regulation and state law.

1. Definitions

- a. “Prescription medication” means any noninjectable drug, chemical compound, suspension or preparation in suitable form for use as a curative or remedial substance taken either internally or externally by a student under the written direction of a physician; and bronchodilators or autoinjectable epinephrine prescribed by a student’s Oregon licensed health care professional for asthma or severe allergies. Prescription medication does not include dietary food supplements. As per Oregon Administrative Rule (OAR) 851-047-0030 through 851-047-0040, a registered nurse may administer a subcutaneous injectable medication.
- b. “Nonprescription medication” means only, Food and Drug Administration approved, non-alcohol-based medication to be taken at school that is necessary for the student to remain in school. This shall be limited to eyes, nose and cough drops, cough suppressants, analgesics, decongestants, antihistamines, topical antibiotics, anti-inflammatory and antacids that do not require written or oral instructions from a physician. Nonprescription medication does not include dietary food supplements or nonprescriptive sunscreen.
- c. “Adrenal crisis” means adrenal crisis as defined in Oregon Revised Statute (ORS) 433.800.
- d. “Adrenal insufficiency” means adrenal insufficiency as defined in ORS 433.800.
- e. “Notice of a diagnosis of adrenal insufficiency” means written notice to the district from the parent or guardian of a student who has been diagnosed as adrenal insufficient with a copy of an order from the student’s physician that includes the student’s diagnosis, description of symptoms indicating the student is in crisis, prescription for medication to treat adrenal insufficiency crisis and instructions for follow-up care after medication to treat adrenal insufficiency crisis has been administered.
- f. “Physician¹” means a doctor of medicine or osteopathy, a physician assistant licensed to practice by the Board of Medical Examiners for the state of Oregon, a nurse practitioner with prescriptive authority licensed by the Oregon State of Board of Nursing, a dentist licensed by the Board of Dentistry for the state of Oregon, an optometrist licensed by the Board of Optometry for the state of Oregon or a naturopathic physician licensed by the Board of Naturopathy for the state of Oregon.
- g. “Student self-medication” means a student must be able to administer medication to himself or herself without requiring a trained staff member to assist in the administration of the medication.

¹A registered nurse who is employed by a public or private school may accept an order from a physician licensed to practice medicine or osteopathy in another state or territory of the U.S. if the order is related to the care or treatment of a student who has been enrolled at the school for not more than 90 days.

- h. “Age-appropriate guidelines” means the student must be able to demonstrate the ability, developmentally and behaviorally, to self-medicate with permission from parent or guardian, administrator and, in the case of a prescription medication, a physician.
- i. “Training” means the yearly instruction by a qualified trainer, to be provided to designated staff and volunteer coaches on the administration of prescription and nonprescription medication, based on requirements set out in guidelines approved by the Oregon Department of Education (ODE), including discussion of applicable district policies, procedures and materials.
- j. “Qualified trainer” means a person who is familiar with the delivery of health services in a school setting and who is a registered nurse licensed by the Oregon State Board of Nursing, a physician, or a pharmacist licensed by the State Board of Pharmacy for the state of Oregon. The superintendent or designee will designate the trainer.
- k. “Severe allergy” means a life-threatening hypersensitivity to a specific substance such as food, pollen or dust.
- l. “Asthma” means a chronic inflammatory disorder of the airways that requires ongoing medical intervention.
- m. “Designated staff” means the staff person and/or trained volunteer coaches who are designated by the principal to administer prescription or nonprescription medication.

2. Designated Staff/Training

- a. The principal will designate trained staff and/or trained volunteer coaches authorized to administer prescription or nonprescription medication to students while the student is in school, at a school-sponsored activity, under the supervision of school personnel, in before- or after-school care programs on school-owned property and in transit to or from school or school-sponsored activities. The principal will supervise and ensure building and activity practices and procedures are consistent with the requirements of law, rules and this administrative regulation.
- b. The principal will ensure the training required by law and Oregon Administrative Rules is provided. Training must be conducted by a qualified trainer.
- c. Training will provide an overview of applicable provisions of Oregon law, administrative rules, district policy and administrative regulations and include, but not be limited to the following: the five rights of medication administration, safe storage, handling, monitoring medication supplies, disposing of medications, record keeping and reporting of medication administration and errors in administration, emergency medical response for life threatening side effects, allergic reactions or adrenal insufficiency and student confidentiality. Materials as recommended and/or approved by the ODE will be used.
- d. Training will be provided yearly to designated staff authorized to administer medication to students.
- e. A copy of the district’s policy and administrative regulation will be provided to all staff authorized to administer medication to students.
- f. Records showing that the designated individual has attended and received the required training will be signed by the individual and filed in the district office.

3. Administering Premeasured Doses of Epinephrine to a Student or Other Individual

A premeasured dose of epinephrine may be administered by trained, designated district staff to any student or other individual on school premises that personnel believe, in good faith, is experiencing a severe allergic reaction, regardless of whether the student or individual has a prescription for epinephrine.

4. Administering of Medication to a Student Experiencing Symptoms of Adrenal Crisis

A student experiencing symptoms of adrenal crisis may be treated by designated staff and shall be subject to the following:

- a. Upon notice of a diagnosis of adrenal insufficiency, as defined in OAR 581-021-0037, the building principal will designate staff responsible for administering the medication to treat adrenal insufficiency;
- b. The designated staff will successfully complete training to administer medication to treat a student who has adrenal insufficiency and is experiencing symptoms of adrenal crisis in accordance with the rules adopted by the Oregon Health authority;
- c. The student's parent or guardian must provide adequate supply of the student's prescribed medication to the district;
- d. The district will require the development of an individualized health care plan for the student;
- e. In the event that a student experiences symptoms of adrenal crisis and the designated staff determines the medication to treat adrenal insufficiency should be administered, any available staff member will immediately call 911 and the student's parent or guardian.

5. Administering Medications to Students

- a. A request for designated staff to administer medication to a student may be approved by the district and is subject to the following:
 - (1) A written request for district designated staff to administer prescription medication to a student, if because of the prescribed frequency for the medication, the medication must be given while the student is in school, at a school-sponsored activity, while under the supervision of school personnel, in before- or after-school care programs on school-owned property and in transit to or from school or school-sponsored activities, must be submitted to the school office to include:
 - (a) The written signed permission of the parent or guardian;
 - (b) The written instruction from the physician, physician assistant or nurse practitioner for the administration of the prescription medication to the student including:
 - (i) Name of the student;
 - (ii) Name of the medication;
 - (iii) Method of administration;
 - (iv) Dosage;
 - (v) Frequency of administration; and
 - (vi) Other special instruction, if any.

- (c) The prescription label will be considered to meet this requirement if it contains the information listed above.
- (2) A written request for the district to administer nonprescription medication must be submitted to the school office and shall include:
- (a) The written signed permission of the parent;
 - (b) The written instruction from the parent for the administration of the nonprescription medication to the student including:
 - (i) Name of the student;
 - (ii) Name of the medication;
 - (iii) Method of administration;
 - (iv) Dosage;
 - (v) Frequency of administration; and
 - (vi) Other special instruction, if any.
- b. Medication is to be submitted in its original container.
 - c. Medication is to be brought to and returned from the school by the parent or guardian.
 - d. It is the parent's responsibility to ensure that an adequate amount of medication is on hand at the school for the duration of the student's need to take medication.
 - e. It is the parent's responsibility to ensure that the school is informed in writing of any changes in medication instructions (changes in prescription medication require a new written order from the prescribing health care provider).
 - f. In the event a student refuses medication, the parent will be notified immediately. No attempt will be made to administer medication to a student who refuses district-administered medication (refusal to take a medication will be documented in the student's medication record).
 - g. Any error in administration of medication will be reported to the parent immediately and documentation made on the district's Accident/Incident Report form. Errors include, but are not limited to, administering medication to the wrong student, administering the wrong medication, dose, frequency of administration, method of administration, etc.
 - h. Medication shall not be administered or self-medication allowed until the necessary permission form and written instructions have been submitted as required by the district.
 - i. Noninjectable medications will be administered by currently trained staff and volunteer coaches, including field trips and school-related activities.

6. Student Self-Medication of a Prescription or Nonprescription Medication

A request to the District to allow a student to self-medicate with a nonprescription medication shall include written permission and instruction from a parent or guardian, and shall include an assurance from the parent or guardian that the student has received appropriate instruction for its use.

- a. Grades K-8:
 - (1) Self-medication of prescription and nonprescription medication is not allowed except in cases where a student must carry such medication on his/her person for immediate access and the necessary permission form and written instructions have been submitted as required above.
 - (2) Students with asthma can self-medicate with inhalers.

- (3) Students with severe life threatening allergic reactions can self-medicate with an auto injector epinephrine in accordance with procedures.
- b. Grades 9-12:
- (1) Self-medication of prescription and nonprescription medication will be allowed in accordance with procedures including students with asthma or severe allergies subject to the following:
 - (a) Self-medication is NOT allowed for drugs classified at Controlled Substances Level I, II, III or IV. This covers sedative, stimulant, anti-convulsant, narcotic analgesic or psychotropic medication each school office also has a list of common drugs and their controlled substance level;
 - (b) Exceptions to this can be made by the district level staff person designated by the superintendent;
 - (c) No permission form is required for self-medication of nonprescription medication requests;
 - (2) A parent (guardian) “medication” permission form must be submitted for self-medication of all prescription medications. In the case of prescription medications, permission from the physician or other licensed health care professional is also required (such permission may be indicated on the prescription label). A written treatment plan (other than such permission indicated on the prescription label) from a licensed health care professional for the managing of a student’s asthma and/or severe allergy may be required for use of medication by the student during school hours. Principal or designee permission is required for all self-medication requests;
 - (3) Students who are developmentally and/or behaviorally unable to self-medicate will not be allowed to self-administer medications. These students will be provided assistance by designated staff or volunteer coaches.
 - (4) All prescription and nonprescription medication must be kept in its appropriately labeled, original container, as follows:
 - (a) Prescription labels must specify the name of the student, name of the medication, dosage, method of administration and frequency or time of administration and any other special instruction including permission for the student to self-medicate;
 - (b) Inhalers must have a pharmacy label attached or be in the pharmacy dispensed box;
 - (c) Nonprescription medication must have the student’s name affixed to the original container.
- c. The student may have in his/her possession up to 25 doses of non-prescription or over the counter medication. The student may have in his/her possession only the amount of prescription medication as approved by the district nurse.
- d. If it is medically necessary to have more pills in his/her possession written permission must be obtained from the district nurse.
- e. Sharing and/or borrowing of medication with other students is strictly prohibited. Sharing and/or borrowing of medications with another person at school or school-related activities is grounds for disciplinary action up and to including expulsion.
- f. For students who may have been prescribed bronchodilators or epinephrine, staff or volunteer coaches will request from the parent or guardian to provide a second dose of medication for

emergency use for that student. The second dose of medication, if provided by the parent or guardian, will be kept at the student's school in a location to which the student has immediate access in the event the student has an asthma and/or severe allergy emergency.

- (1) Self-administered medications will be locked in the student's locker or secured in backpack, purse or bag which the student has in his or her possession.
 - (2) Students must be able to independently administer the medication with no support or assistance from staff. The school will not monitor or document the students taking of self-administered medications.
- g. Upon written parent request and with a physician's written statement that the lack of immediate access to an auto-injectable epinephrine may be life threatening to a student, and the location the school stores this medication is not located in the student's classroom, a process shall be established to allow for a second dose of the auto-injectable epinephrine to be kept in a reasonably secure location in the student's classroom;
- h. Permission to self-medicate may be revoked if the student violates the board's policy and/or these regulations. Additionally, students may be subject to discipline, up to and including expulsion, as appropriate.

7. Handling, Storage, Monitoring Medication Supplies

- a. Medication administered by designated staff, or volunteer coaches, must be delivered by the parent, guardian, or other designated adult to the school in its original container, accompanied by the permission form and written instructions, as required above.
- b. Medication in capsule or tablet form and categorized as a sedative, stimulant, anti-convulsant, narcotic analgesic or psychotropic medication will be counted by two individuals upon being delivered to school upon receipt, documented in the student's medication log and routinely monitored during storage and administration. One of these individuals will be a school district employee currently trained to administer medications. The parent or designated adult delivering the medication to school may be the second person who counts the medication. Documentation of the medication count with both individuals signing to confirm the accuracy of the count will be entered in the student's medication administration log and routinely monitored during storage and administration. Discrepancies will be reported to the building principal immediately and documented in the student's medication administration log. For such medication not in capsule or tablet form, standard measuring and monitoring procedures will apply.
- c. Designated staff will follow the written instructions of the physician and parent and training guidelines as may be recommended by the Oregon Department of Education for administering all forms of prescription and/or nonprescription medications.
- d. Medication will be secured as follows:
 - (1) Nonrefrigerated medications will be stored in a locked cabinet, drawer or box used solely for the storage of medication. The medication box will be locked at all times except when in the process of administering medications;
 - (2) Medications requiring refrigeration can be stored in a locked refrigerator designated for medications only or in a locked box in a refrigerator. The refrigerator used will be in a staff room or area that the students do not have access to;
 - (3) Access to medication storage keys and/ or combination will be limited to the building principal and designated trained staff.

- e. Designated staff will be responsible for monitoring all medication supplies and for ensuring medication is secure at all times, not left unattended after administering and that the medication container is properly sealed and returned to storage.
- f. Parents are ultimately responsible for maintaining adequate supplies of medication. In the event that the medication is running low or an inadequate dosage is on hand to administer the medication, the designated staff will notify parents immediately via note, phone, mail or email message.

8. Emergency Response

- a. Designated staff will notify 911 or other appropriate emergency medical response systems and administer first aid as necessary in the event of life threatening side effects that result from district administered medication or from student self-medication or allergic reactions. The parent, building principal, district safety officer and/or district nurse will be notified immediately. The incident will be documented on the student medication log and an incident report completed.
- b. Minor adverse reactions that result from district administered medication or from student self-medication will be reported to the parent immediately. The student will be monitored for at least 60 minutes. The reaction will be documented on the student medication log.
- c. Any available district staff will immediately call 911 and the student's parent or guardian if the designated staff member believes the student is experiencing symptoms of adrenal crisis and plans to administer medication.

9. Disposal of Medications

- a. Medication not picked up by the parent at the end of the school year will be disposed of by designated staff in a nonrecoverable fashion as follows:
 - (1) Medication in capsule, tablet or liquid form will be removed from its original container (destroy any personal information). Crush solid medications, mix or dissolve in water (this applies to liquid as well) and mix with an undesirable substance such as coffee grounds, kitty litter, flour, etc. and place it in impermeable nondescript containers such as empty cans or sealable bags, placing these containers in the trash. Flush prescriptions down the toilet only if the accompanying patient information specifically instructs it is safe to do so; or the medication may be sent to a designated medications disposal site such as the local police department;
 - (2) Other medication will be disposed of in accordance with established training procedures including sharps and glass.
 - (3) Epinephrine self-injection pens, glucagon kits, insulin and inhalers will not be disposed of, if they are not picked up by the parents they will be safely stored over the summer.
- b. All medication will be disposed of by designated staff in the presence of another school employee and documented on the student's medication record. The documentation will include name of the medication, medication form, dosage and quantity destroyed.

10. Documentation and Record Keeping

- a. A medication administration log will be maintained for each student administered medication by the district. The medication log will include but not be limited to:
 - (1) Student's name, date of birth;
 - (2) The name, dose and route of medication administered, date, time of administration and name of the person administering the medication;
 - (3) The medication record will reflect absences, nonschool days for regularly scheduled medications;
 - (4) Student refusals of medication;
 - (5) Missed doses of medications;
 - (6) Errors in administration of medication will be noted on the medication record, accurately documenting what was given. Analysis of the error and contributing factors are not documented on the student's medication record;
 - (7) Emergency and minor adverse reaction incidents will be noted on the medication record, attaching additional documentation if needed;
 - (8) Discrepancies in medication supply;
 - (9) Disposal of medication including date, quantity, manner in which the medication was destroyed and the signature of the staff involved;
- b. All records relating to administration of medicines, including permission slips and written instructions, will be maintained in a separate, medical file apart from the student's education records file unless otherwise related to the student's educational placement and/or individualized education program. Records will be retained in accordance with applicable provisions of OAR 166-400-0010(17) and OAR 166-400-0060(29).
- c. Student medical files will be kept confidential. Access shall be limited to those designated staff authorized to administer medication to students, the student and his/her parents. Information may be shared with staff with a legitimate educational interest in the student or others as may be authorized by the parent in writing.

11. Outdoor School/Extended Trips

Parents will provide all medications, prescription and non-prescription for their student attending outdoor school, except for those stock medications covered in this administrative regulation. The outdoor school permission form may obtain parental permission to administer from a district supplied stock of nonprescription medications. The selections of these medications will be determined by the district nurse with input from any other medical providers, such as the Outdoor School nursing staff. The district nurse will provide written guidance for administering these medications in accordance with manufacturer's instructions.

A school administrator, teacher, volunteer coach or other district employee designated by the school administrator is not liable in a criminal action or for civil damages as a result of the administration of prescription and/or nonprescription medication as per state law.

A school administrator, school nurse, teacher, volunteer coach or other district employee designated by the school administrator, are not liable in a criminal action or for civil damages as a result of a student's self-administration of medication, when that person in good faith assisted the student in self-administration of the medication, as per state law.

A school administrator, school nurse, teacher, volunteer coach or other district employee are not liable in a criminal action or for civil damages, when in good faith administers auto-injectable epinephrine to a student or other individual with a severe allergy, who is unable to self-administer the medication, as per state law.

A school district and the members of a school district board are not liable in a criminal action or for civil damages when a student or individual is unable to self-administer medication, when any person in good faith administers auto-injectable epinephrine to a student or individual, as per state law.

NORTH SANTIAM SCHOOL DISTRICT

Authorization for Medication Administration by School Personnel
See separate file with this form

Student Name: _____

School: _____ Grade: _____ Teacher: _____ School Year: _____

Parent/Guardian Name: _____ Daytime Phone: _____

All medication must be in original containers.

All medication must be delivered and picked up from school by parent or adult responsible for the student.

I am giving school personnel permission to administer medications to my child per the following instructions:

Medication: _____ [] Nonprescription

Medication Expiration Date: _____ [] Prescription

Dose (how much): _____

Frequency (how much): _____ [] Please allow my child to self-administer this medication (refer to district policy). Self-medication requires a different form.

Circle one: by Mouth Ear Eye Nose Skin Injectable*
*requires approval of district nurse or a written Health Management Plan

Time: _____ Physician's Name: _____
Start date: _____ End date: _____ Phone #: _____

Reason for Medication: _____

Special Instruction: _____

I understand I am responsible to provide this medication in the original container with label and maintain the supply as needed. I understand I am responsible to notify the school in writing of any changes. Prescription medication changes require written instructions from prescribing provider. I release North Santiam School District from any legal responsibility involved in the dispensing of this medication.

Parent/Guardian Signature _____ Date _____

(This authorization applies only to the medication listed above and for the duration of treatment or current school year. This also authorizes exchange of information, as necessary between the district nurse, school personnel and/or my child's health care provider)

Health Care Provider*
Directions for Prescription Medications
(Required in writing or pharmacy label may meet this requirement)

I have prescribed the above medication for the student whose name appears at the top of this form. Instructions in the box are accurate. Additional special instructions included:

Health Care Provider's Name and Office Phone Number (please print or stamp)

Health Care Provider's Signature

Date

Effective Date (if different)

*Health Care Provider must have prescription writing privileges in accordance with Oregon Statute.

Administering Medications to Students

Please use this form for each student and each medication to be administered. This information applies to non-injectable medications only.

There are times when it is necessary for students to take medications during the school day in order for a student to fully participate in their education. According to Board policy JHCD - Nonprescription Medication, a specific written request from the parent/guardian must be submitted to the school office before students may take prescription or non-prescription medications while at school. The medication permission form requests all the information required in order for school staff to administer medications.

- Medication must be in its original bottle/container.
- Prescription medication must have a pharmacy label with current instructions for administering the medication.
- Nonprescription medications must have the student's name on the bottle or package.
- Inhalers should have the prescription label attached to the inhaler canister or be in the box with the pharmacy label attached.
- Epi-Pens should have the prescription label attached to the medication container, not just the box.
- **Medication must be delivered to school by parent or an adult designated by the parent.**
- Prescription medication must be prescribed by a Health Care Provider who is licensed to practice in Oregon.

For nonprescription medications, if the dosing exceeds the recommended dose on the package, a physician statement is required.

Prior to the end of the school year, all medication must be picked up by parents or a designated adult. Medication that is not picked up will be destroyed.

Self-Medication

For students who have self-medication of inhalers and/or Epi-pens, parents are strongly encouraged to have a back up inhaler or Epi-pen in the school office.

Self-Medication for High School Students

- Self-medication form must be completed; the Self Medication Agreement is used instead of this form.
- Self-medication of controlled substances and narcotic analgesics is not allowed.
- For prescription medications (such as antibiotics) which a student will take for more than 10 days at school, self-medication forms must be completed.
- A student-specific plan is required for all students who carry an inhaler or emergency epinephrine. Contact the district nurse to make arrangements for this plan.
- Sharing of medications with other students is strictly prohibited. Medication must be secured in a locked locker or in the immediate possession of the student at all times.
- Medications must be in the original container. A student may have up to 25 pills in their possession.
- Nonprescription medications do not require self-medication paperwork to be completed provided the student is taking the medication according to manufacturer's directions.

Self-Medication for K-8 Students

- A MD order giving permission for self-medication is required.
- In specific situations a student may carry an inhaler or pre-loaded epinephrine pen.
- The student must be able to demonstrate knowledge that they are able to independently use an inhaler with no supervision or additional staff support.
- A student-specific plan is required for all students who carry an inhaler or emergency epinephrine. Contact the district nurse to make arrangements for this plan.