Procedures to Policy 516 - STUDENT MEDICATION

A. The administration of prescription medication or drugs at school requires a completed signed request from the student’s licensed prescriber and the parent. An oral request must be reduced to writing within two school days for non-regulated and /or Over the Counter (OTC) medications, provided that the school district rely on written or oral permission from parent/guardian to dispense medication until a written request is received from the provider. Regulated medications will be given only with completed signed request.

B. A "School Medication Physician Order and Parent Authorization" form must be completed annually (once per school year) and/or when a change in the prescription or requirements for administration occurs. Prescription medication as used in this policy does not include any form of medical cannabis as defined in Minn. Stat. § 152.22, Subd. 6.

C. Prescription medication must come to school in the original container labeled for the student by a pharmacist in accordance with law, and must be administered in a manner consistent with the instructions on the label.

D. In the elementary schools, parent/guardian is to bring prescription and non-prescription medication to the health office and not send it with their child. Secondary school students may bring the medication to the nurse's office. Non-prescription medication should be in a container with the name of the student on it. The school nurse may request to receive further information about the prescription, if needed, prior to administration of the substance.

E. Prescription medications are not to be carried by the student, but will be left in the health office. Controlled substances cannot be carried by a student and must be brought in by an adult. Exceptions to this requirement are: prescription asthma medications self-administered with an inhaler (See Part M.5. below), OTC medication at the secondary level according to MS 121A.222 (See Part M.5 below) and medications administered as noted in a written agreement between the school district and the parent or as specified in an IEP (individualized education program), Section 504 plan, or IHP (individual health plan).

F. The school must be notified immediately by the parent or student 18 years old or older in writing of any change in the student’s prescription medication administration. A new medical authorization and container label with new pharmacy instructions shall be required immediately as well.

G. For drugs or medicine used by children with a disability, administration may be as provided in the IEP, Section 504 plan or IHP.

H. The school nurse, or other designated person, shall be responsible for the filing of
the Administering Prescription Medications form in the health records section of the student file. If needed, training will be provided to staff in safe administration of medication, conditions under which medication should be administered and appropriate response to medication reactions.

I. Medications will be stored in a locked secure facility. Health records will be stored and maintained in compliance with data privacy laws.

J. Field trips: Teacher or Educational Assistant assigned to student may dispense medication as instructed by school nurse.

K. Parents will pick up their student's unused medication. Disposal of discontinued/unused/expired medications will be witnessed and documented and the school police liaison officer will dispose of these medications.

L. Complementary and alternative medications require the same authorization as other prescription medications, i.e. completed signed request from the student's licensed prescriber and the parent.

M. Procedures for administration of drugs and medicine at school and school activities shall be developed in consultation with a school nurse, a licensed school nurse, or a public or private health organization or other appropriate party (if appropriately contracted by the school district under Minn. Stat. § 121A.21). The school district administration shall submit these procedures and any additional guidelines and procedures necessary to implement this policy to the school board for approval. Upon approval by the school board, such guidelines and procedures shall be an addendum to this policy.

N. Specific Exceptions:

1. Special health treatments and health functions such as catheterization, tracheostomy suctioning, and gastrostomy feedings do not constitute administration of drugs and medicine;
2. Emergency health procedures, including emergency administration of drugs and medicine are not subject to this policy;
3. Drugs or medicine provided or administered by a public health agency to prevent or control an illness or a disease outbreak are not governed by this policy;
4. Drugs or medicines used at school in connection with services for which a minor may give effective consent are not governed by this policy;
5. Over the Counter medications or medicines that are prescription asthma or reactive airway disease medications can be self-administered by a student with an asthma inhaler if:
   a. the school district has received a written authorization from the
pupil’s parent permitting the student to self-administer the medication;
b. the medication is properly labeled for that student; and
c. the parent has not requested school personnel to administer the medication to the student.

The parent must submit written authorization for the student to self-administer the medication each school year. The school nurse must assess the student’s knowledge and skills to safely possess and use the medication in a school setting and enter into the student’s school health record a "contract" for the safe possession and use of medication.

6. Medications that are not governed by this policy include medications:

a. that are used off school grounds;
b. that are used in connection with athletics or extracurricular activities; or
c. that are used in connection with activities that occur before or after the regular school day

7. At the start of each school year or at the time a student enrolls in school, whichever is first, a student’s parent, school staff, including those responsible for student health care, and the prescribing medical professional must develop and implement an individualized written health plan (IHP) for a student who is prescribed epinephrine auto-injectors that enables the student to:

a. possess epinephrine auto-injectors; or
b. if the parent and prescribing medical professional determine the student is unable to possess the epinephrine and requires immediate access to epinephrine auto-injectors that the parent provides, properly labeled, to the school for the pupil as needed.

The plan must designate the school staff responsible for implementing the student’s health plan, including recognizing anaphylaxis and administering epinephrine auto-injectors when required, consistent with state law. This health plan may be included in a student’s 504 plan.

8. Nonprescription Medication. A secondary student may possess and use nonprescription pain relief in a manner consistent with the labeling, if the school district has received written authorization from the student’s parent or guardian permitting the student to self-administer the medication. The parent or guardian must submit written authorization for the student to self-administer the medication each school year. The school district may revoke a student’s privilege to possess and use nonprescription pain
relievers if the school district determines that the student is abusing the privilege. This provision does not apply to the possession or use of any drug or product containing ephedrine or pseudoephedrine as its sole active ingredient or as one of its active ingredients. Except as stated in this paragraph, only prescription medications are governed by this policy.

9. A student may possess and apply a topical sunscreen product during the school day while on school property or at a school-sponsored event without a prescription, physician’s note, or other documentation from a licensed health care professional. School Personnel are not required to provide sunscreen or assist students in applying sunscreen.

O. Districts and schools may obtain and possess epinephrine auto-injectors to be maintained and administered by school personnel to a student or other individual if, in good faith, it is determined that person is experiencing anaphylaxis regardless of whether the student or other individual has a prescription for an epinephrine auto-injector. The administration of an epinephrine auto-injector in accordance with this section is not the practice of medicine.

A district or school may enter into arrangements with manufacturers of epinephrine auto-injectors to obtain epinephrine auto-injectors at fair-market, free, or reduced prices. A third party, other than a manufacturer or supplier, may pay for a school’s supply of epinephrine auto-injectors.

P. “Parent” for student 18 years old or older is the student.