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POLICY 516 STUDENT MEDICATION/MEDICAL TREATMENT OR PROCEDURES

I. PURPOSE

To set forth the requirements that must be followed when administering medication or performing medical treatments or procedures to students at school.

II. GENERAL STATEMENT OF POLICY

The District acknowledges that some students may require prescribed drugs or medications or medical treatments or procedures during the school day. The District's licensed school nurse, health associate, principal, teacher, or other designated staff, as designated by building and health services administration will administer prescribed medications or perform medical treatments or procedures in accordance with law and the following requirements.

III. REQUIREMENTS

- A. The administration of medications, medical treatments or procedures at school requires a completed signed medical authorization form from the student's parent/caregiver and the licensed health care provider. A doctor's verbal order must be converted to a written order from a doctor within two school days for medication administration to continue.
- B. Health Care Provider Medical Authorization form must be completed annually (at the start of every school year, or when a new student enrolls) and/or when a change in the prescription or requirements for administration occurs.
- C. Prescription and over-the-counter medication must come to school in the original container. Prescription medication must be 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. Expired medication will not be accepted or administered by health services staff.
- D. Health Service staff 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 with Health Service staff or appropriate school district personnel, who has received training and delegation. Exceptions to this requirement are: self-

administered prescription medications such as an asthma inhaler or epinephrine auto injector (see part J.5 & 6 below), or medications administered as noted in a written agreement between the school district and the parent / caregiver or as specified in an IEP (individualized education program), Section 504 plan, ECP (emergency care plan), or IHP (individual health plan)

- F. The school must be notified immediately by the parent / caregiver or student 18 years old or older in writing of any change in the student's prescription medication administration. A new medical authorization or container labeled with new pharmacy instructions shall be required immediately as well.
- G. For drugs, medications, medical treatments or procedures used by children with a disability, administration may be as provided in the IEP, Section 504 plan, ECP, or IHP.
- H. The District will obtain and possess Narcan (naloxone) to be maintained and administered by trained school staff to a student or other individual if it is determined in good faith that person is experiencing an opioid overdose. A school district or charter school must maintain a supply of opiate antagonists, as defined in section 604A.04, subdivision 1, at each school site to be administered in compliance with section 151.37, subdivision 12. Each school building must have two doses of nasal naloxone available on-site.
 - 1. Minnesota Statute (604A.04) "Good Samaritan Overdose Protection" allows for "A person who is not a healthcare professional who acts in good faith in administering an opiate antagonist to another person whom the person believes in good faith to be suffering an opioid overdose is immune from criminal prosecution for the act and is not liable for any civil damages for acts or omissions resulting from the act."
 - 2. In accordance with this statute, the individual who is seeking assistance and the individual who is experiencing an overdose have a limited immunity from prosecution.
 - 3. Stock Narcan (naloxone) will be clearly labeled and stored in a secured location that is accessible by trained staff.
 - 4. Health Services and School Administration will identify appropriate staff to be trained annually at each school site.
- I. Health Service staff, or other staff designated by Health Service staff, shall be responsible for the filing of the "Health Care Provider Order for Medications/ Medical Treatments or Procedures" form in the health records section of the student file. Health Service staff, or other designated staff, shall be responsible for providing a copy of such form to the principal or other staff designated to administer the medication, treatment, or procedure.
- J. Procedures for administration of drugs, medications, treatments, or procedures 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).

- K. The district will obtain and possess stock Epinephrine: a supply of epinephrine that is not designated for a specific individual. It is to be used for individuals with an unknown history of anaphylaxis who have an allergic reaction.
1. Minn. Stat. § 144.999 allows authorized entities including recreation camps, colleges, universities, preschools and day-care facilities to obtain, store, and use epinephrine auto-injectors without a prescription.
 2. After successfully completing an anaphylaxis training program, employees and/or agents of an authorized entity may provide or administer an epinephrine auto-injector to an individual whom they believe in good faith is experiencing anaphylaxis.

L. Specific Exceptions: Self-Carry and Self-Administration

1. Emergency health procedures, including emergency administration of drugs, medications, treatments, and procedures are not subject to this policy;
2. Drugs, medications, treatments, and procedures provided or administered by a public health agency to prevent or control an illness or a disease outbreak are not governed by this policy;
3. Drugs, medications, treatments, and procedures used at school in connection with services for which a minor may give effective consent are not governed by this policy;
4. Drugs 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/caregiver permitting the student to self-administer the medication;
 - b) the inhaler is properly labeled for that student; and
 - c) the parent/caregiver has not requested school personnel to administer the medication to the student; and the student has shown that they know how to properly self-administer the medication.

The parent/caregiver must submit written authorization for the student to self-administer the medication each school year. In a school program that does not have a school nurse or school nursing services, the student's parent or caregiver must submit written verification from the licensed health care provider, which documents that an assessment of the

student's knowledge and skills to safely possess and use an asthma inhaler in a school setting has been completed.

If the School District employs a licensed school nurse or provides school nursing services under another arrangement, the licensed school nurse or other appropriate party must assess the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting and enter into the student's school health record a plan to implement safe possession and use of asthma inhalers; written verification from the student's licensed health care provider may also be used.

5. **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 caregiver and licensed health care provider permitting the student to self-administer the medication. The parent or caregiver must submit written authorization for the student to self-administer the medication each school year. The district may revoke a student's privilege to possess and use nonprescription pain relievers if the 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.
6. **Prescription Medication.** A secondary student may possess and use prescription medications if the school district has received written authorization from the student's parent or caregiver and licensed health care provider permitting the student to self-administer the medication. The parent or caregiver 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 prescription medications if the school district determines that the student is abusing the privilege. In the case of a disagreement regarding a student's self-carrying and self-administration of a medication, a meeting should be held with all involved parties, and a plan developed, keeping as a priority the student's educational goals and health safety.
7. **Medical Cannabis:** Schools may not use an individual's status as a registered medical marijuana patient as a reason to refuse enrollment. Possession or use of medical cannabis is not permitted in the following areas: on a school bus or van; on the grounds of any preschool, primary, or secondary school or at any school sponsored event or field trip. Parents and caregivers are urged to discuss with their licensed health care provider how to handle administering medical cannabis away from the school setting. (Minn. Stat. § 152.22- 152.37)
8. At the start of each school year or at the time a student enrolls in school, whichever is first, a student's parent / caregiver, school staff, including

those responsible for student health care, and the licensed health care provider must implement an individualized written health plan for a student who is prescribed epinephrine auto-injectors. The health 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.

Implementation of the health plan enables the student to:

- a) possess epinephrine auto-injectors; or
 - b) if the parent / caregiver and licensed health care provider determine the student is unable to possess the epinephrine, the student must have epinephrine auto-injectors in close proximity at all times during the instructional day.
9. Stock epinephrine will be available in each building during the hours that are staffed by teachers. The buildings housing school aged child care programs will have it available from 6:30 am - 6:00 pm. Staff in these programs will receive annual training.
- M. "Parent/caregiver" for students 18 years old or older is the student.