

**NOTE: NDSBA has recommended:**

- 1. On page 4 & 5 if the district wishes to remove #3 language parents should sign a waiver absolving the district of liability for drug interactions and allergies and the policy should reference this.**
- 2. You must keep the language on page 4 & 6 regarding the number of medication in the container for internal control.**

**SCHOOL MEDICATION PROGRAM**

The Dickinson Public School District has established a program for providing medication to students during the school day and when students are otherwise under the district's direct supervision (e.g., participating in a school activity, on a school-sponsored trip). This program is only available to students when the applicable requirements under this policy have been satisfied.

**Qualifications for Eligible School Medication Providers**

In order to be eligible to provide medication under this policy, an individual must meet the following criteria and receive approval from the building principal.

1. Received education and training in medication administration, including the following topics:
  - a. Individual's authority and role in providing medication;
  - b. Proper medication storage, inventory, and disposal;
  - c. Proper techniques for providing medication including, but not limited to, understanding pharmacy labels, standard precautions for infection control (e.g., hand washing), six rights of medication administration, and measuring and dispensing protocols;
  - d. Appropriate documentation of all medication provided and confidentiality requirements;
  - e. Basic medical terminology related to providing medication;
  - f. Appropriate action if unusual circumstances occur (e.g., medication error, adverse reactions, student refusal) and how and when to seek medical consultation or assistance.
2. Provide the building principal with verification that the above training and education is complete.
3. Undergo a criminal history record check through the District and received satisfactory adjudication.
4. Agreed to perform the duty of providing medication.
5. Receive written consent from the student's parent or guardian.
6. Agreed to comply with this policy and any additional district rules on providing medication.

The District shall pay the cost of all district-authorized education and training for school medication providers.

**Requirements and Prohibitions for All School Personnel**

All school employees and volunteers shall comply with the district's Drug and Alcohol Free Workplace policy, which prohibits illegal activities associated with prescription and over-the-counter medication. In addition, eligible school medication providers and all

other school employees and volunteers with knowledge of a student's health condition and/or medication regimen shall comply with district policies and law regarding confidentiality of student education records—records that include student health records. Additional rules governing the school medication program are contained in administrative rules.

All school employees and volunteers are required, as soon as possible, to report to building administration or his/her designee any observed or reported sign or symptom that a student may be having an adverse medication reaction or allergic reaction.

Any violation of this policy or other district rules governing medication may result in disciplinary action, including, but not limited to, discharge (in accordance with applicable law) and/or removal of medication provider duties, if applicable.

### **Types of Medication Provided**

The District may provide both prescription and over-the-counter medication to students covered by this policy so long as they are legal under state law and:

1. Recognized as drugs in the official U.S. Pharmacopoeia and national formulary; or
2. Recognized as drugs in the official Homeopathic Pharmacopoeia of the U.S.; or
3. Recognized as drugs in any supplementary publication to the above references; and
4. Are authorized to be provided to the student by his/her parent/guardian and, when applicable, healthcare provider in accordance with this policy.

The District may consult a qualified healthcare provider (e.g., pharmacist) to determine if the above, applicable criteria have been met. The District shall maintain the student's confidentiality when making such an inquiry unless the student's parent/guardian has waived confidentiality rights.

The District and all school employees and volunteers are prohibited from purchasing over-the-counter medications to provide to students.

### **Routes of Medication Provided**

Eligible school medication providers may provide oral and non-oral, noninvasive medication (i.e., medication provided by non-parenteral routes) to students covered by this policy.

Except for students covered by an Individual Education Program (IEP) or 504 Plan, if a student's medication requires administration through the parenteral route, the District may deny a parent's/guardian's request to provide such medication or may require the parents/guardians to reimburse the District for the expense of hiring a healthcare provider who has authority under state law to administer such medication, if the District does not have a medically qualified and eligible school medication provider on staff who is willing to administer the medication. Eligible school medication providers shall not provide medication through parenteral routes unless they have the proper authority under state law, including certification or licensure, to perform such functions. The District shall retain verification of such authorization, certification, or licensure.

If a medically qualified and eligible school medication provider is requested to perform any invasive medication administration, the District first should contact its insurer to

determine if additional liability coverage is necessary if the District has not previously made this inquiry.

### **Students Eligible for Participation**

The following students are eligible for participation in the medication program established by this policy:

1. Students who have an administering medication requirement under their IEP or 504 Plan. The District shall pay the cost of these services.<sup>1</sup>
2. Students who are not covered by the Individuals with Disabilities Education Act (IDEA) or 504 but who require medication when under the direct supervision of the school and whose parents/guardians are unable to make arrangements to provide medication themselves. An exception to such a student's participation in the medication program may apply if the student requires medication through a parenteral route (see section on routes of medication provided).
3. Students who require emergency epinephrine treatment in accordance with ND Administrative Code Ch. 33-37-01 and/or students who require emergency medication under NDCC 15.1-19-16. This policy, ACBD, shall not supersede NDCC 15.1-19-16, which contains criteria for a school to authorize student self-administration of emergency medication.

The building principal and Superintendent are authorized to approve other circumstances under which a student is eligible to participate in the school's medication program. This administrator should contact legal counsel and should request permission from the student's parent/guardian to consult with the student's healthcare provider (to better understand the implications and scope of the request) before acting on such requests.

### **First Dose of Medication**

Whenever possible, the first dose of medication should be given to a student at home or other non-district facility.

### **Requirements for Parents/Guardians Prior to District Providing Medication**

A parent/guardian must sign a written form authorizing his/her student to receive medication from an eligible school medication provider prior to the District carrying out this service. A new authorization form is required anytime the student has a change in medication regimen, when a new medication is to be provided, and at the beginning of each school year. This form must include the following:

1. **For over-the-counter medication:** Must include instructions from the parent/guardian on how, when, and how long to provide medication. Requests to provide a dosage other than as recommended by the manufacturer shall require approval from an appropriate healthcare provider.
2. **For prescription drugs:** Requires written authorization and instructions from an appropriate healthcare provider regarding how, when, and how long to provide medication.
3. ~~**For more than one medication (prescriptions, over-the-counter medications, or both):** Must include information from a healthcare provider certifying that the~~

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<sup>1</sup> If a physician's services are required, the District may not be responsible for paying this cost.

~~drugs are not known to adversely interact or information regarding how to avoid any known adverse drug interactions.—(need waiver if you remove.)~~

4. **For students with allergies:** Allergies should be noted by Health Care provider with any additional information needed by staff administering the medication.
5. **For all requests for the school to provide medication:**
  - a. Contact numbers for the student's parents/guardians and healthcare provider(s).
  - b. Waiver of confidentiality allowing administration or the eligible school medication provider to contact the student's healthcare provider(s) with questions or concerns and allowing the District to share information about the student's health condition and/or medication regimen with any school employee/volunteer with a legitimate need to know.
  - c. Information on possible adverse reactions and side effects associated with each medication that the parent/guardian is requesting the school to provide.

### **Medication Check-In Requirements When District is Providing Medication**

When sending medication to school, parents/guardians must comply with the following requirements:

1. If the over-the-counter medication is supplied by the student's parent or guardian, it must be supplied in the original manufacturer's container, and the container must list the ingredients, recommended dosage, expiration date, administration instructions, and storage instructions (if any) in a legible format. The container must be labeled with the student's name, **and, if unsealed, the number or amount of medication in the container. (Must keep)**
2. Prescription medications must be supplied in the original pharmacy-labeled container and include the name and phone number of the pharmacy. The container must list, in a legible format, the name of the student, name of the prescription medication, dose, expiration date, storage instructions (if any), administration directions, and number or amount of medication included. **The parent/guardian must indicate how much medication remains in the container. Medication must be counted by two adults when received by school. (Must keep)**
3. If dispensing equipment is required (e.g., measuring cups, droppers), it must be provided by the parent/guardian. The equipment must be clean, operable, and labeled with the student's name. Any special medical equipment storage instructions must be provided to the school by the parent/guardian or student's healthcare provider.

All medication must be hand delivered by a parent/guardian to the designated district official. This official shall ensure that the appropriate authorization form(s) is/are complete, that the medication has not expired, that the medication is appropriately labeled in accordance with above requirements, and that parents/guardians have complied with all other applicable provisions of this policy before accepting the medication from the parent/guardian.

### **Student Self-Administration Requirements<sup>2</sup>**

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<sup>2</sup> NOTE: These requirements are not applicable to emergency medication governed by NDCC 15.1-19-16.

A parent/guardian must sign a written form permitting his/her student to self-administer medication in school prior to the District authorizing this action. A new authorization form is required anytime the student has a change in medication regimen, when a new medication is to be provided, and at the beginning of each school year. This form must include the following:

1. **For prescription medication:**
  - a. Authorization to self-administer medication from the student's healthcare provider. This authorization must indicate whether the student is authorized only to self-administer the medication or is authorized to carry and self-administer the medication. Students may carry one day's supply of medication, unless supplied in a multi-dose container (i.e. inhaler, epi-pen, etc.)
  - b. Instructions from an appropriate healthcare provider on how, when, and how long the student will need to self-administer medication.
  - c. Certification from the healthcare provider that the student has received instruction in and is capable of self-administering the medication in a responsible and secure manner.
2. **For over-the-counter medication:**
  - a. Instructions from the parent/guardian on how, when, and duration the student will self-administer medication. If the student will take a dosage other than as recommended by the manufacturer, the District requires approval from an appropriate healthcare provider prior to authorizing the student to self-administer.
  - b. Certification from the parent/guardian that the student has received instruction in and is capable of self-administering the medication in a responsible and secure manner. This certification must indicate whether the student has parental consent only to self-administer the medication. Students may carry one day's supply of medication, unless supplied in a multi-dose container (i.e. inhaler, epi-pen, etc.)
3. ~~For more than one medication (prescriptions, over-the-counter medications, or both): Must include all applicable information above and information from a healthcare provider certifying that the drugs are not known to adversely interact or information on how to avoid any known adverse drug interactions and certification from the student's parent/guardian that the student has been educated and trained in such preventative measures. (Need waiver)~~
4. **For students with allergies:** If a student has any known allergies, the parent/guardian/health care provider shall list allergies and any additional information needed by staff.
5. **All student self-administration of medication requests must include:**
  - a. Contact numbers for the student's parents/guardians and healthcare provider(s)
  - b. Waiver of confidentiality allowing administration or an eligible school medication provider to contact the student's healthcare provider(s) with questions or concerns and allowing the District to share information about

the student's health condition and/or medication regimen with any school employee/volunteer with a legitimate need to know.

- c. Information on possible adverse reactions and side effects associated with each medication the student will self-administer.

Students will be prohibited from carrying medication that has special storage requirements such as, but not limited to, medication that requires refrigeration. The District may require the student to comply with additional medication storage requirements for safety reasons. These requirements will be developed on a case-by-case basis.

### **Self-Administration Check-In Requirements<sup>3</sup>**

Before a student self-administers medication in schools, the following check-in procedures are required:

1. Over-the-counter medication must be in the original manufacturer's container, and the container must list the ingredients, recommended dosage, expiration date, administration instructions, and storage instructions (if any) in a legible format. The container must be labeled with the student's name, and, if unsealed, the medication must be counted by two adults when received by the school. ~~the number or amount of medication in the container.~~ (must keep)
2. Prescription medications must be in the original pharmacy-labeled container and include the name and phone number of the pharmacy. The container must list, in a legible format, the name of the student, name of the prescription medication, dose, expiration date, storage instructions (if any), administration directions, number or amount of medication included. **The parent/guardian must indicate how much medication remains in the container.** Medication must be counted by two adults when received by school.
3. If dispensing or other medical equipment is required for a student to self-administer medication (e.g., measuring cups, droppers), it must be provided by the parent/guardian. The equipment must be clean, operable, and labeled with the student's name. Any special medical equipment storage instructions must be provided to the school.

Prior to a student self-administering medication, the medication must be hand delivered by a parent/guardian to the designated district official. This official shall ensure that the appropriate authorization form(s) is/are complete, that the medication has not expired, that the medication is appropriately labeled in accordance with above requirements, and that the parent/guardian and student has complied with all other applicable provisions of this policy before authorizing a student to self-administer the medication.

The student shall be issued a medication self-administration pass. This pass shall serve as verification that a student has received permission to self-administer medication. Students shall be required to return this pass to the school office once the pass expires. Failure to return the pass or continued self-administration of medication after the pass expires may result in disciplinary action.

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<sup>3</sup> NOTE: These requirements are not applicable to emergency medication governed by NDCC 15.1-19-16. See form ACBD-E4.

### **Additional Prohibitions, Restrictions, and Requirements for Students**

All students are required to comply with the district's policy on drug and alcohol free schools, which contains prohibitions on illegal activities associated with prescription and over-the-counter medication. Students who violate the Drug and Alcohol Free Schools policy by engaging in a prohibited activity with medication originally authorized by this policy may be subject to disciplinary action. In addition, the District may refuse to provide medication to the violating student and/or may prohibit the violating student from self-administering medication as long as:

1. The student is **not** covered by an IEP or 504 Plan.
2. The medication is **not** covered by an emergency provision in law or needed on an emergency basis as determined by administration in consultation with the student's healthcare provider (i.e., an inhaler, epi-pen, or insulin).

Parents/guardians of violating students not subject to an exception above will be required to make arrangements to provide medication to their children during the school day.

Students who are covered by this policy and taking medication at school must agree to report any known sign or symptom of a side effect, adverse medication reaction, or allergic reaction to a school official when the student is in school or otherwise under the school's supervision. Students authorized to carry medication must agree not to leave the medication unattended or unsecured and accessible to other students.

### **Medication Off-Campus When Student is Under District Supervision**

Parents/guardians must make arrangements with the building principal for students who will require medication off-campus while under the district's supervision prior to the activity or event (e.g., students who participate in extracurricular events or field trips). At a minimum, parents/guardians making such a request shall be required to comply with the applicable authorization requirements contained in this policy. The District shall develop, on a case-by-case basis, check-in and storage requirements for all medication provided or self-administered in this context. The District may consult the student's healthcare provider(s) when developing these rules.

### **Liability Disclaimer**

It is not the intent of the District to expand or modify the district's potential liability exposure through the development of this medication program. The district's voluntary creation of this program shall not be construed to create or assume any potential liability under any local, state, or federal law or regulation. State law provides liability protection for establishing a school medication program and providing medication under said school medication program. This protection extends to all eligible school medication providers, the District, and the Board so long as each party is acting in good faith.

The District is not responsible for determining the qualifications of healthcare providers whose signatures appear on prescriptions and other medical documentation submitted to the District by parents/guardians. The District assumes that by signing such documentation, the healthcare provider is attesting to the validity of his/her qualifications and credentials. The District will comply with healthcare providers' orders but assumes no liability for their content.

- ACBD-AR, School Medication Program Regulations
- ACBD-E1, School Medication Provider Opt-Out or Opt-In and Verification of Eligibility Form
- ACBD-E2, Non-Self Administering Medication Consent Form
- ACBD-E3, Self Administering Medication Consent Form
- ACBD-E4, Self Administering Medication Consent Form (Grades 6-12)
- ACBD-E5, Medication Pass
- ACBD-E6, Medication Pass Log
- ACBD-E7, Record of Supervised Medication/Treatment
- ACBD-E8, Medication Incident Report
- ACBD-E9, Medication Pickup Notice
- ACBD-E10, Medication Disposal
- ACBD-E11, Emergency Plan
- DEAA, Drug & Alcohol Free-Workplace
- FFA, Student Alcohol & Other Drug Use/Abuse
- FGA, Student Education Records

**End of Dickinson School District #1 Policy ACBD ..... Amended: 06/16/14**