

Medication at School

General Statement

Under normal circumstances, prescription and non-prescription, over-the-counter (OCT) medication, should be administered before and/or after school hours under supervision of the parent/guardian. If a student must receive prescription or OTC oral or topical medication, eye drops, ear drops, or nasal spray from an authorized staff member, the parent/guardian must submit a written request accompanied by a written authorization from a licensed healthcare practitioner (LHP), prescribing within the scope of his or her prescriptive authority. Oral medications are administered by mouth either by swallowing or by inhaling, including through a mask that covers the mouth or mouth and nose. If the medication will be administered for more than fifteen consecutive days, the LHP must also provide written, current, and unexpired instructions for the administration of the medication.

The Superintendent will establish procedures for:

- A. Designating staff members who may administer medication to students:
- B. Training, delegation, and supervision of staff members in the administration of oral medication to students by a registered nurse (RN);
- C. Obtaining signed and dated parent/guardian and LHP request and authorization for the administration of medications, including instructions from the LHP if the medication is to be given for more than fifteen (15) days;
- C. Storing medication in a locked or limited access area;
- D. Maintaining records pertaining to the administration of medication;
- E. Permitting, under limited circumstances, students to carry and self-administer medications necessary to their attendance at school; **and**
- F. Permitting possession and self-administration of over-the-counter topical sunscreen products. (See Sunscreen Section below). This procedure may include product identification, storage, limitations of volume of sunscreen product possessed, time and circumstances of use, and such other reasonable conditions deemed necessary; ~~and~~

The use of injectable medication for the treatment of anaphylaxis is covered in School District Policy and Procedure 3419 Self-Administration of Asthma and Anaphylaxis Medication and School District Policy and Procedure 3420, Anaphylaxis Prevention and Response.

Medications including suppositories, rectal gels, or injections (except for emergency injections for students with anaphylaxis, that is covered in School District Policy and Procedure 3419 Self-Administration of Asthma and Anaphylaxis Medication and School District Policy and Procedure 3420, Anaphylaxis Prevention and Response) may not be administered by school staff other than by a RN, licensed practical nurse (LPN), or in some situations by a parent designated adult (PDA).

If the school decides to discontinue administering a student's medication, the Superintendent or designee must provide notice to the student's parents/guardian orally and in writing prior to the discontinuance. There must be a valid reason for the discontinuance that does not compromise the health of the student or violate legal protections for the disabled.

In accordance with District Policy 3414, it is the policy of the Board of Directors that students with asthma or anaphylaxis are afforded the opportunity to self-administer prescribed medications. The student’s parent or guardian shall submit a written request and other documentation required by the school. The student’s prescribing health care provider must provide a written treatment plan. The student shall demonstrate competence, to possess and self-administer prescribed medications during school and at school sponsored events, to the District nurse.

For an emergency response to a student epileptic seizure, if a school nurse is on the premises, the nurse may administer to the student a nasal spray containing a prescribed legend drug/controlled substance. If a school nurse is not on the premises, a nasal spray containing a prescribed legend drug/controlled substance may be administered to the student by: 1) a trained school employee, provided that the employee has received appropriate RN delegation and volunteered for training pursuant to RCW 28A.210.260; or 2) a parent-designated adult. A parent-designated adult is a volunteer who receives training from a healthcare professional or expert in epileptic seizure care selected by the parent. The parent-designated adult will be included in the student’s Emergency Care Plan on file with the school.

Sunscreen

Over-the-counter topical sunscreen products may be possessed and used by students, parent/guardians, and school staff without a written prescription or note from a licensed health care provider if the following conditions are met:

- A. The product is regulated by the US Food and Drug administration as an over-the-counter sunscreen product; and
- B. If possessed by a student, the product is provided to the student by a parent/guardian.

Medical Marijuana

Washington State law (RCW 69.51A.060) permits the use of medical marijuana, however, federal law (Title IV-Part A-Safe and Drug Free Schools and Communities and the Controlled Substances Act (CSA) (21 U.S.C. § 811) prohibits the possession and use of marijuana on the premises of recipients of federal funds including educational institutions. Therefore, there will be no accommodation of any marijuana use on any school grounds, school bus or at any other school related activities.

Cross Reference	Policy 3419 Policy 3420	Self-Administration of Asthma and Anaphylaxis Medications Anaphylaxis Prevention and Response
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Legal References:	RCW 28A.210.260 RCW 28A.210.270	Public and Private Schools - Administration of Oral Medication - Conditions Public and Private Schools - Administration of Medication - Immunity from Liability - Discontinuance, Procedure
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Management Resources:

- Policy News, August 2018
- Policy News, July 2017
- Policy News, August 2012 “Medication” Definition Expanded
- Policy News, February 2001 Oral Medication Definition Expanded

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