

STUDENTS

3510

Student Medicines

This policy shall be reviewed annually by the Board of Directors or their designee.

Assistance in Self Administration of Medicines by Students

Any School employee authorized in writing by the School administrator or School principal:

1. May assist in the self-administration of any drug to a pupil provided:
 - A. The student's parent/guardian has consented in writing; and
 - B. The drug may lawfully be sold over the counter without a prescription.

Such administration must be as described in the written instructions provided in accordance with this policy.

2. May assist in the self-administration of a prescription drug to a pupil in compliance with the written instructions of a licensed health care practitioner, if the pupil's parent/guardian consents in writing.

Administering Medicines to Students

No employee except a qualified health care professional may administer a drug or prescription drug to a pupil under this policy except in an emergency situation.

The Board will permit the administration of medication to students of the Charter School. Pursuant to the written authorization of the student's licensed health care practitioner, as well as the written authorization of a parent/guardian, the School nurse (who has received direction as to the administration of medication by the student's licensed health care practitioner) may administer medication to any student in the School.

Where administration of medication is a routine activity for a particular student, the subject shall be addressed in a student's health care plan, Section 504 Plan, or IEP as applicable.

Diagnosis and treatment of illness and the prescribing of drugs are never the responsibility of a School employee and should not be practiced by any School personnel.

The absence of a School nurse for the administration of medication shall be addressed on a case-by-case basis considering compliance with Idaho law and the medical needs of the student.

Emergency Administration of Medicines

In case of an anaphylactic reaction or the risk of such reaction, or in the case of a seizure, a school nurse or delegate may administer medication to any student in need thereof on the School grounds, in the School building, or at a School function, according to the standing order of the chief medical advisor or the student's private physician.

In the absence of a School nurse, the administrator or designated staff member exempt from the nurse licensure requirements who has completed training in administration of medication, may give emergency medication to students. There must be on record a medically diagnosed allergic condition which would require prompt treatment to protect the student from serious harm or death.

Record of the medication administered in an emergency will be entered on an Individual Student Medication Record and filed in the student's cumulative health folder.

Self-Monitoring and Treatment of Diabetes

A student with diabetes, upon written request of the student's parent/guardian and written authorization from the student's treating physician, shall be permitted by the Board to perform blood glucose checks, administer insulin through the insulin delivery system the student uses, treat hypoglycemia and hyperglycemia, and otherwise attend to the care and management of the student's diabetes in the classroom and in any area of the School or School grounds, and to possess on the student's person at all times all necessary supplies and equipment to perform these monitoring and treatment functions.

Epilepsy and Seizure Disorder Plans

Upon written request of the parent/guardian of a student who has epilepsy or another seizure disorder, the School shall authorize implementation of a plan – whether a Section 504 plan, Health or Emergency Care Plan, or Seizure Disorder Plan, as deemed appropriate for each individual student. The plan will include, but is not limited to, the following:

1. Providing notice of the student's condition to all employees who interact with the student;
2. The student's symptoms;
3. Written orders from the student's physician on providing care to the student;

4. Whether the student may fully participate in exercise and sports and, if applicable, any accommodations required;
5. Accommodations for school-related activities, such as school trips and after-school activities;
6. A description of how medical treatment of the condition may affect the student's education, if applicable;
7. The student's understanding of and ability to manage the epilepsy or seizure disorder.
8. How to maintain communication with the student, parents/guardians, the student's healthcare team, and the employee responsible for administering emergency medication; and
9. A list of qualified staff who may administer emergency medication to the student for a seizure.

The plan may be updated annually and as necessary if there is a change in the health status of the student. The plan must also address the notification to the appropriate staff.

All employees who have received notification that a student they interact with has epilepsy or another seizure disorder will be provided with information about how to recognize indicators for epilepsy and seizure disorder, epilepsy, or seizure disorder first aid, when to call for assistance, and parent/guardian and emergency contact information for that student. The training shall be provided by another medical professional selected by the Executive Director and/or Principal or designee. **The training may be individualized to each student, if necessary.**

Self-Administration of Asthma Medication, Insulin/Diabetic Treatment, Seizure Disorder Medication, or Epinephrine Auto-Injectors

Pursuant to Idaho Code covering the self-administration of asthma medication, the following shall apply to epinephrine auto-injectors, seizure disorder medication, insulin, or blood glucose monitoring supplies if a parent/legal guardian chooses to have their child self-administer medication:

1. The parents/guardians of the pupil shall provide to the Board or designee written authorization for the self-administration of medication.
2. The parents/guardians of the pupil shall provide to the Board or designee written certification from the student's physician that the student has a severe allergic reaction (anaphylaxis), asthma, another potentially life-threatening respiratory illness, epilepsy or another seizure disorder, or diabetes and is capable of, and has been instructed in, the proper method of self-administration of medication. In cases where the pupil has severe or life-threatening allergies, Policy 3515 Food Allergy Management, and any related procedures shall be followed. For students with a severe allergic reaction, asthma,

another potentially life-threatening respiratory illness, seizure disorder, or diabetes the student's physician or health care provider-supplied information shall contain:

- A. The name and purpose of the medicine;
 - B. The prescribed dosage;
 - C. The time(s) at which or the special circumstances under which medication should be administered;
 - D. The length of time for which medication is prescribed;
 - E. The possible side-effects of the medicine;
 - F. Actions to take in the event of an emergency, including if the medication does not improve the child's breathing or allergic reaction;
 - G. Contact information for the physician and parent/guardian; and
 - H. If applicable, a list of the child's asthma or seizure triggers or allergies.
3. The School's administration and appropriate teachers and School personnel shall be informed that the student is self-administering prescribed medication. Such notification shall be done in a manner so as to best preserve the privacy of the student and the student's medical condition to the extent appropriate.

For students with severe or life-threatening allergies, this information may be provided in the student's Emergency Care Plan.

Additional Requirements for Self-Administration of Medicines

The Board or Board designee will inform the parents/guardians of the pupil in writing that the Charter School and its employees or agents shall incur no liability as a result of any injury arising from the self-administration of medication by the pupil, absent any negligence by the School, its employees, or its agents, or as a result of providing all relevant information provided pursuant to subdivisions of this subsection with the School nurse, absent any negligence by the School, its employees, or its agents, or in the absence of such nurse, to the School administrator.

The parents/guardians of the pupil shall sign a statement acknowledging that the School shall incur no liability as a result of any injury arising from the self-administration of medication by the pupil and that the parents/guardians shall indemnify and hold harmless the School and its employees or agents against any claims arising out of the self-administration of medication by the pupil.

Students who are authorized to carry their medication, supplies or equipment necessary for managing their diabetes, allergies, asthma, or epilepsy or other seizure disorder may be retested periodically to ensure they are still capable of correctly using the medication.

As used in this section:

1. "Medication" means:
 - A. An epinephrine auto-injector;
 - B. A metered dose inhaler or a dry powder inhaler; and
 - C. Insulin, insulin delivery system, and/or supplies or equipment necessary for diabetes monitoring and/or treatment

prescribed by a physician and having an individual label;

2. "Self-administration" means a student's use of medication pursuant to prescription or written direction from a physician; and
3. A student who is permitted to self-administer medication pursuant to this section shall be permitted to possess and use the prescribed medication at all times.

Any School employee authorized in writing by the School administrator or principal may assist with self-administration of medications provided that only the following acts are used:

1. Verbal suggestions, prompting, reminding, gesturing, or providing a written guide for self-administering medications;
2. Handing a prefilled, labeled medication holder, labeled unit dose container, syringe, or original marked, labeled container from the pharmacy to the student;
3. Opening the lid of the above container for the student;
4. Guiding the hand of the student to self-administer the medication;
5. Holding a container of fluid and assisting the student in drinking fluid to assist in the swallowing of oral medications; and/or
6. Assisting with removal of a medication from a container for students with a physical disability which prevents independence in the act.

Handling and Storage of Medicines

All medications, including those approved for keeping by students for self-administration, must first be delivered by the parent or other responsible adult to the nurse or employee assisting with the self-administration of medication. The nurse or the employee must:

1. Examine any new medication to ensure that it is properly labeled with dates, the name of student, the medication name, the dosage, and the physician's name;

2. If administration is necessary, the nurse must develop a medication administration plan for the student before any medication is given by School personnel;
3. Record on the Student's Individual Medication Record the date the medication is delivered and the amount of medication received;
4. Store medication requiring refrigeration at 36F - 46F; and
5. Store prescribed medicinal preparations in a securely locked storage compartment excluding those medications approved for self-administration. Controlled substances will be contained in a separate compartment, secured, and locked at all times.

No more than a 45-school-day supply of a medication for a student will be stored at the School. All medications, prescription and nonprescription, will be stored in their original containers. Access to all stored medication will be limited to persons authorized to administer medications or assist in the self-administration of medications. Each School will maintain a current list of those persons authorized by delegation from a licensed nurse to administer medications.

Disposal of Medication

School personnel must either return to the parent/guardian or destroy (with permission of the parent/guardian) any unused, discontinued, or obsolete medication. Medicine which is not repossessed by the parent/guardian within a seven-day period of notification by School authorities will be destroyed by the School nurse in the presence of a witness

Medications to Reverse an Opioid Overdose

Opioid Overdose: The School participates in a program that provides treatment of opioid overdoses, as outlined in Policy 3518.

Legal References:	IDAPA 08.02.03.160.01.a.i	Rules Governing Student Health Policies
	IC § 33-520	Policy Governing Medical Inhalers, Epinephrine Auto-Injectors, Insulin and Blood Glucose Monitoring Supplies
	IC § 54-1401	Nurses — Purpose — License Required — Representation to the Public



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