

REGULATIONS FOR ADMINISTERING MEDICINES TO STUDENTS

The Executive Director shall be responsible for the administration of the Board's policy pertaining to the administration of medicines by school personnel.

Prescribed medication should preferably be given at home; however, administration of medicine by school personnel is often necessary to meet the health needs of an individual student.

The following rules pertain to those medicinal preparations which must be administered during hours when school is in session. Such medicinal preparations shall not include hallucinogenic or narcotic drugs. Medicines shall be administered to students only pursuant to the written order by a legally qualified physician, physician assistants, Advance Practice Registered Nurse (APRN) and the written authorization of the parent or guardian of the student received by the school principal.

1. The LEARN registered nurse, school nurse, or in the absence of a nurse, the trained administrator or any trained teacher, may administer medicinal preparations as specified in state law. Principals and teachers may administer oral, topical, or inhalant medications. Injectable medications may be administered by a principal or teacher only to a student with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death. Investigational drugs may not be administered by principals or teachers. According to the law, no such school nurse, principal, or teacher shall be liable to such student, or a parent or guardian of such student, for civil damages for any personal injuries which result from acts or omissions of such nurse, principal, or teacher in administering such preparations which may constitute ordinary negligence.
2. A physician/dentist/physician's assistant/APRN's order for medicinal preparations to be administered shall specify in writing the duration of the order, name of the drug, and the dosage.
3. In the event a private physician is also the school physician, his/her orders for medication to be administered in school are to be written and accompanied by the written authorization of a parent or guardian.
4. Upon receiving a request for the administration of medicine, the LEARN registered nurse or school nurse shall contact the parent and/or the private physician/dentist/physician assistant/APRN's, relative to the recommended plan, for administering the medication during school hours. The LEARN registered nurse or school nurse, following consultation with the school medical adviser, will determine whether the medication can be administered at home before and after school is in session.
5. When the LEARN registered nurse or school nurse and the school medical adviser determine that the plan for administration of medication during school hours is necessary for the well-being of the student, arrangements will be made to give such medication. The prescribing physician/dentist/physician assistant/APRN will be responsible for the medical care of the student.
6. When the LEARN registered nurse or school nurse and the school medical adviser question the necessity for administering such medication during school hours, the prescribing physician/dentist/physician assistant/APRN will be notified of the decision.
7. The LEARN registered nurse or school nurse will be responsible for obtaining additional information regarding medication as indicated by the prescribing physician/dentist/physician assistant/APRN.

8. Once all arrangements for administering the medication have been accomplished, the medication must be delivered directly to the LEARN registered nurse or school nurse, LEARN teacher, or LEARN van drivers by the child's parent or guardian. The nurse must examine on-site any new medication, medication order, and permission form, and develop a medication administration plan for the student before any medication is given by any school personnel. The nurse may consult with the private physician/dentist/physician assistant/APRN regarding safe administration of any specific medication. The school medical advisor may also be consulted regarding medications and/or the administration regime.
9. The medication must be delivered in and dispensed from the original container properly labeled with the name and strength of the medication, name of patient, prescribing physician/dentist/physician assistant/APRN, the date of the original prescription, and directions for taking. Medications requiring refrigeration shall be stored in a refrigerator at no less than 35 degrees Fahrenheit or no more than 46 degrees Fahrenheit.
10. Students shall generally not be allowed to self administer medication. In the rare instances when self-administration is approved by the school administrator, that approval is contingent on the following:
 - a. a physician/dentist/physician assistant/APRN provides a written order for self-administration; and,
 - b. there is written authorization from the student's parent or guardian; and,
 - c. the LEARN registered nurse or school nurse has evaluated the situation and deemed it to be safe and appropriate; has documented this on the student's cumulative health record; and has developed a plan for general supervision; and,
 - d. the principal and appropriate teachers are informed that the student is self-administering prescribed medication; and,
 - e. such medication is transported to the school and maintained under the student's control in accordance with the Board of Director's policy on self-medication by students.
11. Each LEARN classroom shall keep a record, on which shall be recorded in ink, the administration of medicinal preparations showing the following:
 - a. the name of the student; and,
 - b. the name of the medication; and,
 - c. the dosage of the medication; and,
 - d. the route of administration; and,
 - e. the frequency of administration; and,
 - f. the name of the prescribing physician/dentist/physician assistant/APRN and,
 - g. the date the medication was ordered; and,
 - h. the quantity received; and,
 - i. the date the medication is to be re-ordered; and,
 - j. any student allergies to food and/or medicine; and,
 - k. the date and time of administration or omission including the reason for the omission; and,
 - l. the dose or amount of drug administered; and,
 - m. the full legal signature of the nurse, principal, or teacher administering the medication.

All recorded transactions shall not be altered. If an error is made when recording, a pen-line should be run through the entry, the correct data recorded on the next line and signed, and the person making the error should complete the medication error form. This form will be filed in the student's health record.

12. All such records shall constitute a record which shall be made available for surveillance by State Department of Health representatives and shall be kept in the office of the LEARN registered nurse or school nurse for a period of three years from the last transaction recorded in the book.
13. The written order of the physician/dentist/physician assistant/APRN and the written authorization of the parent or guardian shall be filed and kept at least three years in the student's health record.
14. No more than a 45-day supply of a prescribed medication shall be stored in a school.
15. The prescribed medicinal preparations shall be stored in a locked container, cabinet, or closet used exclusively for the storage of medication. In the case of controlled substances, they shall be stored separately from other drugs and substances in a separate, secure, substantially constructed, locked metal or wood cabinet. Both the LEARN registered nurse and the teacher are to possess keys. The LEARN registered nurse and the Executive Director are to maintain a current list of those persons authorized to administer medicine.
16. The written order of the physician/dentist/physician assistant/APRN, the written authorization of the parent or guardian, and the completed medication administration record for each student shall be filed in the student's cumulative health record.
17. A physician/dentist/physician assistant/APRN's verbal order, including a telephone order, for a change in medication can be received only by the LEARN registered nurse or school nurse. Any such verbal order must be followed by a written order within three (3) school days.
18. Each classroom teacher shall have the following information readily available: Connecticut Poison Control Information Center 1-800-343-2722, the physician/dentist/physician assistant/APRN, clinic, or emergency room to be contacted in the event of a medical emergency, and the person responsible for decision making in the absence of the school nurse.
19. LEARN will provide training for administrators and teachers for the safe administration of medications to students in the absence of the LEARN registered nurse or school nurse. The training may be provided by the LEARN registered nurse or school nurse. The training will be mandatory for LEARN teachers and administrators. Included in the training program will be sessions conducted annually by the LEARN registered nurse which will take place at the beginning of the school year.

Only principals or teachers who have received such training from the LEARN registered nurse or school nurse shall be allowed to administer medications to students. This training shall include, but not be limited to:

- (a) the procedural aspects of medication administration, the safe handling and storage of medications, and recording; and
- (b) the medication needs of specific students, medication idiosyncrasies, and desired effects, potential side effects, or untoward reactions.

The nurse responsible for the training shall document the training on Record Form, Record of Training of School Personnel in the Administration of Medicines and Record Form used for individual students.

The Executive Director shall maintain and update annually, documentation that such training has been provided and successfully completed.

20. All unused, discontinued, or obsolete medications shall be removed from storage areas, and either returned to the parent or guardian or, with the permission of the parent or guardian, destroyed in the following manner:
- a. noncontrolled drugs shall be destroyed in presence of at least one (1) witness;
 - b. controlled drugs shall be destroyed in accordance with part 1307.21 of the Code of Federal Regulations or by surrender to the Commissioner of the Department of Consumer Protection.

21. In any case of error in administration of medications, if immediate emergency measures are deemed necessary, the LEARN registered nurse, school nurse, administrator, or teacher should initiate standard emergency procedures.

The parent of the student involved, the prescribing physician/dentist/physician assistant/APRN, the LEARN registered nurse, school nurse, and the LEARN school administrator should be notified immediately of any medication errors.

In any case of error in administration of medications, the person making the error shall complete form number 008S/8, Medication Error or Incident Report. This form shall be filed in the student's cumulative health record.

22. The LEARN registered nurse or school nurse is responsible for general supervision of administration of medications in the schools to which that nurse is assigned. This shall include, but not be limited to:

A. Availability on a regularly scheduled basis to:

1. review orders or changes in orders, and communicate these to the personnel designated to give medication for appropriate follow-up;
2. set up a plan and schedule to ensure medications are given;
3. provide training to administrators, teachers, and other licensed nursing personnel in the administration of medications;
4. support and assist other licensed nursing personnel, principals, and teachers to prepare for and implement their responsibilities related to the administration of specific medications during school hours;
5. provide consultation by telephone or other means of telecommunication. In the absence of the LEARN registered nurse or school nurse, a licensed physician or nurse may provide this consultation.
6. obtain additional information regarding administration of medications and/or side effects of medications.

B. Implementation of policies and procedures regarding receipt, storage, and administration of medications.

C. Monthly review of all documentation pertaining to the administration of medications for students.

D. Work-site observation of medication administration by teachers and principals who have been newly trained.

E. Periodic review, as needed, with licensed nursing personnel, administrators, and teachers regarding the needs of any student receiving medication.

REGULATIONS FOR FIRST AIDE AND ILLNESS CARE

EXCLUSION FROM SCHOOL

Students must be excluded from school when the following conditions exist:

1. Temperature of 100 or over.
2. Temperature of 99 with symptoms.
3. Any skin eruption suggestive of a communicable disease.
4. Any skin eruption suggestive of impetigo or scabies.
5. Live pediculosis (head lice) or nits are found in the hair.
6. Poor body hygiene which is offensive to others.
7. Any possible eye infection.

Students may be readmitted to school as specified:

1. Children who have had pediculosis, or scabies must be checked by the nurse before readmission.
2. Children with pediculosis may be readmitted when proof of treatment with an insecticide has been given to the school personnel.
3. Children may return to school following the chicken pox one week after the first crop of vesicles appears.
4. Children with impetigo may return may return to school 24 hours after antibiotic therapy has begun.
5. Children with mumps may return to school when swelling has subsided.
6. children with bacterial infections of the eye may return when symptoms have cleared.
7. Children with streptococcal infections may return 24 hours after antibiotic therapy has begun.
8. Children with scabies may return after treatment with an insecticide.
9. A note from a physician stating the child is free from communicable disease will be accepted in all cases.

ACCIDENTS IN THE HOME OR OFF SCHOOL PREMISES

Responsibility for such accidents rests with the family and the family physician. When accidents or illnesses occur outside, the school nurse and the teacher should have their family assume the responsibility for medical attention. If necessary, the child should be sent home and the family advised to obtain medical care. The school should give only emergency or first aid nursing care.

WHO SHALL DO FIRST AID IN THE SCHOOLS

1. First aid shall be done by the nurse, principal or teacher, following the LEARN First Aide and Illness procedure.
2. No child or children shall be permitted to give first aid to other children.
3. A record of all children receiving first aid shall be kept in a notebook provided for that purpose. The book shall be kept by LEARN for 3 years.