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This sample rule outlines general procedures for administering prescription drugs and nonprescription drug products to students. It includes protocols for obtaining and reviewing required written instructions and consent, storage and disposal of medications, and ecoral procedures are consent to implement PRG 453.4 Sample Policy 1.

MPORTANT: Section 118.29(4) of the state statutes provides that in developing the required policy and procedures related to the administration of medication to students, school boards 'shall seek the assistance of one or more school nurses." Accordingly, before adopting any procedures based on this sample (in whole or in part) or otherwise substantively amending the district's local procedures, a district must obtain assistance and input from a school nurse. The WASB advises that the final procedures be formally adopted by a vote of the school board.).

1. Authorization for School Personnel to Administer Medication to Students

A building principal (or the District Administrator or their designee) shall designate, in writing, the names of appropriate school personnel (including employees, registered nurses serving the district, volunteers and/or licensed school bus drivers) who will have the authority to administer medications to students in a manner consistent with all relevant policies and procedures.

- a. The <u>principal District Administrator or their designee</u> may make a general designation of authority (1) for any registered nurse serving the District to administer any medication by any means permitted within the scope of the individual's nursing license; and (2) for other school personnel to administer medication via ingestion, eye drops, ear drops, topical application, an inhaler, and/or an epinephrine auto-injector or epinephrine prefilled syringe, provided that the individual has completed any applicable statemandated training. Nothing in this paragraph prevents, in certain cases, a principal or registered nurse serving the schools from expressly limiting the personnel who will have authority to administer particular medication to a particular student.
- b. In the event any school personnel other than a registered nurse will be asked to administer other medication to students or other individuals in a manner not covered by a general designation under the previous paragraph, the principal district registered nurse shall make case-by-case determinations of the school personnel who will have the authority to administer such medications, and ensure that such personnel have completed all state-mandated and District-required training. A registered nurse serving the school or other health care professional shall assist the principal in ensuring that such personnel receive any additional instruction, support and supervision as may be appropriate.
- c. No school personnel, other than a health care professional, shall be involuntarily required to administer medication to students by any means other than ingestion. However, a registered nurse serving the school must decline to perform any medical act or service which the nurse is not competent to perform due to lack of education, training or experience.

<sup>1</sup> I left this part of the introductory note in as a reminder to review this policy with the school nurse prior to presentation to the board.

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- d. If a student requires assistance from school personnel in the administration of any medication or through any means that constitutes the delegation of a nursing act, or any other specialized health care services that constitutes the delegation of a nursing act, it shall be the responsibility of a registered nurse serving the school to: (1) delegate such tasks to appropriate school personnel, with proper authorization from the building principal; and (2) ensure that school personnel engaging in such activities receive appropriate training, instruction and supervision.
- e. All school personnel authorized to administer medication to students shall receive a copy of these procedures.

#### 2. Notification to School Personnel

If a student requires medication to be administered at school or at school activities, including administration by school personnel, the student's parent or guardian shall notify the <u>fidentify</u> the appropriate position(s) — e.g., building principal, registered nurse serving the school, or <u>health office staff!</u> of the student's needs. An adult student may directly notify such school staff of his/her medication-related needs.

3. Administration of Prescription Medication

[Except for the specific emergency situations identified below.] authorized school personnel will administer a prescription drug to a student only if all of the following conditions are met:

(Editor's Note: A district should delete the bracketed introductory phrase appearing in this sentence if the district's final adaptation of this sample includes neither section 4 of this sample, addressing separate emergency authority in connection with glucagon and epinephrine, nor section 5 of this sample, addressing emergency administration of an opioi antagonist in an opioid-related overdose situation.)

- a. The school has received written consent from the student's parent(s) or guardian(s) for designated school personnel to administer medication to the student in the dosage prescribed by the health care practitioner.
- b. The school has received written instructions from the student's health care practitioner regarding the administration of the prescribed medication. These instructions shall include the medication name, dose, route, frequency, time/conditions, duration and the health care practitioner's name and contact information. Where applicable or where requested by school personnel, such instructions may also include relevant precautions, information about possible reactions and/or interventions, and the circumstances under which the health care practitioner should be contacted.
- c. The prescription medication is supplied to the school in the original pharmacy-labeled package and it specifies the name of the student, the name of the prescriber, the name of the prescription drug, the dose, the effective date, and the directions in a legible format.

<sup>2</sup> Note the instruction to delete the bracketed language (highlighted in yellow) if the policy does not allow any exceptions for emergencies. Your current policy and rule allow limited exceptions. Note that all text highlighted in green are editor's notes that should be deleted from the final draft of the policy and rule.

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d. If the prescription medication is required to be injected into the student, inhaled by the student, rectally administered to the student, or administered into a nasogastric tube, a gastrostomy tube or a jejunostomy tube, the school personnel designated to administer the medication to the student has completed all state-mandated and District-required training required for administering medication through that particular means prior to administering the medication to the student. Such additional training is not required for health care professionals (e.g., registered nurses).

#### 4. Administration of Glucagon or Epinephrine by School Personnel in Emergency Situations

Editor's Note: If the district chooses not to authorize and provide appropriate training for the mergency administration of glucagon and/or epinephrine (i.e., in the absence of a studen pecific prescription and student-specific written consent and instructions), then the district hould delete or modify this section as needed. State law allows, but does not require, sch istricts to authorize such emergency administration of glucagon and epinephrine. School listricts are also not required to obtain or have on hand a supply of non-patient-specific lucagon or epinephrine. However, a district likely would need to have a supply of the nedication(s) on hand in order for the drugs to be available for possible administration in ictual emergency. School officials should be aware that it may be difficult for a school to btain a non-patient-specific prescription for epinephrine auto-injectors or prefilled syring the district does not adopt a physician-approved school allergy management plan, as thorized by section 118.2925 of the state statutes.}

School personnel who have been authorized to do so in writing and who have received all state-mandated and any District-required training may administer glucagon or epinephrine to a student (1) in an emergency situation if all of the requirements for the administration of a prescription medication, as defined in the previous section, have been met, or (2) under the following additional special circumstances:

- With respect to epinephrine, such school personnel may use an epinephrine autoinjector or prefilled syringe to administer epinephrine to any student who appears to be experiencing a severe allergic reaction if, as soon as practicable, the person administering the drug reports the allergic reaction by calling the telephone number "911" or, in an area in which the telephone number "9<u>11" is not available, the telephon</u>e number for an emergency medical service provider. [Editor's Note: If the district has oard-adopted and physician-approved school allergy management plan, as authorized by <mark>section 118.2925</mark> of the state statutes, school officials should make sure the he information in this paragraph is aligned to and consistent with the protocols that the olan establishes for the
- b. With respect to glucagon, such school personnel may administer glucagon to any student who the school bus driver, employee, or volunteer knows is diabetic and who appears to be experiencing a severe low blood sugar event with altered consciousness

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<sup>&</sup>lt;sup>3</sup> Review editor's note regarding inclusion of this section of rule and delete from final draft.

<sup>&</sup>lt;sup>4</sup> WCSD policy 453.5 Life-Threatening Allergy Management references "Guidelines for Managing Life-Threatening Allergies" which may include the board adopted school allergy management plan referenced in the editor's note. This section of the rule should be aligned with that plan.

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if, as soon as practicable, the person administering the drug reports the event by calling the telephone number "911" or, in an area in which the telephone number "911" is not available, the telephone number for an emergency medical service provider.

#### Administration of Opioid Antagonist (e.g., Narcan) by School Personnel in Emergency Situation

(Editor's Note: If the district chooses not to authorize the emergency administration of opioid antagonists (as provided in the next paragraph of this sample), then the district should not include this section in its adopted procedures. State law allows, but does not require, districts to authorize the administration of an opioid antagonist (e.g., Narcan®) to an individual who appears to be undergoing an opioid-related drug overdose. School districts are also permitted, but not required, to work with an authorized prescriber to obtain a prescription for an opioid antagonist that does not name the individual to whom the medication will be administered. However, as a practical matter, if a district chooses to authorize the emergency administration of opioid antagonists, the district would likely need to obtain such

School personnel who have been authorized to do so in writing and who have received all state-mandated and any District-required training may administer an opioid antagonist, if the drug is available (e.g., if the District has worked with a prescriber to obtain a supply that is kept on hand), to any student or other person who appears to be undergoing an opiod-related drug overdose if, as soon as practicable, the person administering the drug reports the drug overdose by calling the telephone number "911" or, in an area in which the telephone number "911" is not available, the telephone number for an emergency medical service provider.

#### 6. Administration of Nonprescription (Over-the-Counter) Medication

Authorized school personnel will administer nonprescription drug products to a student only if all of the following conditions are met:

- a. The parent or guardian has provided the appropriate school personnel with written consent and instructions.
- b. If the nonprescription medication is supplied by the student's parent or guardian, it is supplied in the original manufacturer's package, and the package lists the ingredients and recommended therapeutic dose in a legible format. School personnel may administer nonprescription medication to a student in a dosage other than the recommended therapeutic dose only if the request to do so is accompanied by the written approval of the student's health care practitioner.
- c. If the nonprescription medication is required to be injected into the student, inhaled by the student, rectally administered to the student, or administered into a nasogastric tube, a gastrostomy tube or a jejunostomy tube, the school personnel designated to administer the nonprescription medication to the student has completed any DPI-

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<sup>&</sup>lt;sup>5</sup> I did not find anything addressing the emergency administration of Narcan in your policies or in a search of the district website.

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approved training that is required for administering medication through that particular means prior to administering the medication to the student. Such training is not required for health care professionals (e.g., registered nurses).

#### 7. Student Possession and Use of Inhalers and Epinephrine

- a. An asthmatic student may possess (carry) and use a metered dose inhaler or dry powder inhaler while in school or at a school-sponsored activity under the supervision of a school authority if all of the following conditions are met:
  - the student uses the inhaler before exercise to prevent the onset of asthmatic symptoms or uses the inhaler to alleviate symptoms;
  - the student has the written approval of the student's physician and, if the student is a minor, the written approval of the student's parent or guardian; and
  - the written approval(s) is on file in the school records.
- b. A student may possess (carry) and use an epinephrine auto-injector (e.g., Epipen®) or epinephrine prefilled syringe if all of the following conditions are met:
  - the student uses the epinephrine to prevent the onset or alleviate the symptoms of an emergency situation;
  - the student has the written approval of his/her physician and, if the student is a minor, written approval of the student's parent or guardian; and
  - the written approval(s) is on file in the school records.

When providing the required approvals to building principals for students to possess and use their inhalers or epinephrine auto-injectors or prefilled syringes, parents and guardians and physicians should consider the student's knowledge of his/her medication and his/her ability to use the inhaler or epinephrine independently. If the physician or parent or guardian determines that it is appropriate to have assistance from school personnel in administering the inhaler or epinephrine to the student in any emergency or non-emergency situations, the medication must be administered in accordance with procedures outlined above for the administration of prescription medication.

#### 8. Student Possession and Use of Other Prescription and Nonprescription Medication

Editor's Note: This section presents one possible approach to the topic of student possession and possible self-administration of medication. This area is less regulated by state law than many of the topics addressed in previous sections of this sample rule (above). School district officials and nurses serving the district should carefully review this section and modify the content as needed to reflect the district's intent and practice. Ensure that any allowance for direct student possession and self-administration of medication is consistent with any related statements about this issue that are included in the related board policy (e.g., PRG 453.4 is applied to the self-administration of the related board policy (e.g., PRG 453.4 is applied to the self-administration of the related board policy (e.g., PRG 453.4 is applied to the self-administration of the related board policy (e.g., PRG 453.4 is applied to the self-administration of the related board policy (e.g., PRG 453.4 is applied to the self-administration of the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the related board policy (e.g., PRG 453.4 is applied to the rel

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Responsible students, as determined by the agreement of the parent or guardian and \_\_\_\_building principal and in consultation with a nurse serving the school as needed, may be permitted to possess and self-administer medications other than asthma inhalers and epinephrine in authorized delivery systems/mechanisms (as separately addressed above) without first obtaining written practitioner approval for such self-administration. The following factors, among others, will be considered in determining whether a student will be granted this permission:

- a. The type of medication;
- b. The reason for medication:
- c. The age of the student; and
- d. The responsibility of the student, including but not limited to compliance with all dosage and administration instructions provided by the manufacturer and/or the student's practitioner, compliance with all school rules and regulations relating to the presence of drugs in the schools, and the student's ability to provide for the safe and appropriate storage of the medication.

Although exceptions may be considered, this section regarding permission for self-administration of medication is intended to apply primarily to such requests by high school students. For students under the age of 18, a parent or guardian will provide the District with a signed, written statement of consent for self-administration by the student that identifies the name of the medication.

Any permission granted under this section may be revoked by the District, or withdrawn by the parent or guardian, at any time.

#### 9. Medication Storage and Disposal

- a. All prescription and nonprescription student medication in the District's possession shall be kept in a safe and secure location(s). Medication will be stored to maintain quality in accordance with the manufacturer's or health care practitioner's storage instructions.
   Medication which needs to be accessible to the student will be stored in an appropriate location per student need.
- b. For field trips and other co-curricular or extracurricular activities held off school premises, student medication will be stored in a secure location determined appropriate by the activity supervisor, keeping in mind the manufacturer's or health care practitioner's storage instructions.
- c. Parents and guardians will be asked to pick up any unused portions of prescription and nonprescription medications within <u>fidentify the appropriate time period[5]</u> days after completion of the school year or when the student's medications have been discontinued. Unused medications will not be sent home with students.
- d. Student medications that have reached their expiration date and medications that have not been picked up by the student's parent or guardian will be disposed of in a safe and

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proper manner in accordance with <u>DPI's Guidelines for Disposal of Medications in the</u> Schools.

#### 10. Recordkeeping

- a. <u>The building principal nurse serving the school</u> is responsible for maintaining written
  records of the school personnel who have been authorized to administer medication to
  students and of documentation of staff completion of all required training courses
  (including the dates on which such training occurred).
- b. Upon receipt of a student's medication at the school, school personnel will document the date of receipt, the type of medication, and verify the amount of medication supplied to the school. The person receiving the medication shall ensure that the student's name is affixed to the package of any nonprescription drug product.
- c. The written consents and instructions from the student's parent or guardian and from the health care practitioner, the medication supply receipt documentation, and the staff training documentation required above will be kept on file in the school. The fidentify the appropriate position—e.g., registered nurse serving the school/school nurse or health assistant! will review the medication administration instructions received from the health care practitioner and/or parent or guardian prior to school personnel administrating medications to help ensure the safety of students. In addition, a registered nurse or health assistant serving the school will review the written instructions from the student's parent or guardian annually or more often if changes in medication dosage occur.
- d. School personnel designated to administer medication to students, whether at school or during co-curricular or extracurricular activities, shall do the following:
  - Record each dose of prescription or nonprescription medication administered to a student on the medication administration log, including the date and time given. If the medication is not administered to the student as scheduled, the reason shall be noted on the log (e.g., student was absent from school, the student refused to take the medication, lack of supply of the medication from the student's parent or guardian).
  - Document any medication administration that deviates from the instructions of the health care practitioner and parent or guardian (medication administration error) on the medication administration log. Some examples of medication errors include: administration of a medication to the wrong student, administration of the wrong medication to a student, administration of the wrong dosage of medication to the student, administering the medication via the wrong route, administration of the medication at the wrong time, and failure to administer a medication in accordance with the appropriate health care practitioner and parent or guardian instructions. An incident report should be completed and submitted to the lidentify the appropriate position—e.g., nursing serving the school, and building principal er-both!
    The student's parent or guardian and health care practitioner (if applicable) should also be notified of the incident.

The above documentation should occur immediately after the medication is

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administered to the student to assure accuracy and safety.

e. School personnel shall maintain the confidentiality of student health and medication administration-related records in accordance with applicable state and federal laws and regulations and the District's student records policy and procedures.

#### 11. Definitions

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As used in these procedures, above, the terms "practitioner," "health care professional," "nonprescription drug product," "prescription drug," and other terms expressly defined in section 118.29 of the state statutes are intended to have the meaning of the corresponding statutory definition. Insert these two key definitions, if desired: "For example:

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- a. "Practitioner" (including "health care practitioner" as used above) means "any physician, naturopathic doctor, dentist, optometrist, physician assistant, advanced practice nurse prescriber, or podiatrist licensed in any state."
- b. "Health care professional" means "a person licensed as an emergency medical service practitioner under s. 256.15, a person certified as an emergency medical responder under s. 256.15 (8) or any person licensed, certified, permitted or registered under chs. 441 or 446 to 449." Registered nurses are "health care professionals" under this definition."

#### **Cross References:**

WASB PRG 453.4 Sample Policy 1

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Cross References: WASB PRG 453.4 Sample Rule 1

453.1 Emergency Nursing Services

453.4, Medication Administration to Students

453.4-Exhibit A, Prescription Medication Consent Form 453.4-Exhibit B, Over-the Counter Medication Consent Form Formatted: Strikethrough
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Adoption Date: 5-11-92

Revised: March 1994

October 1997 December 2000

March 2002

April 2012 May 2020

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