

Book	Policy Manual
Section	Policies for LAT to review, 34-1 (Dec. 2024 release)
Title	Copy of ADMINISTRATION OF MEDICATION/EMERGENCY CARE-DONE WEC
Code	po5330 Wendy
Status	
Adopted	December 9, 2019
Last Revised	May 8, 2023

### 5330 - **ADMINISTRATION OF MEDICATION/EMERGENCY CARE**

The Board shall not be responsible for the diagnosis and treatment of student illness. The administration of medication to a student during school hours will be permitted only when failure to do so would jeopardize the health of the student, the student would not be able to attend school if the medication were not administered during school hours, or the child is disabled and requires medication to benefit from their educational program.

For purposes of this policy, "practitioner" shall include any physician, dentist, podiatrist, optometrist, physician assistant, chiropractor, and advanced practice nurse prescriber who is licensed in any state. "Medication" shall include all drugs including those prescribed by a practitioner and any nonprescription drug products. "Administer" means the direct application of a nonprescription drug product or prescription drug, whether by injection, ingestion, or other means, to the human body. "Nonprescription drug product" means any nonnarcotic drug product which may be sold without a prescription order and which is prepackaged for use by consumers and labeled in accordance with the requirements of State and Federal law.

Before any prescribed medication may be administered to any student during school hours, the Board shall require the written instructions from the child's practitioner accompanied by the written authorization of the parent.

Nonprescription drug products may be administered to any student during school hours only with the prior written consent of the parent. Substances, which are not FDA approved (i.e. natural products, food supplements), will require the written instruction of a practitioner and the written consent of the parent. Nonprescription drugs that are provided by the parent may be administered if they are supplied in the original manufacturer's package which lists the ingredients and recommended therapeutic dosage in a legible format. Any dosage of nonprescription medication other than that listed on the medication's packaging must be authorized in writing by a medical practitioner. Students are prohibited from possessing, using, carrying, or distributing in school or on school grounds drugs or other products which, even though not defined as a drug, are used or marketed for use for medicinal purposes, such as to relieve pain or to relieve the symptoms of an underlying medical condition (including aspirin, ibuprofen, dietary supplements, CBD oil products, etc.). This provision of policy is to be viewed together with the Board policy on Drug Prevention, Policy 5350.

No CBD products will be permitted for use at school.

The document authorizing the administration of both prescribed medication and nonprescription drug products shall be kept on file in the administrative offices.

Only medication in its original container; labeled with the date, if a prescription; the student's name; and the exact dosage will be administered. Parents, or students authorized in writing by their practitioner and parents, may administer medication.

No student is allowed to provide or sell any type of medication to another student. Violations of this rule will be considered violations of Policy 5530 - Drug Prevention and of the Student Code of Conduct.

Medications will be administered and the instruction and consent forms will be maintained in accordance with the District Administrator's guidelines.

Any, staff member or volunteer, authorized in writing by, the District Administrator is immune from liability for their acts or omissions in administering medication including, but not limited to glucagon, an opioid antagonist, and epinephrine, unless the act or omission constitutes a high degree of negligence and, in the case of any staff member or volunteer who administers an opioid antagonist, the staff member or volunteer contacts emergency medical services as soon as practicable after administering the drug to report the suspected overdose. Such immunity does not apply to healthcare professionals.

All prescription medication shall be secured and appropriately stored (allowing for quick access and retrieval before, during, and after school hours), unless the medication is an emergency medication that the student is authorized to carry and self-administer by authorization of both the student's parent(s) and practitioner, and the possession of such medication by the student in school is not prohibited by law or regulation.

The Board shall permit the administration by staff of any medication requiring a delivery method other than oral ingestion when both the medication and the procedure are prescribed by a practitioner and the delivery is under the supervision of a licensed nurse, provided that the staff member has completed any necessary training and that staff member voluntarily agrees to deliver the medication. No staff member, other than a health care professional, may be required to administer medications that are administered by means other than oral ingestion.

Any staff member or volunteer who, in good faith, renders emergency care to a student is immune from civil liability for their acts or omissions in rendering such emergency care.

Any administrator or principal who authorizes an employee or volunteer to administer a nonprescription drug product or prescription drug to a student is immune from civil liability for the act of authorization unless it constitutes a high degree of negligence or the administrator or principal authorizes a person who has not received the required Department of Public Instruction training to administer the nonprescription drug product or prescription drug to a student. School nurses, as District employees, are regulated by the Wisconsin Nurse Practice Act and are therefore not necessarily immune from civil liability.

Any time a student, or a group of students, participates in a school event not on District premises, District staff responsible for organizing and/or supervising the event will take steps so that Emergency Medical Information Forms, Health Plans, or Section 504 Plans are available in the event of an emergency. This includes, and is not limited to, all school-sponsored or school-related activities, including music trips, athletic trips, field trips, and academic contests. This does not include student spectators at events.

The school nurse(s) providing services or consultation on the District's Emergency Nursing Services Plan has provided assistance in the development of this policy and will also provide a periodic review of the written instructions and consent forms and the Medications Administration Daily Log(s). The plan shall state whether and to what extent the District will retain opioid antagonists for use in the event an authorized employee or volunteer observes an apparent overdose.

### **Epinephrine Auto-Injectors**

The Board intends to adopt and maintain a plan for managing students with life-threatening allergies so as to permit each school to obtain a school prescription for epinephrine auto-injectors and to permit each school nurse and designated school personnel to administer them. Accordingly, the Board directs the school nursing staff in consultation with the District Administrator to develop a plan that meets the following:

- A. specifies those designated school personnel that have agreed to receive training and that will be trained and authorized to perform the functions of the plan;
- B. identifies the specific training program that will be implemented to prepare each school nurse and designated school personnel to identify the signs of anaphylaxis and to provide or administer epinephrine auto-injectors accordingly;
- C. delineates the permissible scope of usage to include providing District-owned epinephrine auto-injectors to students who have a prescription on file with the school in the event the student is experiencing an anaphylactic event and/or administering epinephrine auto-injectors to such students, and/or administering epinephrine auto-injector treatment to any student, regardless of whether the student has a prescription on file or the staff member so trained is not aware of whether the student has a prescription on file, but believes in good faith the student is suffering from anaphylaxis, provided that the staff member immediately contacts emergency medical services;
- D. identifies the number and type of epinephrine auto-injectors each school will keep on-site and identifies a member of the nursing staff or other school official who will be responsible for maintaining the epinephrine auto-injectors supply;
- E. is approved by a physician licensed in the State of Wisconsin;

F. notes that the school and any school nurse or designated school personnel that provide or administer epinephrine auto-injectors under this plan are immune from civil liability for any harm that may result, regardless of whether there is a parental or medical provider authorization, unless the administration was a result of gross negligence or willful or wanton misconduct;

G. is published on the District's website or the website of each school.

All students and staff are prohibited from using essential oils at school.

**~~(-) OPTION [Drafting Note: if the Board adopts this option regarding the provision of stock bronchodilators and staff administration, it must adopt a plan with the approval of a physician, an advanced practice nurse prescriber, or a physician assistant before any school nurse or designated personnel can provide or administer a bronchodilator to a student]~~**

#### **Stock Bronchodilators for School Districts**

The Board recognizes that asthma is a leading cause of hospitalization of children and is responsible for many missed school days every year. Accordingly, the Board directs ~~(-) the District Administrator (-) the school nursing staff, in consultation with the District Administrator, [END OF OPTIONS]~~ to develop a plan that meets the following:

- ~~A. specifies those designated school personnel that have agreed to receive training and that will be trained and authorized to perform the functions of the plan;~~
- ~~B. identifies the specific training program that will be implemented to prepare each school nurse and designated school personnel to identify the signs of respiratory distress and to provide or administer bronchodilators accordingly;~~
- ~~C. delineates the permissible scope of usage to include providing a District-owned bronchodilator to students who have a prescription on file with the school in the event the student is experiencing a respiratory event and/or administering a bronchodilator to such students, and/or administering a bronchodilator to any student or other person, regardless of whether there is a prescription on file, but believes in good faith the person is suffering from respiratory distress;~~
- ~~D. is approved by a physician, an advanced practice nurse prescriber, or a physician assistant licensed in the State of Wisconsin;~~
- ~~E. notes that the school and any school nurse or designated school personnel that provide or administer bronchodilators under this plan are immune from civil liability for any harm that may result, regardless of whether there is a parental or medical provider authorization, unless the administration was a result of gross negligence or willful or wanton misconduct;~~
- ~~F. is published on the District's website or the website of each school (-) is made available to any person upon request until such time as the District has a website on which it can be published. [NOTE: the plan has to be published on the District or school internet sites unless there is no such site. This option should be selected only if the District does not have a website.]~~

Revised 7/13/20

Revised 2/14/22

© Neola 202423

Legal

118.29, Wis. Stats.

118.291, Wis. Stats.

118.292, Wis. Stats.

118.2925, Wis. Stats.

121.02, Wis. Stats.

PI 8.01(2)(g)

Wis. Admin. Code N 6.03

2009 Wisconsin Act 160