

516 STUDENT MEDICATION AND TELEHEALTH

I. PURPOSE

The purpose of this policy is to set forth the provisions that must be followed when administering nonemergency prescription medication to students at school. The purpose of this policy is to set forth the provisions that must be followed when administering medications to students.

II. GENERAL STATEMENT OF POLICY

The school district acknowledges that some students may require prescribed drugs or medication or telehealth during the school day. The school district's licensed school nurse, trained health clerk, principal, or teacher will administer prescribed medications, except any form of medical cannabis, in accordance with law and school district procedures.

The Hastings school district acknowledges that some students may require medication, or telehealth during the school day. Medications that can be administered to the student appropriately before or after school will be the responsibility of the parent(s) or guardian. Medications must be Federal Drug Administration (FDA) approved; no dictary or herbal supplements will be administered. School Nursing staff or RN delegated school personnel will administer medications in accordance with law and school district procedures.

III.DRUG AND MEDICATION REQUIREMENTS

A. Administration of Drugs and Medicine CONSENT TO GIVE MEDICATIONS

- 1. The administration of medication or drugs at school requires a completed signed request from the student's parent. An oral request must be reduced to writing within two school days, provided that the school district may rely on an oral request until a written request is received.
- 2. Drugs and medicine subject to Minnesota Statutes, 121A.22 must be administered, to the extent possible, according to school board procedures that must be developed in consultation with:
 - a. with a licensed nurse, in a district that employs a licensed nurse under Minnesota Statutes, section 148.171;
 - b. with a licensed school nurse, in a district that employs a licensed school nurse licensed under Minnesota Rules, part 8710.6100;
 - c. with a public or private health-related organization, in a district that contracts with a public or private health or health-related organization, according to Minnesota Statutes,

121A.21; or

d. with the appropriate party, in a district that has an arrangement approved by the Commissioner of the Minnesota Department of Education, according to Minnesota Statutes, 121A.21.

3. Exclusion

The provisions on administration of drugs and medicine above do not apply to drugs or medicine that are:

- a. purchased without a prescription;
- b. used by a pupil who is 18 years old or older;
- c. used in connection with services for which a minor may give effective consent;
- d. used in situations in which, in the judgment of the school personnel, including a licensed nurse, who are present or available, the risk to the pupil's life or health is of such a nature that drugs or medicine should be given without delay;
- e. used off the school grounds;
- f. used in connection with athletics or extracurricular activities;
- g. used in connection with activities that occur before or after the regular school day;
- h. provided or administered by a public health agency to prevent or control an illness or a disease outbreak as provided under Minnesota law;
- i. prescription asthma or reactive airway disease medications can be self-administered by a student with an asthma inhaler if:
 - 1. the school district has received a written authorization each school year from the pupil's parent permitting the student to self-administer the medication;
 - 2. the inhaler is properly labeled for that student; and
 - 3. the parent has not requested school personnel to administer the medication to the student.

In a school that does not have a school nurse or school nursing services, the student's parent or guardian must submit written verification from the prescribing professional which documents that an assessment of the student's knowledge and skills to safely possess and use an asthma inhaler in a school

setting has been completed.

If the school district employs a school nurse or provides school nursing services under another arrangement, the school nurse or other appropriate party must assess the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting and enter into the student's school health record a plan to implement safe possession and use of asthma inhalers.

- j. epinephrine auto-injectors, consistent with Minnesota Statutes, section 121A.2205, if the parent and prescribing medical professional annually inform the pupil's school in writing that
 - 1. the pupil may possess the epinephrine or
 - 2. the pupil is unable to possess the epinephrine and requires immediate access to epinephrine auto-injectors that the parent provides properly labeled to the school for the pupil as needed.
- k. For the purposes of Minnesota Statutes, 121A.22, special health treatments and health functions, such as catheterization, tracheostomy suctioning, and gastrostomy feedings, do not constitute administration of drugs or medicine.
- 1. Emergency health procedures, including emergency administration of drugs and medicine are not subject to this policy.

Prescription medication can only be administered according to the written order of a licensed prescriber (MS 151.01 subd 23) and written authorization of a parent or guardian. Over-the-counter medication needs written authorization of a parent or guardian. If more than 10 doses of an over-the-counter medication are required in a school year, a licensed prescriber's signature is necessary in addition to parent signature.

Appropriate written authorization must be completed each school year and/or when a change in the prescription or requirements for administration occurs.¶

The school must be notified immediately by the parent of any changes in the student's medication. A new container with the new pharmacy/physician instructions shall be required within two days of the change.

B. Prescription Medication MEDICATION CONTAINERS

1. An "Administrating Prescription Medications" form must be completed annually (once per school year) and/or when a change in the prescription or requirements for administration occurs. Prescription medication as used in this policy does not include any form of medical

- cannabis as defined in Minnesota Statutes, section 152.22, subdivision 6.
- 2. Prescription medication must come to school in the original container labeled for the student by a pharmacist in accordance with law and must be administered in a manner consistent with the instructions on the label.
- 3. The school nurse may request to receive further information about the prescription, if needed, prior to administration of the substance.
- 4. Prescription medications are not to be carried by the student, but will be left with the appropriate school district personnel. Exceptions to this requirement are: prescription asthma medications self-administered with an inhaler (See Paragraph III.A.3(i) above), and medications administered as noted in a written agreement between the school district and the parent or as specified in an IEP (individualized education program), Section 504 plan, or IHP (individual health plan).
- 5. The school must be notified immediately by the parent or student 18 years old or older in writing of any change in the student's prescription medication administration. A new medical authorization or container label with new pharmacy instructions shall be required immediately as well.
- 6. The school nurse, or other designated person, shall be responsible for the filing of the Administering Prescription Medications form in the health records section of the student file. The school nurse, or other designated person, shall be responsible for providing a copy of such form to the principal and to other personnel designated to administer the medication.
- 7. For drugs or medicine used by children with a disability, administration may be as provided in the IEP, Section 504 plan or IHP.
- 8. If the administration of a drug or medication described in this section requires the school district to store the drug or medication, the parent or legal guardian must inform the school if the drug or medication is a controlled substance. For a drug or medication that is not a controlled substance, the request must include a provision designating the school district as an authorized entity to transport the drug or medication for the purpose of destruction if any unused drug or medication remains in the possession of school personnel. For a drug or medication that is a controlled substance, the request must specify that the parent or legal guardian is required to retrieve the drug or controlled substance when requested by the school.

Prescription medications must be brought to school in an original pharmacy labeled container that includes the student's name, medication name, dosage,route of administration, and time(s) to be given. (Parent should ask the pharmacist to divide the prescription into two bottles; one for school and one for home). Nonprescription medication must come to school in the original container.

C. Nonprescription Medication STORAGE AND TRANSPORTATION OF MEDICATION

A secondary student may possess and use nonprescription pain relief in a manner consistent with the labeling, if the school district has received written authorization from the student's parent or guardian permitting the student to self-administer the medication. The parent or guardian must submit written authorization for the student to self-administer the medication each school year. The school district may revoke a student's privilege to possess and use nonprescription pain relievers if the school district determines that the student is abusing the privilege. This provision does not apply to the possession or use of any drug or product containing ephedrine or pseudoephedrine as its sole active ingredient or as one of its active ingredients. Except as stated in this paragraph, only prescription medications are governed by this policy.

All medications are to be stored in locked cabinets in the health office unless noted in a written agreement between school district, parent, and physician, i.e. Action Plans or Individual Health Plans (IHP).

Controlled substances must always be kept in a locked cabinet in the health office and shall not be self administered.

D. <u>Possession and Use of Epinephrine Auto-Injectors DOCUMENTATION OF MEDICATION</u>

At the start of each school year or at the time a student enrolls in school, whichever is first, a student's parent, school staff, including those responsible for student health care, and the prescribing medical professional must develop and implement an individualized written health plan for a student who is prescribed epinephrine auto-injectors that enables the student to:

- 1. possess epinephrine auto-injectors; or
- 2. if the parent and prescribing medical professional determine the student is unable to possess the epinephrine, have immediate access to epinephrine auto-injectors in close proximity to the student at all times during the instructional day.

For the purposes of this policy, "instructional day" is defined as eight hours for each student contact day.

health plan, including recognizing anaphylaxis and administering epinephrine auto-injectors when required, consistent with state law. This health plan may be included in a student's Section 504 plan.

Districts and schools may obtain and possess epinephrine auto-injectors to be maintained and administered by school personnel, including a licensed nurse, to a student or other individual if, in good faith, it is determined that person is experiencing anaphylaxis regardless of whether the student or other individual has a prescription for an epinephrine auto-injector. The administration of an epinephrine auto-injector in accordance with Minnesota Statutes, section 121A.2207 is not the practice of medicine.

Effective July 1, 2024, registered nurses may administer epinephrine auto-injectors in a school setting according to a condition-specific protocol as authorized under Minnesota Statutes, section 148.235, subdivision 8. Notwithstanding any limitation in Minnesota Statutes, sections 148.171 to 148.285, licensed practical nurses may administer epinephrine auto-injectors in a school setting according to a condition-specific protocol that does not reference a specific patient and that specifies the circumstances under which the epinephrine auto-injector is to be administered, when caring for a patient whose condition falls within the protocol.

A district or school may enter into arrangements with manufacturers of epinephrine auto-injectors to obtain epinephrine auto-injectors at fair-market, free, or reduced prices. A third party, other than a manufacturer or supplier, may pay for a school's supply of epinephrine auto-injectors.

E. Sunscreen

A student may possess and apply a topical sunscreen product during the school day while on school property or at a school-sponsored event without a prescription, physician's note, or other documentation from a licensed health care professional. School personnel are not required to provide sunscreen or assist students in applying sunscreen.

F. Procedure regarding unclaimed drugs or medications

- The school district has adopted the following procedure for the collection and transport of any unclaimed or abandoned prescription drugs or medications remaining in the possession of school personnel in accordance with this policy. Before the transportation of any prescription drug or medication under this policy, the school district shall make a reasonable attempt to return the unused prescription drug or medication to the student's parent or legal guardian. Transportation of unclaimed or unused prescription drugs or medications will occur at least annually, but may occur more frequently at the discretion of the school district.
- 2. If the unclaimed or abandoned prescription drug is not a controlled substance as

defined under Minnesota Statutes, section 152.01, subdivision 4, or is an over-the-counter medication, the school district will either designate an individual who shall be responsible for transporting the drug or medication to a designated drop-off box or collection site or request that a law enforcement agency transport the drug or medication to a drop-off box or collection site on behalf of the school district.

3. If the unclaimed or abandoned prescription drug is a controlled substance as defined in Minnesota Statutes, section 152.01, subdivision 4, the school district or school personnel is prohibited from transporting the prescription drug to a drop-off box or collection site for prescription drugs identified under this paragraph. The school district must request that a law enforcement agency transport the prescription drug or medication to a collection bin that complies with Drug Enforcement Agency regulations, or if a site is not available, under the agency's procedure for transporting drugs.

A record of the administration of the medication at school shall be kept. School Nursing staff or designated person shall be responsible for the filing of the permission forms in the health folder portion of the student record.

Whenever a controlled substance is brought to school, the amount of the medication will be counted and documented in the student's health record by School Nursing staff.¶

NARCAN

The District will obtain and possess Narean (naloxone) to be maintained and administered by trained school staff to a student or other individual if it is determined in good faith that person is experiencing an opioid overdose.

- 4. Minnesota Statute (604A.04) "Good Samaritan Overdose Protection" allows for "A person who is not a healthcare professional who acts in good faith in administering an opiate antagonist to another person whom the person believes in good faith to be suffering an opioid overdose is immune from criminal prosecution for the act and is not liable for any civil damages for acts or omissions resulting from the act."
- 5. In accordance with this statute, the individual who is seeking assistance and the individual who is experiencing an overdose have a limited immunity from prosecution.
- 6. The District will obtain a standing order for Narcan (naloxone) by a licensed medical prescriber and update as needed.

- 7. Stock Narcan (naloxone) will be clearly labeled and stored in a secured location that is accessible by trained staff.
- 8. Health Services and School Administration will identify appropriate staff to be trained annually at each school site.

G. EPINEPHRINE¶

The District will obtain and possess Epinephrine to be maintained and administered by trained school staff to a student or other individual if it is determined in good faith that person is experiencing an anaphylactic reaction.

- 1. Minnesota Statute (604A.01) "Good Samaritan Law" allows a person at the scene of an emergency who knows that another person is exposed to or has suffered grave physical harm shall, to the extent that the person can do so without danger or peril to self or others, give reasonable assistance to the exposed person. Reasonable assistance may include obtaining or attempting to obtain aid from law enforcement or medical personnel.
- 2. The individual who is seeking assistance and the individual who is experiencing an anaphylaetic reaction have a limited immunity from prosecution.
- 3. The District will obtain a standing order for Epinephrine by a licensed medical prescriber and update as needed.
- 4. Stock Epinephrine will be clearly labeled and stored in a secured location that is accessible by trained staff.
- 5. Health Services and School Administration will identify appropriate staff to be trained annually at each school site.

IV. SPECIFIC EXCEPTIONS

- A. Special health treatments such as catheterization, tracheotomy suctioning, and gastrostomy feeding do not constitute administration of drugs and medicine.
- B. Drugs or medicine provided by a public health agency to prevent or control an illness or disease outbreak are not governed by this policy.
- C. Medications that are used in connection with activities that occur before or after the regular school day (including athletics or extracurricular activities) are not governed by this policy.

D. SELF-CARRY INHALER¶

Drugs or medicines that are prescription asthma or reactive airway disease medications can be self-administered by a student with an inhaler if:

- 1. the school district has received a written authorization from a licensed prescriber and parent permitting the student to self-administer the medication;
- 2. the inhaler is properly labeled for that student; and \{\}
- 3. the parent has not requested school personnel to administer the medication to the student. The parent must submit written authorization for the student to self-administer the medication each school year. The parent must submit written verification from the licensed prescriber which documents that an assessment of the student's knowledge and skills to safely possess and use an asthma inhaler in a school setting has been completed.

School Nursing staff must assess the student's knowledge and skills to safely possess and use an inhaler in a school setting and enter into the student's school health record a plan to implement safe possession and use of inhalers.

If the parent, licensed prescriber or School Nursing staff determine the student is unable to possess the inhaler, the student will have immediate access to the inhaler which will be kept in the health office.

Each school year the parent, School Nursing staff, and the licensed prescriber must develop and implement an individualized written health plan for a student who is prescribed inhalers for use during the school day. The plan must designate the School Nursing staff or RN delegated school personnel responsible for implementing the student's health plan, including recognizing asthma exacerbation and administering inhalers when required, consistent with state law.

E. SELF CARRY NON-PRESCRIPTION MEDICATION¶

Prescription medications are not to be carried by the student. A secondary student may possess and use nonprescription pain relief medication in a manner consistent with the labeling, if the school district has received written authorization from the student's parent permitting the student to self-administer the medication. The parent must submit written authorization for the student to self-administer the medication each school year. The school district may revoke a student's privilege to possess and use nonprescription pain relievers. This provision does not apply to the possession or use of any drug or product containing ephedrine or pseudoephedrine as its sole active ingredient or as one of its active ingredients.

F. SELF CARRY NON-SYRINGE INJECTORS OF EPINEPHRINE¶

Non-syringe injectors of epinephrine that are prescribed for anaphylactic reactions can be self-administered or carried by a student if:

- 1. the school district has received a written authorization from a licensed prescriber and the parent permitting the student to self-administer/carry the medication;
- 2. the non-syringe injector of epinephrine is properly labeled for that student; and \{\extstyle \}
- 3. the parent has not requested school personnel to administer the medication to the student.

The parent must submit written authorization for the student to self- administer/carry the medication each school year. The parent must submit written verification from the licensed prescriber which documents that an assessment of the student's knowledge and skills to safely possess and use a non-syringe injector of epinephrine in a school setting has been completed.

School Nursing staff must assess the student's knowledge and skills to safely possess and use a non-syringe injector of epinephrine in a school setting and enter into the student's school health record a plan to implement safe possession and use of non-syringe injectors of epinephrine.

If the parent, licensed prescriber or School Nursing staff determine the student is unable to possess the epinephrine, the student will have immediate access to non-syringe injectors of epinephrine which will be kept in the health office.¶

Each school year the parent, School Nursing staff, and the licensed prescriber must develop and implement an individualized written health plan for a student who is prescribed non-syringe injectors of epinephrine. The plan must designate the School Nursing staff and/or RN delegated school personnel responsible for implementing the student's health plan, including recognizing anaphylaxis and administering non-syringe injectors of epinephrine when required, consistent with state law.

G. The school district reserves the right to not administer any medication that is not recommended or whose dosage exceeds recommended levels as noted in designated drug reference resource.

V. ACCESS TO SPACE FOR MENTAL HEALTH CARE THROUGH TELEHEALTH

A. Beginning October 1, 2024, to the extent space is available, the school district must provide an enrolled secondary school student with access during regular school hours, and to the extent staff is available, before or after the school day on days when students receive instruction at school, to space at the school site that a student may use to receive mental health care through telehealth from a student's licensed mental health provider. A

secondary school must develop a plan with procedures to receive requests for access to the space.

- B. The space must provide a student privacy to receive mental health care.
- C. A student may use a school-issued device to receive mental health care through telehealth if such use is consistent with the district or school policy governing acceptable use of the school-issued device.
- D. A school may require a student requesting access to space under this section to submit to the school a signed and dated consent from the student's parent or guardian, or from the student if the student is age 16 or older, authorizing the student's licensed mental health provider to release information from the student's health record that is requested by the school to confirm the student is currently receiving mental health care from the provider. Such a consent is valid for the school year in which it is submitted.

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Legal References: Minn. Stat. § 13.32 (Educational Data)
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Minn. Stat. § 121A.21 (School Health Services)

Minn. Stat. § 121A.216 (Access to Space for Mental Health Care through Telehealth)

Minn. Stat. § 121A.22 (Administration of Drugs and Medicine)

Minn. Stat. § 121A.2205 (Possession and Use of Epinephrine Auto-Injectors; Model Policy)

Minn. Stat. § 121A.2207 (Life-Threatening Allergies in Schools; Stock Supply of Epinephrine Auto-Injectors)

Minn. Stat. § 121A.221 (Possession and Use of Asthma Inhalers by Asthmatic Students)

Minn. Stat. § 121A.222 (Possession and Use of Nonprescription Pain

Relievers by Secondary Students)

Minn. Stat. § 121A.223 (Possession and Use of Sunscreen)

Minn. Stat. § 148.171 (Definitions; Title)

Minn. Stat. § 151.212 (Label of Prescription Drug Containers)

Minn. Stat. § 152.01 (Definitions)

Minn. Stat. § 152.22 (Definitions)

Minn. Stat. § 152.23 (Limitations)

Minn. Rule 8710.6100 (School Nurse)

20 U.S.C. § 1400 et seg. (Individuals with Disabilities Education Act)

29 U.S.C. § 794 et seq. (Rehabilitation Act of 1973, § 504)

Minn. Stat. § 120A.00 (Admission to Public School)¶

Minn. Stat. § 120A.22 (Compulsory Instruction)¶

Minn. Stat. § 120B.12 (Read Act Goal and Interventions)¶

Minn. Stat. § 123B.02 (General Powers of Independent School Districts)¶

Minn. Stat. § 123B.09 (Boards of Independent School Districts)¶

Minn. Stat. § 123B.88 (Independent School Districts; Transportation)¶
Minn. Stat. § 125A.50 (Alternative Delivery of Specialized Instructional Services)¶
Minn. Pulse Chapter 2501 (Conduction Standards)¶

Minn. Rules Chapter 3501 (Graduation Standards)¶

Cross References: ISD 200 Policy 418 (Drug-Free Workplace/Drug-Free School)

ISD 200 Policy 603 (Curriculum Development)¶
ISD 200 Policy 604 (Instructional Curriculum)¶
ISD 200 Policy 605 (Alternative Programs)¶

ISD 200 Policy 707 (Transportation of Public School Students)

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