

ANN JERKINS-HARRIS



2024-2025

AJHAE: SCHOOL POLICY AND PROCEDURES

DIABETES DRUG ADMINISTRATION

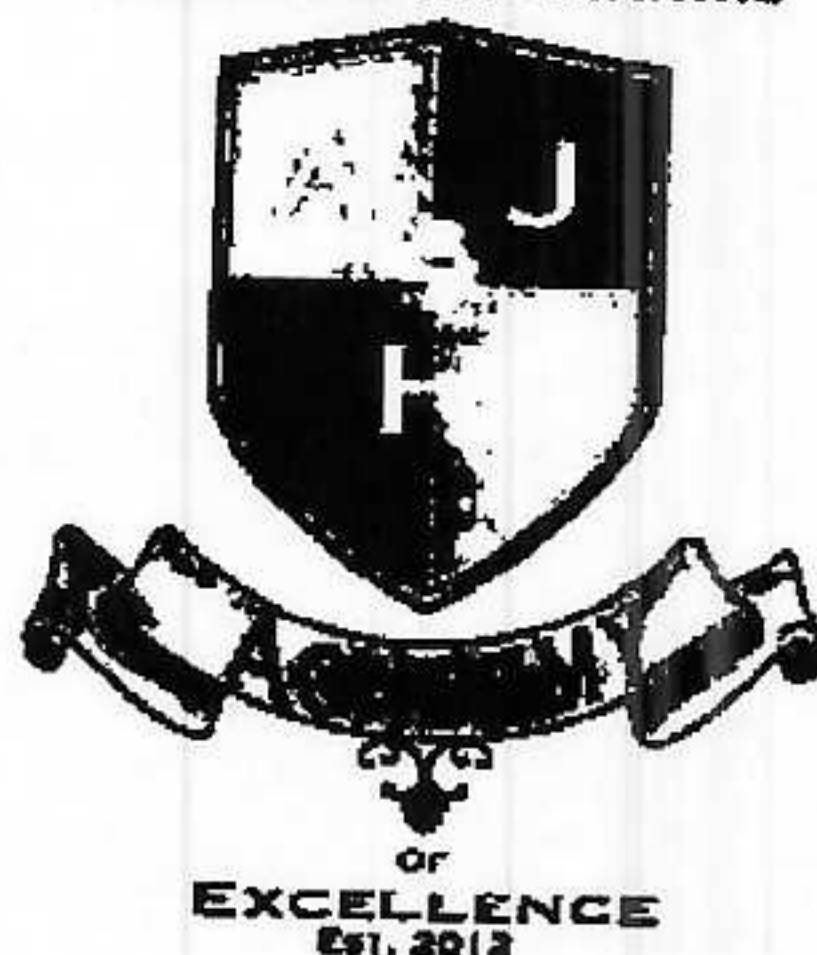
2024-2025

ANN JERKINS HARRIS ACADEMY OF EXCELLENCE

AS APPROVED BY THE AJHAE GOVERNING AUTHORITY ON AUGUST 21ST, 2018.

REVIEWED AND UPDATED ON AUGUST 19TH, 2023

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SCHOOL POLICY AND PROCEDURES

Diabetes Drug Administration

Section 504 of the Rehabilitation Act and the Individuals With Disabilities Education Act (IDEA) provide protection for students with disabilities by requiring schools to make reasonable accommodations and to allow for safe inclusion of these students in school programs.²⁴⁻²⁷ These federal laws apply only to schools that receive federal funds, do not cover all students who require medications during the school day (eg, short-term needs), and are not specific about how administration of medications should be conducted in school.

The AAP supports state laws, regulations, or standards that establish more specific policies for administration of medications that apply to all of the state's school districts. State standards can limit discrepancies among school districts within the state and reduce confusion for parents and prescribing health care professionals.

School boards and school superintendents are responsible for establishing policies and detailed procedures for the safe administration of medication in the school setting. When state standards are insufficient, school health professionals, consulting physicians, and school health councils can work with AAP chapters to promote improved state standards and assist with local policies and procedures. Individual school districts also might wish to seek legal advice as they assume the responsibility for giving medication during school hours and during activities at school before or after school hours.

Liability coverage should be provided for the staff, including nurses, teachers, athletic staff, principals, superintendents, and members of the school board.¹⁵ Any student who must take medication during regular school hours should do so in compliance with all federal and state laws and school district policies.

The Academy of Excellence is highly committed in promoting a safe and healthy environment for its students. The Diabetes Drug Administration School Policy and Procedures are established in order to:

- Protect student safety and prevent medication errors. Nursing services at school, whether emergent, urgent, or routine, require the creation of a confidential, timely, and accurate record of the service provided.
- Identify the licensed health professional (certified or registered school nurse or school physician) on the school staff who supervises and is responsible for the safe keeping and accessibility and administration of medications, including documentation and a system of accountability for students who carry and self-administer their medications.
- Use a systematic review of documentation of medication-administration records for quality improvement, especially to reduce medication errors and to verify controlled substance counts.
- Create an ongoing training and certification program for UAP who perform specific nursing services when delegated and supervised by the licensed school RN or school physician.
- Establish and follow effective communication systems that support the school's nursing plan (individualized health plans, etc) and promote accurate implementation of the prescriber's instructions for the medical management of a designated student's health needs.
- Require a written medication form, signed by the authorized prescriber and parent, with the name of the student, the drug, the dose, approximate time it is to be taken, and the diagnosis or reason the medication is needed. This requirement applies for all prescription medications.
- Require written parental approval if over-the-counter (OTC) medications are permitted. Limit the duration that an OTC medication is administered at school.³⁰ Use of OTC medications over an extended time period warrants an authorized prescriber's oversight and authorization.

- Protect student health information confidentiality as outlined in the Family Education Rights and Privacy Act^{31,32} and the Health Insurance Portability and Accountability Act.³³
- Train, delegate, and supervise appropriate UAP who have the knowledge and skills to administer or assist in the administration of medication to students when assessed to be appropriate by the supervising and delegating licensed registered school nurse or school physician in compliance with applicable state laws and regulations.
- Permit responsible students to carry and self-administer emergency medications for those conditions authorized by school policies and regulations, which also describe students' /parents' rights and responsibilities.^{34,35}
- Provide and encourage parents to provide spare life-saving medications in the health office for students who carry and self-administer emergency medications in the event that the life-saving medication cannot be located when a student is in need of the medicine.
- Make provisions for secured and immediate access to emergency medications at school at all times, including before and after school hours and during students' off-campus school-sponsored activities.³⁵⁻³⁷

EMERGENCY AND URGENT MEDICATIONS

Emergency and urgent medications are often given by non-oral routes and are administered to initiate treatment or amelioration of a disease or condition that may be life-threatening or cause grave morbidity. The complexity and urgency of this intervention is the focus of the AAP policy statement "Medical Emergencies Occurring at School,"³⁸ which describes prevention and mitigation of emergent events and stresses the role of the school nurse in providing this nursing service at school. The school nurse is the professional most likely to train school staff, to create a liaison with community emergency response teams and other health care professionals, and to assist, in coordination with the school physician, the school administration in development of policies and administrative regulations concerning medical emergencies.^{17,34,36,37,46-48}

Immediate access to emergency medications (eg, autoinjectable epinephrine, albuterol, rectal diazepam, and glucagon) is a high priority and is crucial to the effectiveness of these life-saving interventions.

To maintain medication security and safety and provide for timely treatment, local procedures must specify where medications will be stored, who is responsible for the medication, who will regularly review and replace outdated medication, and who will carry the medication for field trips. In addition to unlicensed health office staff, other school staff may be trained, designated, and supervised as emergency UAP to be "first responders" to a student who experiences a medical emergency.

At the Academy of Educational Excellence supply of all emergency medications are to be maintained in a locked cabinet in the school office.

Schools also need an adequate supply of emergency medications in the event of a school lock-down or evacuation. Parent-supplied extra medication and/or school-supplied stock medications (including but not limited to autoinjectable epinephrine and albuterol inhalers) are among the emergency or urgent care medications that need to be available in these circumstances.³⁷⁻³⁸⁻⁵²

SECURITY AND STORAGE OF MEDICATIONS

All prescription medications brought to school should be in original containers appropriately labeled by the pharmacist or physician. Except for self-carry medications, they should be stored securely in accordance with manufacturer directions.

Controlled substances must be double-locked.⁵³ The school nurse, licensed practice nurse, or delegated, trained UAP must be available and have access to the medications at all times during the school day.

All medications should be returned to the parents at the end of the school year or disposed of in accordance with existing laws, regulations, or standards. Care should be taken not to flush any drugs into the water system unnecessarily.

STUDENT SELF-CARRYING AND SELF-ADMINISTRATION OF PRESCRIBED MEDICATIONS

A responsible student should be permitted to carry medication for urgent or emergency need when it does not require refrigeration or security, according to policies determined by the school in accordance with laws, regulations, and standards.³⁴⁻⁵⁴

Controlled substances and those at risk of drug abuse or sale to others are not appropriate for self-carrying. The student's personal health care professional, the parents, and the school nurse and school physician should collaboratively determine the ability of a student to appropriately self-administer the prescribed medication in a responsible and secure manner.

School personnel must also permit the student to possess and take the medication once a determination has been made that the student is mature enough to carry and self-administer the medication.

For elementary school-aged children, the self-administration of a dose of medication should be reported to school personnel as soon as the self-administered dose is given for documentation and assessment of need for additional assistance. Medications carried by students should be either on the person of the student, as in a dedicated "fanny pack," or in possession of a supervising adult who will return the medication pack to the student as needed or when the student moves on to a new location. Medications should not be left unattended.