

Medication at School

Each school principal shall authorize two (2) staff members to administer prescribed or over-the-counter oral or topical medication, even drops or ear drops (“medication”). Oral medications are administered by mouth either by swallowing or inhaling and may include administration by mask if the mask covers the mouth or mouth and nose. These designated staff members will participate in an in-service training session conducted by a physician or registered nurse prior to the opening of school each year.

Prescribed or over-the-counter medication may be dispensed to students on a scheduled basis upon written authorization from a parent with a written request by a licensed health professional prescribing within the scope of their prescriptive authority. If the medication is to be administered more than fifteen (15) consecutive days the written request must be accompanied by written instructions from a licensed health professional. Requests shall be valid for not more than the current school year. The prescribed or non-prescribed medication must be properly labeled and be contained in the original container. The prescribed or over-the-counter oral medication will:

- A. Collect the medication directly from the parent, students should not transport medication to school, collect an authorization form properly signed by the parent and by the prescribing licensed health professional and collect instructions from the prescribing licensed health professional if the medication is to be administered for more than fifteen (15) consecutive days;
- B. Store the prescription or non-prescribed oral medication (not more than a twenty (20) day supply) in a locked, substantially constructed cabinet;
- C. Maintain a daily record which indicates that the prescribed or non-prescribed oral medication was dispensed.
- D. Provide for delegation, training and supervision by a physician or registered nurse.
- E. A copy of this policy and procedure will be provided to the parent upon request.

Medications administered, other than orally, may only be administered by a registered nurse or licensed practical nurse. As per state law, an exception is made for topical sunscreen products regulated by the United States Food and Drug Administration for over-the-counter use. Staff is not required to assist students in applying the sunscreen.

Nasal inhalers, suppositories and non-emergency injections may not be administered by school staff other than registered nurses and licensed practical nurses. No prescribed medication shall be administered by injection by staff except when a student is susceptible to a predetermined, life-endangering situation. The parent shall submit a written statement which grants a staff member the authority to act according to the specific written orders and supporting directions provided by licensed health professional prescribing within his or her prescriptive authority (e.g., medication administered to counteract a reaction to a bee sting). Such medication shall be administered by staff trained to administer such an injection.

Written orders for emergency medication, signed and dated, from the licensed health professional prescribing within his or her prescriptive authority will:

- A. State that the student suffers from an allergy which may result in an anaphylactic reaction;
- B. Identify the drug, the mode of administration, the dose. Epinephrine administered by inhalation, rather than injection, may be a treatment option. This decision must be made by the licensed health professional prescribing within his or her prescriptive authority;
- C. Indicate when the injection shall be administered based on anticipated symptoms or time lapse from exposure to the allergen;
- D. Recommend follow-up after administration, which may include care of the stinger, administration of additional medications, transport to hospital; and
- E. Specify how to report to the health professional prescribing within his or her prescriptive authority and any record keeping recommendations.

Sunscreen

Over-the-counter topical sunscreen products may be possessed and used by students, parents, and school staff, without a written prescription or note from a licensed health care provider, if the following conditions are met:

- A. The product is regulated by the US Food and Drug Administration as an over-the-counter sunscreen product; and
- B. If possessed by a student, the product is provided to the student by their parent or guardian.

Students who possess over-the-counter topical sunscreen products that meet the above criteria may carry up to 8 ounces at a time, preferably with the container in a plastic bag.

Violations of any conditions placed on the student permitted to carry and/or self-administer his or her own sunscreen products may result in confiscation and termination of that permission, as well as the imposition of discipline when appropriate.

School staff may assist students in application of sunscreen products in certain circumstances and in the presence of another staff member. The appropriate staff member will take into account the age, maturity, and capability of the student, the need for the application of the sunscreen, and other issues relevant in the specific case, before assisting students in application of sunscreen products at school or during school-sponsored events. However, staff members are not required to assist students in applying sunscreen.

Documenting and reporting medication errors and omissions.

The purpose of this procedure is to ensure safe oral medication administration at school. The correct oral medications must be administered to the correct student at the correct time, in the dosage prescribed, by the correct route. Deviation from this standard constitutes a medical error. A dose that is missed (omitted) is considered a medication error. All medication errors and omissions must be documented and reported (via Form 3416) to the district's lead nurse.

1. All errors/omissions must be documented and reported to the district's lead nurse within 24 hours of the discovery of the error/omission. School staff shall use Form 3416 to document the error/omission.
2. School staff shall notify the student's parent/guardian of the error/omission.
3. School staff shall notify the school's principal of the error/omission.
4. The district's lead nurse, using clinical judgment, will determine the level of severity of the medication error/omission.
5. In accordance with WAC 246-840-730, if the error/omission caused bodily harm or injury to the student, or caused the student to be seen by emergency services, the incident must be reported by the district's lead nurse to:

The Washington State Nursing Quality Assurance Commission
PO Box 47864, Olympia, WA 98504-7864
Phone: (360) 236-4700

6. If the error/omission was committed by an unlicensed school employee and the error/omission caused bodily harm or injury to the student, or caused the student to be seen by emergency services, the district nurse shall notify the Department of Health, Unlicensed Practice Unit at (360) 236-4659.
7. Theft or suspected theft must be documented and reported to the district's lead nurse. Theft or suspected theft will be reported to law enforcement by the district's lead nurse.
8. In accordance with RCW 4.16.350, the district's lead nurse shall retain reports of medication errors/omissions for eight years after the incident. The reports will be used by the district's lead nurse to determine trends and patterns of medication errors/omissions; assist in identification of educational and resource needs of licensed and unlicensed staff; and record circumstances contributing to the error/omission and actions taken as a result of the error/omission.

Analysis of medication errors and omissions.

The district's lead nurse will analyze the medication errors/omissions reports and provide, annually, at the end of the school year, a report to the Assistant Superintendent for Learning and Teaching. If needed, the district's lead nurse will make recommendations for improvements in procedures/operations for the next school year. The district's lead nurse shall not be constrained by the annual reporting requirement. If there is a procedure/operation that needs to be changed immediately, the district's lead nurse may make the recommendation at any time.

Date Revised: 10.05.01; 04.27.09; 10/08/12; 05.25.17; 11.17