

ADMINISTRATIVE PROCEDURE

MEDICATION

5163
Procedure No.
October 25, 2021
Date

- I. **PURPOSE:** This medication administration procedure provides direction to employees, students, parents, and guardians regarding safe medication administration in schools.
- II. **POLICY:** The Board of Education directs the Chief Executive Officer(CEO) to require training of all appropriate school staff regarding students with special health needs, including medication administration issues. (Policy 5165)
- III. **BACKGROUND:** Students are permitted to take medication during the school day or school sponsored activities only when medically necessary and only under the supervision of school system personnel. Decisions concerning the use and administration of medication at school shall be made on an individual basis for each student. The process of the administration of medications and treatments in the school setting is a service that supports and promotes student wellness and decreases absenteeism.
- IV. **DEFINITIONS:**
 - A. **Authorized Persons:** An unlicensed individual who is identified and trained to perform the specific tasks for a student including, but not limited to medication administration.
 - B. **Authorized Prescriber:** A licensed individuals with authority to prescribe medications, treatments and procedures. Authorized prescribers include nurse practitioners, certified midwife, podiatrist, physician assistant, physician, dentist or other individual authorized by law to prescribe prescription or non-prescription drugs, treatments, procedures and/or devices.
 - C. **Certified Medication Technician (CMT):** A permanent PGCPS employee who has successfully completed the Medication Administration Training Program and identified as competent by the Office of School Health.
 - D. **Controlled Substance:** A drug which has been declared by Federal or State law to be illegal for sale or use, but may be dispensed under a physician’s prescription. The basis for control and regulation is the danger of addiction, abuse, physical and mental harm (including death), the trafficking by illegal means, and the dangers from actions of those who have used the substances. Controlled substances include stimulants, depressants, narcotics, and some sedatives.



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- E. **Delegation:** The process in which a licensed nurse authorizes those individuals identified and trained to administer medications and treatments as directed. The Licensed Nurse retains accountability and responsibility for the task.
- F. **Dietary Supplement:** A product (other than tobacco) that is intended to supplement the diet; contains one or more dietary ingredients (including vitamins; minerals; herbs or other botanicals; amino acids; and other substances) or their constituents; is intended to be taken by mouth as a pill, capsule, tablet, or liquid; and is labeled on the front panel as being a dietary supplement and is regulated as a dietary supplement by the FDA.
- G. **Herbal Medicine:** Medicines that are derived from various plants and herbs.
- H. **Homeopathic Medicines:** Drug products labeled as homeopathic and made by homeopathic pharmacies in accordance with the processes described in the *Homeopathic Pharmacopoeia of the United States*, the official manufacturing manual recognized by the United States Food and Drug Administration.
- I. **Licensed Nurse:**
1. **Registered Nurse:** An individual, who has completed an accredited nursing program, passed a state board examination and is licensed to practice nursing.
 2. **Licensed Practical Nurse:** An individual who has completed an accredited practical nursing program, passed a state board examination, and is licensed as a practical nurse. LPN must work in a team relationship with a RN.
- J. **Medication:** Includes prescription, nonprescription (over the counter), homeopathic, herbal and nutritional/dietary supplements that are regulated by the FDA.
- K. **Near Miss:** An event or situation that could have produced student injury, but did not because of chance. For example, a mistake made because the medications “sound alike” (i.e. Flovent labeled Ventolin), or a medication that is mislabeled and almost administered to a student.
- L. **Plan B:** A book which contains operational, clinical and special information about students with particular health care needs for a substitute or contracted nurse who is filling in for a during the absence of a full-time nurse



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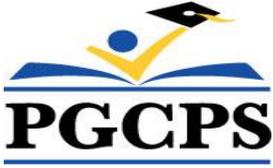
- M. **Prescriber Medication Order Forms (PMOF):** A standardized form to be used by the healthcare provider for all medications, treatments and procedures needed during school hours and school sponsored activities.
- N. **PRN:** A medical term used to denote “as needed”.
- O. **School Health Electronic Record (SHERe):** A computerized database that is used to document and maintain student medical information.

IV. PROCEDURES:

Students Requiring Medications and/or Treatments: When there is a need for a student to receive medication(s), and/or medical treatment(s) or procedure(s), the parents will be provided The Parent Fact Sheet for Medications and Treatments at School and the Prescriber Medication Order form.

A. **Prescriber’s Medication Order Forms (PMOF):**

1. PMOFs are available for specific medications, and/or treatments.
2. The PMOFs should be completed in its entirety, free of alterations and signed by the authorized prescriber and the parent.
3. The “Management of Diabetes at School/Order Form” must be submitted in lieu of the PMOF for students who are diabetic.
4. The completed PMOF will be entered and attached to SHERe and a copy of the current medications will be kept in Plan B manual.
5. All PMOFs must be reviewed upon receipt by a licensed nurse to ensure compliance with this administrative procedure.
6. PMOFs for the upcoming school year must be dated no more than 90 days prior to the first day of school.
7. PMOFs are only valid for one school year which includes ESY and summer school programs.
8. PMOFs received for the current school year are valid through the extended school year (ESY) and summer school programs.
9. Verbal orders may not be accepted from any prescribers.



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10. PMOFs or medication administration records are NOT to be destroyed. Original paper copies will be returned to the student's cumulative record.

B. Labeling

1. Labeling of Medication:

- a. Prescription medications will NOT be accepted unless they are labeled by a registered pharmacist with:
 - The pharmacy name, address, and phone number
 - Prescription number
 - Date prescription was filled
 - Name of student
 - Name of medication
 - Directions for administration
 - Any special instructions
 - Name of prescriber
 - Expiration date
- b. Sample prescription medications must come in the original container, medication brand/generic name matches the PMOF, not expired, labeled with student's name and date of birth.
- c. Nonprescription medications must come to school in the original unopened container, medication brand/generic name matches the PMOF, labeled with the student's name and date of birth.

2. Labeling of Specialized Equipment and Supplies:

- a. Specialized medical equipment and supplies must come to school labeled with the student's name, date of birth, and not expired.

C. Storage and Handling of Medication:

All medication MUST be stored in a designated locked closet, or cabinet identified specifically for medications. Medications requiring refrigeration will be stored in the refrigerator. Access to medication locked in the designated space shall be under the authority of the Licensed Nurse.



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D. Administration of Controlled Substances:

If a controlled substance must be administered in school, the guidelines for prescription medications are to be followed with the following modifications:

1. These medications must be counted by the parent/guardian and the Licensed Nurse and/or designee when brought to the school and recorded in the SHERe Controlled Inventory.
2. Licensed Nurse is to ensure the medication count is accurate with the control inventory count in SHERe. If the count is not correct the Licensed Nurse will:
 - a) Call their designated Nurse Manager,
 - b) Complete a Medication Error Incident Report, and
 - c) Follow appropriate steps as directed.
3. A current updated prescription bottle appropriately labeled is required.
4. Non-licensed school personnel will:
 - a) Count medication at the beginning and end of each day. If count is not correct, school staff should contact the Office of School Health for instructions, and
 - b) Document on the paper medication administration record and Medication Inventory for Controlled Drugs as instructed.

E. Medication and Treatment Errors include the following:

1. Violation of six RIGHTS of medication administration (Right person; Right route; Right drug; Right dose; Right time; and Right documentation);
2. Discrepancy in the controlled medication count;
3. Unauthorized administration of medication;
4. Diversion of medication; and
5. Near Miss

All medication errors and near misses must be:

- Reported immediately to the licensed/delegating nurse, the school administrator (principal or designee) and the parent.



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- The licensed/delegating nurse will determine if the physician needs to be notified.
- The individual who first becomes aware of the error must report the error verbally to Office of School Health and follow up with a written Medication Error Incident Report.
- The Medication Error Incident Report is to be scanned or faxed to the Office of School Health.
- The school copy is not to be filed in the student's health record but is to be filed in a separate incident report file and retained in the school for three (3) years.
- The licensed nurse should complete the Medication Error Incident Report electronically.

F. Parent/Guardian is responsible for:

1. Giving the first dose of any new prescription/nonprescription at home, (except for an emergency medication).
2. Having the prescriber complete in its entirety a PMOF for each medication, treatment or procedures and submit to the school.
3. Providing all medication, equipment and treatment supplies.
4. An adult delivering all medication, medical equipment, and treatment supplies to the school.
5. Ensuring students are in compliance with the PGCPS Code of Student Conduct by obtaining PMOF to allow students to self-carry medication.
6. Maintaining communication with the Licensed Nurse regarding student medication, treatment, and/or supply needs or changes.
7. Retrieving medications, supplies and equipment when discontinued.

G. Licensed Nurse is responsible for:

1. Upon receipt of PMOF, validating, and ensuring it is completed in its entirety.
2. Maintaining compliance with nursing practice regarding medication administration, treatments and procedure care standards.



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3. Assessing, evaluating, and approving the student's ability and capability to self-carry and self-administer prescribed medication and treatments. A baseline assessment for students that are requesting the ability to self-carry must be completed and all assessments will be documented in SHERe.
4. Performing a nursing assessment to establish baseline norms for all students requiring medication. For delegation, this assessment must be updated every forty-five (45) days.
5. Documenting medications administration, treatments and procedures in SHERe.
6. Reminding parents of unused or discontinued medications, equipment, and/or supplies at the end of the school year.
7. Disposing of unused or unclaimed medication at the end of the school year.
8. Obtaining completed Prescriber Order Form for any medication or treatment changes.

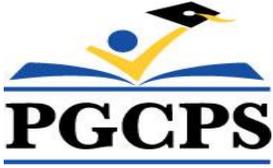
H. School personnel (Delegating nurse or delegatee) are responsible for:

1. Notifying parents of unused medication by telephone when discontinued or at the end of the school year.
2. Disposing of unused and unclaimed medication.
3. Educating parents of the importance of accepting changes of a student's medication order from the prescriber ONLY.
4. Ensuring any changes or discontinuances are written on the Prescriber's order form and signed by the prescriber.

I. Monitoring medication:

Delegating nurse or delegatee must monitor the taking of medication. Students who are able to administer their own medication (i.e. rescue inhaler, Epi-pen) must do so under the direction of the Delegating Nurse or delegatee.

1. The parent must give the first dose of any new prescription or



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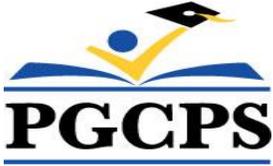
over-the-counter medications, except for a PRN emergency medication, e.g., Epipen, Diastat.

2. Self-carry/self-administration of emergency medication **MUST** be authorized by the prescriber and parent as well as supported by the school nurse's assessment. A note will be recorded on progress note documenting student's capability, parent and prescriber contact.
3. The Medication Administration Record (MAR) will be completed whenever medications are administered.

J. Field/Overnight Trips:

Health Services staff will not leave the school building for field trips unless the entire student population is participating. The following procedures must be implemented to ensure safe administration of medications on field trips.

1. For schools with a Nurse: The principal or principal designee will notify the Licensed Nurse (RN/LPN) regarding the date of the field trip and the names of the participating students at least thirty (30) days in advance (see Attachment 12). At least five (5) days prior to the field trip, parents must provide to the school a fully completed and signed Prescriber's Medication Order Form for each medication that is not normally given during the school day. The school nurse will package for school staff a single dose of medication which is labeled with the student's name, name of medication, dosage, and time of administration.
2. For schools without a Nurse: The principal or designee will consult with the Office of Health Services at least thirty (30) days prior to the field trip.
3. For overnight trips: Parents must provide all appropriately labeled prescriptions and over-the-counter medications (not administered at school) to the Licensed Nurse (LPN or RN). In addition, parents must provide to the school a fully completed and signed Prescriber's Medication Order Form for each medication that is not normally given during the school day at least five (5) days prior to scheduled field trip. At the completion of the field trip, school staff will return any unused medication and forms to the delegating nurse/delegatee.
4. Teacher who accompanies student on field trip: Teachers who



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accompany students on field trip will administer and document medication administration per the delegating nurse.

5. The principal or school nurse will notify Health Services if a student requires a nurse to accompany him or her on a field trip as soon as possible, but not later than thirty (30) days prior to the field/overnight trip. Students with disabilities who require nursing services at school cannot be excluded from field trips.

NOTE: At the beginning of each school year the Health Services staff or principal will provide the teachers with the “Field Trip Checklist” (See Attachment 11).

V. **MONITORING AND COMPLIANCE:** At a minimum clinical supervision is conducted by the Nurse Manager annually and as needed. Review medical record of students and run medication reports in SHERE. All PMOFs must be reviewed upon receipt by a licensed nurse to ensure compliance with this administrative procedure.

VI. **RELATED PROCEDURES:**

- Administrative Procedure 5162, Emergency Care in Schools
- Administrative Procedure 6153, Student Trips.

VII. **LEGAL REFERENCE:**

- 21 U.S.C. §8
- Annotated Code of Maryland, Health-General Article, § 21-221
- Annotated Code of Maryland, Education Article, §7-421, §7-426 §7-426.1, §7-426.2
- COMAR 10.13.12.01B (1);
- COMAR 10.27.11.03;
- COMAR 13A.05.05.08F.

VIII. **MAINTENANCE AND UPDATING OF THESE PROCEDURE:** The Office of School Health within the Department of Student Services will maintain and update this procedure as necessary.

IX. **CANCELLATIONS AND SUPERSEDURES:** This Administrative Procedure cancels and supersedes Administrative Procedure 5163, Medication and Procedures dated August 1, 2011



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X. **EFFECTIVE DATE:** October 25, 2021

Attachments:

- Attachment 1: Parent Fact Sheet for Medication at School
- Attachment 2: Prescriber's Medication Order Form for Prescription and Nonprescription Medication
- Attachment 3: Prescriber's Medication Order Form for Epi-pen
- Attachment 4: Prescriber's Medication Order Form for Inhaler or Nebulizer
- Attachment 5: Prescriber's Medication Order Form for Diastat
- Attachment 6: Management of Diabetes at School
- Attachment 7: Medication Inventory for Controlled Drugs
- Attachment 8: Medication Inventory for Controlled Drugs Directions
- Attachment 9: Medication Error Incident Report
- Attachment 10: Medication Administration Record
- Attachment 11: Field Trip Checklist