MEDICATION

REGULATIONS CONCERNING ADMINISTRATION OF MEDICATION

Amended Senate Bill 262, Section 3313.713, of the Ohio Revised code effective January 1985, requires the board of education of each school district to adopt a policy on the administration to students of drugs prescribed by physicians. In 2009, Ohio House Bill 1 updated school medication administration law (ORC 3313.713) to require school employees administering medications after July 1, 2011 be:

A licensed health professional

OR

Complete a drug administration training program conducted by a licensed health professional and considered appropriate by the board

psi POLICY FOR ADMINISTRATION OF MEDICATION AT SCHOOL

If medications are to be given during school hours, the school board shall provide a clearly defined policy in this area. It is recognized that at the present time many children are able to attend regular schools because of the effectiveness of medication in the treatment of chronic disabilities and illnesses. Any student who is required to take prescribed medication during regular school hours should comply with school regulations. psi policy for the administration of medication follows the guidelines established by the Ohio Department of Health.

General Policies

- All school personnel must be informed that the administration of any prescription drug without the signed ***Physician and Parent Request for the Administration of Medication at School*** (ODH equivalent of a MAR) could be interpreted as practicing medicine and is prohibited by law.

- A School District Policy regarding over-the-counter medication supersedes psi policy.

- The ***Prescriber and Parent Request for the Administration of Medication at School*** (MAR), signed by the prescriber and parent, must be obtained before ANY medication may be administered by school personnel. The order must include:
  a. Student name and address
  b. School and class in which the student is enrolled
  c. Name of the drug and the dosage to be administered
  d. The times or intervals at which each dose of medication is to be administered
  e. The date the administration is to begin and end (a new order is required each school year)
  f. Any severe adverse reactions that should be reported to the prescriber and one or more phone numbers where the prescriber can be reached in case of emergency
  g. Any special instructions

- Other forms of the MAR received from a prescriber containing the above information that are signed by the prescriber and parent are acceptable.

- Medication must be in the original containers (childproof) and have an affixed label including the student's name, name of the medication, dosage, route of administration, time of administration, and labeled by the pharmacy or physician. Non-prescription medications (OTC) will be given only when they come to school in their original sealed container. (Sealed sample size medications are ideal, as are labeled, sealed, foil-wrapped tablets or pills.) Medication must be labeled with the student's name.

- All medication received by the school must be documented on a Medication Inventory Record. The clinic nurse is responsible for reviewing and initialing the Medication Inventory Record regularly.

- An accurate record of all medication administered must be kept. (ODH equivalent of a Medication Documentation Record (MDR) or Checklist for the Administration of Medication). One medication per form.

- All medication errors shall be reported to the clinic nurse and supervisor and an Incident Report completed.

- The principal shall designate the school personnel to administer medication, if the health personnel is unavailable**. All unlicensed school personnel that have been designated by the administration to administer medication to students must complete a medication administration training program conducted by a licensed health professional and considered appropriate by the board. ORC 3313.713**

- The clinic nurse will confer with the school administrator to ensure that school personnel that have been designated to administer medication have received the required training.

- The first dose of a new medication may NOT be administered at school.

- The medication and the signed ***Prescriber and Parent Request for the Administration of Medication at School*** (MAR) form should be brought to the school by the parent/guardian. This form shall be available to parents upon request. Faxed forms are acceptable.

- New request forms must be submitted each school year and as necessary for changes in medication.

- If a student is taken off medication or will no longer receive it at school, the parent must put request in a dated, written note as soon as possible, accompanied by a prescriber's signed order to discontinue the medication.

- Parents must pick up unused medication. Medication that is not picked up within 30 days after it is discontinued will be disposed of according to FDA guidelines.

- All medication must be kept locked at all times. Keys should never leave the school building. Always make sure that all medications are locked during the day and that the cabinet is locked when you leave the clinic.

- Field trips and extracurricular activities are considered to be an extension of the school day, therefore all medication policies and procedures apply.

Procedure for the Administration of Medication at School

- Always follow the 6 Rights of Medication Administration (Right Individual, Right Medication, Right Dose, Right Time, Right Route and Right Documentation.) every time a medication is administered.

Identifying the Student (Right Individual)

- Take your time to correctly identify each student. Do not allow time pressures to hurry you along.

- Triple check both the first and last name of each student. Be sure you know the student to whom you are giving the medication.

- Do not take the word of any student, regardless of age, as to his or her identity. Confirm the student's identity with school personnel if you are at all uncertain.

- Inform your building administrator that psi requires photo identification for all students receiving medication.

- Refer to this photo when identifying the right individual.

- Parents are asked to provide a photo of their child along with the signed Prescriber and Parent Request for the Administration of Medication by School Personnel.

- In the event that a parent is unable to provide a photo, ask the principal whether a current photo is available for those students receiving medication. If the school has pictures, ask if you may have one of each student.

Administering the Medication (Right Medication, Right Dose, Right Time & Right Route)

- Always follow the 6 Rights of Medication Administration (Right Individual, Right Medication, Right Dose, Right Time, Right Route and Right Documentation.) every time a medication is administered.

- Take your time when dispensing medication. Be sure you have carefully followed all psi procedures before you give a student any medication.

- Always review the Checklist for the Administration of Medication or MDR before giving medication to be sure it has not already been given.

- Medication should be taken out of the locked cabinet one at a time when each is to be given. The cabinet should be locked immediately after retrieving or replacing medication.

- No student, at any time, shall be allowed to retrieve his own medication. All medications, prescribed or over-the-counter, are to be handled by psi staff, when on duty. Always pour the medication into a clean container, the student's freshly washed hand, or the cap of the pharmacy bottle. Do not use your own hand, a table top, or any other container.

- psi health personnel must watch the student take the medication.

- A glass of water is always given to a student taking oral medication. Encourage the student to drink the entire glass. Students using inhalers often require a glass of water to rinse out their mouths following inhaler use.

Checklist for the Administration of Medication (MDR) (Right Documentation)

- There should be a Checklist for the Administration of Medication (MDR) for each Prescriber and Parent Request… form, MAR or Care Plan. Attach the photo to the Prescriber and Parent Request… form, MAR or Care Plan containing medication orders, comparing the photo to the student each time medication is dispensed.

- Note: Medication may be administered before a picture is received if all other above steps in identification have been taken. Act swiftly, however, to arrange for photo identification.

- All substitute health staff must take extra care to be sure of the student's identity before any medication is given. If you are unsure of the identity of any student, walk the student to the office and ask school personnel to identify the student.

- Always record any medication given on the Checklist for the Administration of Medication (MDR) at the time it is given. Do not document in advance. Document if the student does not receive their medication and reason (e.g., Absent, Field Trip).

Safety First

- Medications must be kept locked at all times. Make sure the cabinet is locked when you leave the clinic.

- All keys for the medication cabinet should be collected from and returned to the secretary or other principal designee at the start and end of each day.

- **Common sense and careful precautions are essential. Contact your supervisor at any time with any questions. ALWAYS Follow the Six Rights of Medication Administration. IF YOU ARE EVER IN DOUBT, DO NOT GIVE THE MEDICATION. Notify the building administrator and contact the parent of your concerns. Act slowly and deliberately; treat each student as if he/she was your own!**

Procedure for Receiving Medication at School

1. All medication must have the required authorization in writing for the administration of medication at school.

2. All medication received by the school must be documented on a Medication Inventory Record. The Inventory Record will be kept in the Medication Binder.

3. Prescription medication will be counted by the health staff and the parent (or other adult) when it is brought to the clinic. The count should initialed on the inventory sheet by both individuals as verification.

4. Medication Inventory will be reviewed by the Registered Nurse and initialed/dated when reviewed at each visit, checking for new medications received since previous visit.

5. A Checklist for the Administration of Medication (MDR) should be created for every medication received. The Administration Record (MDR) will contain the same information found on the Prescriber and Parent Request for the Administration of Medication at School (MAR).

6. Any medication prescribed for a student on an Individual Health Care Plan (i.e. Allergy, Asthma, Diabetes, and Seizure) that is signed by the prescriber and the parent is acceptable authorization for the administration of medication at school. A separate Prescriber and Parent Request (MAR) is NOT required.

7. A photo of the student should be attached to each Prescriber and Parent Request for the Administration of Medication (MAR) or Individual Health Care Plan.

8. The Prescriber and Parent Request for the Administration of Medication at School (MAR) or Individual Health Care Plan and the Checklist for the Administration of Medication (MDR) for each medication will be placed alphabetically in a Medication Binder.

9. The Medication Binder will be divided between Daily and PRN medications. If there are a large number of medications, separate binders may be used.

10. All medication must be kept in a locked cabinet at all times. A copy of the Individual Health Care Plans should be kept with the prescribed emergency medications (i.e. Epinephrine autoinjectors, Inhalers, Glucagon, Diastat, etc.)
11. Daily medications should be separated from PRN medication.

Helpful suggestions:

A copy of all medication authorization forms and/or Individual Health Care Plans may be made (before placing them in the Medication Binder) and the copy placed with the medication in a ziplock bag labeled with the student's name, grade and/or room number and kept in the locked cabinet. This will facilitate a rapid response in an emergency situation as well as have medications ready to go on a field trip.

PRESCRIBER AND PARENT REQUEST FOR THE ADMINISTRATION OF MEDICATION AT SCHOOL

(Medication Administration Record – MAR)

***** One Medication per Form *****

Student Photo

School _____

Student _____ Grade/Rm_____

Address _____

City/State/Zip _____

Name of Medication and Dosage _____.

Times of Day to be Administered _____.

Number of Times/Intervals Medication is to be Administered _____.

Date to Begin Medication _____ Date to End Medication _____

Adverse/Severe Reaction that Should be Reported to Physician _____

Special Instructions for Administration of Medication _____

This medication can be safely administered by non-medical personnel ☐ Yes ☐ No

It is impossible to arrange for this medication to be taken at home and, therefore, it must be administered during school hours ☐ Yes ☐ No

This student is under my care. It is not possible to arrange for this medication to be taken at home under the supervision of a parent and therefore it must be taken during school hours.

_____ _____

Prescriber's Printed Name Tel

_____ _____

Prescriber's Signature Date

Please regard my signature below as my assurance that I release _____ _____ School, psi, and any or all of the school's and psi's officers or employees from any liability or damages resulting from the consequences or adverse reactions of our child's taking or failing to take this medication at the times prescribed. I also agree to keep the school informed in writing of any revision in the physician's prescription. I have had the opportunity to ask questions. They have been fully answered to my satisfaction.

_____ _____

Parent's Printed Name Tel

_____ _____

Parent's Signature Date

School Health Assistant
Nurse
School
City

MEDICATION INVENTORY

	Medication												
Student	***Medication/ Dosage***	***Date Received***	***Locked Cabinet***	***Phys Order***	***Parent Order***	***Orig. Cntr***	***Photo***	***Med. Color***	***Med. Count***	***Med. Expiration Date***	***Health Aide Initials***	***Count Verified by Initials***	***Nurse Initials/ Date***

CHECKLIST FOR THE ADMINISTRATION OF MEDICATION

(Medication Documentation Record – MDR)

♦♦♦♦♦♦♦ ONE MEDICATION PER FORM ♦♦♦♦♦♦♦

School_____Grade/Room_____

Student_____Date of Birth_____

Medication _____ Dose_____ Time_____

Date	Medication	Dosage	Med. Color	Identify by Name X 3	Check Med X 3	Time Given	Given By	Med Count ♦♦

♦♦ For Prescription Medications

PROCEDURE FOR MEDICATION ADMINISTRATION DURING SCHOOL TRIPS

Medication administration during school trips will follow school board policy for the administration of medication to students.

If psi health staff accompany students on a trip, she/he will be responsible for medication administration unless otherwise noted.

If psi health staff does not accompany students on a trip, the school principal/administration will designate **school personnel that have completed a medication administration training program conducted by a licensed health professional and considered appropriate by the board (ORC 3313.713) to administer medication to students.**

For School Trips Lasting One Day or Less

1. The individual who routinely administers medication at school will provide the designated school personnel with a copy of the signed Prescriber and Parent Request for the Administration of Medication at School (MAR), the Checklist for the Administration of Medication (MDR), a photo of the student, and the labeled prescription/medication bottle.

2. Inhalers or liquid medication will be kept in a sealed plastic bag with the appropriate measuring/administration device. Inhalers and Epinephrine Autoinjectors may be carried by students with required self-carry authorization and the documentation must be sent along on the trip.

3. The person who routinely administers medication at school will review the above information with the person designated to administer medication on the school trip.

4. The person designated to administer medication on the school trip shall sign for receipt of the medications when leaving for the trip and upon return of the medication to the school clinic. Verify medication count before and after trip.

5. All medications are to be kept in a locked container.

For School Trips Lasting More Than One Day, the following ADDITIONAL procedures apply

1. Notify parents several weeks in advance. Specifically ask if there are medications administered to students outside of normal school hours that will need to be administered on the trip. Parents must work with the prescriber to provide any additional medication and authorization form(s)for the trip to the school.

2. A copy of the Prescriber and Parent Request for the Administration of Medication at School (MAR) must accompany ALL medications to be administered.

3. All medications and forms must be submitted to the school a minimum of 24 to 48 hours before the trip

4. The person who routinely administers medication at school will review the above information with the person designated to administer medication on school trip. A copy of the Prescriber and Parent Request for the Administration of Medication at School (MAR) must accompany all medications to be administered. Instructions on completion of Checklist for the Administration of Medication (MDR) as well as copies of this checklist should be provided at this time.

5. The Checklist for the Administration of Medication (MDR) will be completed by the person designated to administer medication on the trip.

6. If parents accompany their children on the trip, they will be responsible for the administration of medication to their own child. If this is the case, documentation should be made on Checklist for the Administration of Medication (MDR) accordingly.

LETTER TO PARENTS
ADMINISTRATION OF MEDICATION IN SCHOOL

TO: **Parents/Guardian of _____**

FROM: **School Health Clinic and Principal**

DATE: **_____**

SUBJECT: **Administration of Medication in School**

As a school we understand that in order to be safe and able to benefit from the educational program, some students will need to take medicine at school. If your child must have medication of any type given during school hours, including over-the-counter drugs (depending on the school/district policy), you have the following choices:

- You may come to school and give the medication to your child at the appropriate time(s).

- You may obtain a copy of a medication form from the clinic staff or secretary. (One medication per form.) Take the Prescriber and Parent Request for the Administration of Medication at School to your child's health care provider and have it completed by listing the medication(s) needed, dosage, and number of times per day the medication is to be administered. The prescriber for both prescription and over-the-counter drugs (depending on school/district policy) must complete this form. The prescriber and the parent must sign the form. Prescription medicines must be brought to school in a pharmacy-labeled bottle which contains instructions on how and when the medication is to be given. Over-the-counter drugs must be received in the original, unopened container and will be administered according to the written instructions.

- You may discuss with your prescriber an alternative schedule for administering medication (e.g., outside of school hours).

School personnel will not administer any medication to students unless they have received a form properly completed and signed by the prescriber and the parent, and the medication has been received in an appropriately labeled container. In fairness to those giving the medication and to protect the safety of your child, there will be no exceptions to this policy.

If you have questions about the policy, or other issues related to the administration of medication in the school, please contact the clinic staff at the following number:

.

Thank you for your cooperation.

LETTER TO PARENTS
MEDICATION POLICY

TO: **Parents/Guardian of** _____

FROM: **School Health Clinic**

DATE: _____

SUBJECT: **Medication Policy**

To protect your child's safety, the clinic staff will adhere to the following medication policy. It is required that **BOTH** the parent **AND** prescriber signatures are on file before any prescription **OR** non-prescription medication (depending on the school/district policy) is administered. This includes all medications including such over-the-counter products as Tylenol, Advil, etc.

Although this may cause some inconvenience, we feel that this policy is best for the continued protection of your child, and must be followed. **If we do not have your written permission and the written permission of your prescriber, the medication will not be given.** Permission forms can be obtained by contacting the clinic staff.

In order for your child to receive any medication at school, please conform with the following:

- A written request must be obtained from the prescriber and the parent/guardian. This request must include the name of the medication, dosage, time it is given during school hours, and duration. Forms are available at the school.
- A signed Prescriber and Parent Request for the Administration of Medication at School is required in order to dispense medication.
- The medication must be in its original container and, and if an over-the-counter medication, the bottle must be new with an unbroken seal. All medications must have a fixed label which indicates the student's name, name of medication, dosage, method of administration, time of administration and time interval of dosages.
- When the empty prescription bottle is returned to you, please bring the refill to school promptly.
- The medication and the signed permission form must be brought to the school by the parent or guardian. **Students may not bring medication to school.**
- Please include a photo of your child with the permission form.
- New Request forms must be re-submitted each school year, and are **necessary for any changes in medication orders.**
- If your child is taken off medication or will no longer receive it at school, please put your request in a dated, written note as soon as possible, accompanied by a prescriber's signed order to discontinue the medication. If the medication is not picked up by parents from the health aide or school office within 30 days, it will be properly disposed of.
- Medication will not be administered without a signed order from the prescriber or Prescriber and Parent Request for the Administration of Medication at School.

Please contact the building principal or clinic staff if you have any questions. Thank you for your cooperation.

LETTER TO PARENTS
MEDICATION DEPLETION

TO: Parents/Guardians of _____

FROM:School Health Clinic

DATE: _____

SUBJECT: Medication Depletion

This is to inform you that your child has _____ days until his/her medication is depleted. Your child's education is vital, and his/her medication plays an important role.

Please remember that students may not bring medication to school.

Please bring in medication before .

Thank you for your prompt response to this request.

LETTER TO PARENTS
MEDICATION DEPLETION

TO: Parents/Guardians of _____

FROM:School Health Clinic

DATE: _____

SUBJECT: Medication Depletion

This is to inform you that your child has _____ days until his/her medication is depleted. Your child's education is vital, and his/her medication plays an important role.

Please remember that students may not bring medication to school.

Please bring in medication before .

Thank you for your prompt response to this request.

LETTER TO PARENTS
MEDICATION AT SCHOOL
END OF SCHOOL YEAR PROCEDURE

TO: Parents/Guardians of _____

FROM: School Health Clinic

DATE: _____

SUBJECT: Medication at School

Your student has medication at school as stated in the Prescriber and Parent Request for the Administration of Medication at School on file in the school clinic.

This medication cannot be sent home with your student.

Therefore, if your student has medication remaining at the end of the school year on

_____, you have a choice of either picking up the medication from the school
(Date)
or having it disposed of in the proper manner.

The medication will be disposed of on _____ at _____.
(Date) (Time)

For your information, there are_____ days of school left, and your student has

_____ remaining at school.
(Medication)
If you have any questions or concerns, or need to make plans for picking up the medication,

you can call the school at _____ between the hours of _____
(Phone #) (Times)
and ask for the nurse or health aide.

Thank you for your prompt attention and cooperation.

LETTER TO PARENTS
MEDICATION EXPIRATION

TO: Parents

From: School Nurse

Date: _____

Subject: Medication Expiration

This is to inform you that your child has

in the clinic that will be expiring on .

We are not able to administer expired medication.

Please remember that students may not bring medication to school.

Please bring in replacement medication by

THANK YOU FOR YOUR PROMPT RESPONSE TO THIS REQUEST.

LETTER TO PARENTS
MEDICATION EXPIRATION

TO: Parents

From: School Nurse

Date: _____

Subject: Medication Expiration

This is to inform you that your child has

in the clinic that will be expiring on .

We are not able to administer expired medication.

Please remember that students may not bring medication to school.

Please bring in replacement medication by

THANK YOU FOR YOUR PROMPT RESPONSE TO THIS REQUEST.

Abbreviation	Meaning	Abbreviation	Meaning
ac	before meals	per	by
ad	right ear	po	by mouth
al	left ear	PRN	as needed
au	each ear	PT	physical therapy
bid	twice a day	q	every
B/P	blood pressure	qh	every hour
c̄	with	qid	four times a day
cap	capsule	qod	every other day
cc	cubic centimeter	ROM	range of motion
D/C	discontinue, stop	s̄	without
F	Fahrenheit	ss	a half
gtt	drop	stat	immediately
grm, g	gram	supp	suppository
gr	grain	tab	tablet
h	hour	tbsp	tablespoon
hs	at bedtime (hour of sleep)	tid	three times a day
ht	height	tinc	tincture
kg	kilogram	tsp	teaspoonful
mg	milligram	wt	weight
ml	milliliter	i	one
od	right eye	ii	two
os	left eye	iii	three
ou	each eye	v	five
oint	ointment	x	ten
oz	ounce	per	by
pc	after meals	po	by mouth
		PRN	as needed

psi MEDICATION ERROR POLICY

A medication error is any deviation from the standards of care owed to a student in the area of correct medication delivery as directed by the prescriber's and parent's written and signed instructions. A medication error occurs when one of the "six rights of medication administration" is violated. These rights are:

- Right Student
- Right Medication
- Right Dose
- Right Time
- Right Route
- Right Documentation

Reducing medication errors involves an approach that encourages learning from one's error while minimizing and avoiding future medication errors. All medication errors will be reported to the psi health services office and a medication incident form will be completed. The Medication Incident Form includes an action plan to prevent future incidents

The psi Health Services Management and Supervisory team will determine the necessary follow up to prevent a similar error from occurring in the future. Such follow up will depend on the number of previous errors, the length of time between previous errors, and the severity of the error to name a few examples. The follow up can include but is not limited to the following:

*Verbal counseling and instruction
*A medication administration reorientation
*Direct Supervisory oversight of medication passing for a period of time to be determined
*Performance Improvement Plan
*Requirement to complete "six rights of medication administration" worksheet for each medication administered

References:

Richmond, S.L. (2011). Medication Error Prevention in the School Setting: A Closer Look. NASN School Nurse, 26, 304. (pp. 305-308) Ohio Department of Health. (2011). ODH Medication Administration in Ohio Schools: Training for School Personnel. Available at: https://oh.train.orgWisconson Public Health Association. (2013). Wisconsin School Health Services Project: Medication Error Procedure Fall 2013. Available at: wpha.org/school-health

psi MEDICATION ERROR PROCEDURE

When a medication administration error occurs follow these procedures:

Staff Responsibilities:

1. Remain calm and observe the student, document what you observe
2. If the student has returned to class, have the student escorted back to the clinic
3. Notify the building administrator, your regional supervisor (if unavailable, contact the psi health office), the nurse assigned to the clinic or the District RN, the student's parent/guardian, and the health care provider if warranted (for non-licensed personnel, the supervisor can assist you with these notifications)
4. Complete an Incident Report, Medication Administration form found in the psi Health Resource Guide Medication section
5. Carefully record all circumstances and actions taken
6. Forward the completed Incident Report to the psi office

Supervising Nurse Responsibilities:

1. Assist in any notifications that need to be made including psi Health Services office if not yet notified
2. Assist in any follow up care student may need
3. Review the medication error immediately with staff member
4. If appropriate, in consultation with manager from psi office, identify someone else to assume responsibility of medication administration if necessary
5. Assist in any corrective action plan to prevent further errors and ensure Incident Report is completed and forwarded to psi.

psi Health Administrator Responsibilities:

1. Upon notification of medication error contact appropriate persons if not already done
2. Review medication error with staff member if supervising nurse has not already done so
3. Review Incident report when received and identify errors related to systems and or process issues. Identify strategies with supervisor's input to correct issues identified
4. Determine plan of action for the staff member depending on the error and circumstances (verbal counseling, education, competency testing, direct supervision, performance improvement plan, etc.)
5. Ensure plan of action is completed
6. Review all med errors bi-annually, identify process changes that may need to occur to improve medication administration procedures

MEDICATION ADMINISTRATION INCIDENT REPORT

Student _____ Age _____

School _____

Address _____

City/State/Zip _____

Date and Time of Incident/Error _____

Person Administering Medication _____

Medication, Strength and Dose Prescribed _____

Describe Circumstances Leading to Incident/Error _____

_____

_____

Describe Incident/Error _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

PERSONS NOTIFIED OF INCIDENT/ERROR

psi _____

Nurse _____

Principal _____

Parent _____

Prescriber (if necessary) _____

**Any medication error resulting in further medical evaluation, (including medical transport) requires full error report to be communicated to receiving treatment team.*

Signature _____ Date of Report _____

CONTINUE WITH FOLLOW-UP INFORMATION ON NEXT PAGE

FOLLOW-UP INFORMATION

Incident/Error Reviewed by Registered Nurse _____

Action Taken to Prevent Future Incidents/Errors _____

RN Signature: _____

For Internal Use Only
Following the completion of this form by the employee involved, please fax, scan/email or mail to psi Health Services

ADMINISTRATION OF MEDICATION
COMPLIANCE FORM

Please print

First Name _____ Last Name _____

Today's Date _____ Position _____

I have read and fully understand psi's Administration of Medication policy. I understand that no student shall ever retrieve his/her medication. Medications shall only be directly distributed by psi staff or other trained school personnel in my absence. Medications will be poured directly into the cap of the medication bottle, a clean cup, or other suitable container. The student shall be identified by name three times while checking the medication bottle. All medications for which I am responsible will be kept in locked enclosures (e.g., cabinets, drawers, etc.) at all times. I understand that all medications are to be locked at all times.

I understand that I am responsible for obtaining a signed Prescriber and Parent Request for the Administration of Medication form for all students receiving medication (unless school board policy differs for over-the-counter medications), including students with diabetes, asthma and students using Epinephrine Autoinjectors for whom I am expected to provide treatment.

I understand that it is psi's policy that School Health Assistants-HA will NOT be trained to administer medications through a G-tube or to give injections except for Emergency Medications, such as Epinephrine Autoinjectors or Glucagon. psi School Health Assistants-HA that demonstrate competency may be trained to administer insulin based on need and the completion of Diabetes Level III training.

I will check the Six Rights of Medication Administration each time I administer medication.

I have been trained and have returned demonstration of the administration for the following medications.

	Date/Trainer Initials		Date/Trainer Initials
Oral	_____	Inhaler/Nebulizer	_____
Otic	_____	Opthalmic (Eye)	_____
Nasal	_____	Rectal/Diastat	_____
Topical	_____	Epinephrine Autoinjector	_____
Glucagon	_____		

Employee Signature: _____ Date: _____

MEDICATION TRAINING FOR SCHOOL PERSONNEL

In 2009, Ohio House Bill 1 updated school medication administration law effective July 1, 2011 to require all school employees that administer medication must be a licensed health professional OR complete a medication administration training program conducted by a licensed health professional and considered appropriate by the board. As it is written, the law applies to public and charter schools.

The nurse may be requested by the District or your school to provide this training for the unlicensed school personnel that have been designated by the principal/administrator to administer medication when a licensed health professional is unavailable. psi has developed a training program based on the ODH Medication Administration in Ohio Schools: Training for School Personnel and current psi Medication Policies. This can be modified based on the medications that are ordered for students in the schools and the school district policy regarding OTC medications.

psi will not be training unlicensed personnel to administer injections (other than emergency medications), give insulin or medication through a gastrostomy tube. In order for unlicensed personnel to administer insulin, a separate Diabetes Training is required.

It is recommended that all staff be instructed in Emergency Medication administration. Emergency medications include Epinephrine autoinjectors, inhalers, glucagon and Diastat. The training may be customized to meet the needs of your school/district; for example, you may only have oral and emergency medications so you may choose only to teach those modules and teach other modules as the need arises.

There is a train the trainer course available online at Ohio TRAIN for licensed health professionals to take which covers the training of unlicensed school personnel to administer medication.

> Go to Ohio TRAIN at https://oh.train.org
> Course **ID 1063787**

There is no mandate to use the ODH training but it may help you when planning the training for the unlicensed school personnel.

psi has put together an outline and a packet of materials that you can use along with any forms that may be specific for your district to assist you should you be asked to provide this training. There will also be a PowerPoint presentation and companion slide notes from the ODH training that you may access on the psi website from which you may select slides to use in your training. psi will have a limited number of videos and training aids that may be borrowed to assist in the training of school personnel. Due to the limited number of training kits, you will need to call to reserve a kit for the date of your training and return it when your training is completed.

It is highly recommended that all nurses register to receive updates from the ODH School Nurse Bulletin Board. You will receive information on a variety of topics including laws that affect school health, medication recalls, educational opportunities and more.

Registration instructions are available on the ODH School Nursing Program Web page under "Guidelines and Publications" (Note: You must use Internet Explorer or Safari to view the instructions.

If you have any questions, please contact the psi Health Services Team at 330-425-8474 ext. 226 or Toll-Free at 800-841-4774 ext. 226.

3313.713 Policy for employees to administer drugs prescribed by physicians to students.

(A) As used in this section:

(1) “Drug” means a drug, as defined in section 4729.01 of the Revised Code, that is to be administered pursuant to the instructions of the prescriber, whether or not required by law to be sold only upon a prescription.

(2) “Federal law” means the “Individuals with Disabilities Education Act of 1997,” 111 Stat. 37, 20 U.S.C. 1400, as amended.

(3) “Prescriber” has the same meaning as in section 4729.01 of the Revised Code.

(B) The board of education of each city, local, exempted village, and joint vocational school district shall, not later than one hundred twenty days after September 20, 1984, adopt a policy on the authority of its employees, when acting in situations other than those governed by sections 2305.23, 2305.231, and 3313.712 of the Revised Code, to administer drugs prescribed to students enrolled in the schools of the district. The policy shall provide either that:

(1) Except as otherwise required by federal law, no person employed by the board shall, in the course of such employment, administer any drug prescribed to any student enrolled in the schools of the district.

(2) Designated persons employed by the board are authorized to administer to a student a drug prescribed for the student. Effective July 1, 2011, only employees of the board who are licensed health professionals, or who have completed a drug administration training program conducted by a licensed health professional and considered appropriate by the board, may administer to a student a drug prescribed for the student. Except as otherwise provided by federal law, the board’s policy may provide that certain drugs or types of drugs shall not be administered or that no employee shall use certain procedures, such as injection, to administer a drug to a student.

(C) No drug prescribed for a student shall be administered pursuant to federal law or a policy adopted under division (B) of this section until the following occur:

(1) The board, or a person designated by the board, receives a written request, signed by the parent, guardian, or other person having care or charge of the student, that the drug be administered to the student.

(2) The board, or a person designated by the board, receives a statement, signed by the prescriber, that includes all of the following information:

(a) The name and address of the student;

(b) The school and class in which the student is enrolled;

(c) The name of the drug and the dosage to be administered;

(d) The times or intervals at which each dosage of the drug is to be administered;

(e) The date the administration of the drug is to begin;

(f) The date the administration of the drug is to cease;

(g) Any severe adverse reactions that should be reported to the prescriber and one or more phone numbers at which the prescriber can be reached in an emergency;

(h) Special instructions for administration of the drug, including sterile conditions and storage.

(3) The parent, guardian, or other person having care or charge of the student agrees to submit a revised statement signed by the prescriber to the board or a person designated by the board if any of the information provided by the prescriber pursuant to division (C)(2) of this section changes.

(4) The person authorized by the board to administer the drug receives a copy of the statement required by division (C)(2) or (3) of this section.

(5) The drug is received by the person authorized to administer the drug to the student for whom the drug is prescribed in the container in which it was dispensed by the prescriber or a licensed pharmacist.

(6) Any other procedures required by the board are followed.

(D) If a drug is administered to a student, the board of education shall acquire and retain copies of the written requests required by division (C)(1) and the statements required by divisions (C)(2) and (3) of this section and shall ensure that by the next school day following the receipt of any such statement a copy is given to the person authorized to administer drugs to the student for whom the statement has been received. The board, or a person designated by the board, shall establish a location in each school building for the storage of drugs to be administered under this section and federal law. All such drugs shall be stored in that location in a locked storage place, except that drugs that require refrigeration may be kept in a refrigerator in a place not commonly used by students.

(E) No person who has been authorized by a board of education to administer a drug and has a copy of the most recent statement required by division (C)(2) or (3) of this section given to the person in accordance with division (D) of this section prior to administering the drug is liable in civil damages for administering or failing to administer the drug, unless such person acts in a manner that constitutes gross negligence or wanton or reckless misconduct.

(F) A board of education may designate a person or persons to perform any function or functions in connection with a drug policy adopted under this section either by name or by position, training, qualifications, or similar distinguishing factors.

(G) A policy adopted by a board of education pursuant to this section may be changed, modified, or revised by action of the board.

(H) Nothing in this section shall be construed to require a person employed by a board of education to administer a drug to a student unless the board's policy adopted in compliance with this section establishes such a requirement. A board shall not require an employee to administer a drug to a student if the employee objects, on the basis of religious convictions, to administering the drug.

Nothing in this section affects the application of section 2305.23, 2305.231, or 3313.712 of the Revised Code to the administration of emergency care or treatment to a student.

Nothing in this section affects the ability of a public or nonpublic school to participate in a school-based fluoride mouth rinse program established by the director of health pursuant to section 3701.136 of the Revised Code. Nothing in this section affects the ability of a person who is employed by, or who volunteers for, a school that participates in such a program to administer fluoride mouth rinse to a student in accordance with section 3701.136 of the Revised Code and any rules adopted by the director under that section.

Amended by 128th General Assembly File No. 34, HB 190, § 1, eff. 8/31/2010.

Amended by 128th General Assembly File No. 9, HB 1, § 101.01, eff. 10/16/2009.

Effective Date: 06-09-2004

Changes to School Medication Administration Law Regarding the Use of Sunblock in Schools

(Effective 9/29/2017)

The legislature added some additional language to the school medication administration law recently regarding the use of sunblock. You may find the law at codes.ohio.gov where you Search for 3313.713 or go directly to http://codes.ohio.gov/orc/3313.713. Here is the new addition:

"(I) Nothing in this section shall be construed to require a school district to obtain written authorization or instructions from a health care provider to apply nonprescription topical ointments designed to prevent sunburn. Furthermore, nothing in this section shall be construed to prohibit a student to possess and self-apply nonprescription topical ointment designed to prevent sunburn while on school property or at a school-sponsored event without written authorization or instructions from a healthcare provider. The policy adopted by a school district pursuant to this section shall not require written authorization from a health care provider, but may require parental authorization, for the possession or application of such sunscreen. A designated person employed by the board of education of a school district shall apply sunscreen to a student in accordance with the school district's policy upon request.

Cite as R.C. § 3313.713

Amended by 132nd General Assembly File No. TBD, HB 49, §101.01, eff. 9/29/2017. "

Medication & Sharps Disposal

I. Federal Guidelines for Proper Disposal of Prescription Drugs:

For current guidelines, please refer to http://www.whitehousedrugpolicy.gov/publications/pdf/prescrip_disposal.pdf

- Do not flush prescription drugs down the toilet or drain unless the accompanying patient information specifically instructs you to do so. For information on drugs that should be flushed visit the FDA's website.

- Some areas have community drug take-back programs or other programs, such as household hazardous waste collection events, that collect drugs at a central location for proper disposal. Contact your city or county government's household trash and recycling service and ask if a drug take-back program is available in your community.

If a drug take-back or collection program is not available:

- Take prescription drugs out of their original containers.

- Mix drugs with an undesirable substance, such as cat litter or used coffee grounds. (Note: Star Bucks supplies free coffee grounds-already bagged and ready.)

- Put the mixture into a disposable container with a lid, such as an empty margarine tub, or into a sealable bag.

- Conceal or remove any personal information, including Rx number, on the empty containers. Covering it with black permanent marker or duct tape, or scratch off.

- Place the sealed container with the mixture and the empty drug containers in trash.

- Only flush prescription medications down the toilet if the patient information specifically instructs you to do that. The FDA provides a list of drugs that should be flushed down the toilet instead of thrown in the trash. For most current list, please refer to http://www.fda.gov/Drugs/ResourcesForYou/Consumers/BuyingUsingMedicineSafely/EnsuringSafeUseofMedicine/SafeDisposalofMedicines/ucm186187.htm

II. Sharps Disposal Guidelines:

- As long as no more than 50 pounds of infectious waste are produced each month, it is permissible to place full sharps containers in the regular trash for disposal. (See Ohio Administrative Code 3745-27-30 (A)(7), available online at http://codes.ohio.gov .)