

LOUIS RIEL

POLICIES, GUIDELINES AND PROCEDURES

SUBJECT	N.E.P.N. CODE
ADMINISTERING MEDICINES TO STUDENTS	JLCD
(Administration of Prescription or Over-The-Counter Medication)	

I. POLICY

The Louis Riel School Division recognizes that many students attending schools require medication for the medical management of chronic diseases, disorders, and illnesses. Parents and guardians are encouraged to make every effort to care for this part of their child's health by assuming full responsibility. In rare cases and in extenuating circumstances, the school may be authorized to administer medication, subject to the **GUIDELINES** and **PROCEDURES** below.

II. GUIDELINES

To ensure the safety and protection of students, staff, and parent/guardian, the following regulation must be followed by all trained school division personnel who are assigned to administer medication to students within the Division. In order for prescribed medication to be administered in school, the parent/guardian must comply with the procedures outlined in this regulation. In circumstances where a parent/guardian has determined that a child is able to safely, competently, and consistently manage his or her own medication administration, that child may be considered exempt from the below **PROCEDURES** except for school staff ensuring proper storage.

If conditions of this policy are not met by parents/guardians the school division may not be in the position to help the student in the event of medical needs/emergencies.

III. PROCEDURES

A. Administration of Prescribed Medication (Prescription or Over-The-Counter) by School Personnel

Preferably, parents/guardians should make arrangements with their physician to have prescribed medications (prescription or over-the-counter) administered outside of school hours. When it becomes necessary for a student to take any prescribed medication during school hours, it shall be in accordance with the following procedures:

1. <u>Authorization for the Administration of Medication Form</u> shall be completed by the parent/guardian for both prescribed and over-the-counter medications.

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- 2. The first dosage of new medication shall not be administered at school. It is the parent/guardian responsibility to ensure the first dose has been well tolerated prior to coming to school.
- 3. Medications must be delivered to the school by the parent/guardian or designated adult in the original pharmacy labelled container which identifies clearly the:
 - a. name of the student
 - b. name of the prescribing physician
 - c. name of the pharmacy
 - d. dose
 - e. frequency and method of administration
 - f. name of the medication
 - g. date the prescription was filled

The label must be on the container itself, such as medication bottle, tube, inhaler, etc., and not merely on the package. If requested, pharmacies will provide two original pharmacy labelled containers. One container may be used exclusively in the school setting. It is recommended that this container be a blister pack dispenser. In the case of a narcotic medication, a blister pack is required.

- 4. Medication shall be sent to the school in the proper dosage. If pills are to be taken in a dosage that is less than one pill, they must be cut to the appropriate size before being delivered to the school. Liquid medication shall be brought to school accompanied by a measuring device which shall provide the exact dosage.
- 5. A one-month supply of medication should be provided to the school when medication is to be given over an extended period of time.
- 6. Once signed by the parent/guardian, and the administration, the <u>Authorization for the</u> <u>Administration of Medication</u> will be considered the Individual Health Care Plan for the administration of medication.
- 7. The <u>Administration of Medication Record</u> shall be completed by the identified staff or alternate who shall be responsible for administering the medication to the student. (See Storage and Safety Section D).

B. Staff Responsible for Administering Medication

- I. Medications may be administered by:
 - a. A registered nurse, as provided by URIS, to students presenting the following:
 - i. complex administration of medication, *i.e.*, via infusion pump, nasogastric tube or injection other than injectable adrenalin
 - ii. other clinical interventions requiring judgements and decision-making by a medical or nursing professional.

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b. Division staff, other than health care professionals, with suitable training by a qualified healthcare practioner, if required (for example, EpiPen administration).

Some medication may be administered to students by division staff, other than health care professionals, with suitable competency-based training and ongoing supervision These include:

- i. oral route requiring measurement
- ii. instillation (i.e., eye/ear drops)
- iii. topical (i.e., ointment, therapeutic dressing)
- iv. inhalation (i.e., bronchodilators)
- v. pre-set medication pumps, and gastrostomy tube
- vi. administration of injectable adrenalin
- c. Division staff, other than health care professionals, knowledgeable of the needs of the specific student and the medication to be administered to students requiring administration of pre-measured oral medication provided to the school in compliance with **PROCEDURES AI**, **A2**, and **A3** above.
- 2. The administration of narcotic medication requires two staff members to be present, both of whom will observe the student swallowing the medication.
- 3. Volunteers to the school system shall not administer medication. Exceptions may occur during school excursions, at the discretion of the School Principal.
- 4. All persons responsible for administering medication shall be aware of the location of the <u>Administration of Medication Records.</u>

C. School Procedures

- 1. The School Principal is responsible for establishing a system for meeting the health care needs within their school which include:
 - a. <u>Medication Administration on a Regular Basis</u>: When a student requires medication on a regular basis (for more than 14 days), one staff member (designated employee) shall be responsible for administering the medication to the student. An alternate staff member shall also be identified to administer medication in the absence of the primary person.
 - b. <u>Medication Administration on an Incidental Basis</u>: Identifying a minimum of two staff members each year that shall be responsible for the administration and management of medication for students who do not normally take medication on a regular basis. Preferably the staff member(s) assigned to administer medication shall do so on a voluntary basis.
 - c. Ensuring that all staff who are designated to administer medication are trained and are knowledgeable about this policy and its procedures.
 - d. Identifying case managers who shall provide direction and support to parents/guardians and designated staff.

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- e. Providing to parents/guardians a link to the policy.
- f. Maintaining a school medical book which lists:
 - i. all students with significant health problems or special medical conditions
 - ii. designated employees responsible for administering medication and the alternates
 - iii. authorization forms
- 2. In circumstances in which a medication must be administered by a health care professional, and that health care professional and appropriate substitute or delegate are absent for any reason, then the medication shall not be administered. In these circumstances the student shall not attend the school setting. The child shall remain at home in the care and control of the parent/guardian. In the event that the child has already arrived at school, the parents/guardians or emergency contact person will be notified to pick up the child.

D. Storage and Safety

Storage and safety are important concerns when medication is administered in school settings.

I. <u>Storage</u>

Guidelines for medications administered in school settings:

- a. Stored in a locked location (see exception "j" below).
- b. The key to the locked location shall be in the care and control of the person(s) responsible for administering the medications.
- c. The key to the locked location shall remain on the premises of the school setting at all times.
- d. A spare key to the locked location shall be reasonably available.
- e. All staff/designates who administer medication in the school setting during the normal course of their duties shall be made aware of the location of the spare key.
- f. A locked location may be a cabinet, cupboard, drawer, steel box or other similar arrangement.
- g. If a medication requires refrigeration, the locked location shall be within a refrigerator.
- h. Medications shall be stored separately and apart from any other material, supply or objects in the locked location. Narcotic medication must be locked separately in the school office.
- i. Medications for more than one student may be stored in one locked location. Each medication shall be clearly labelled.
- j. Medication that may be required urgently shall not be stored in a locked location. Such medication shall be carried at all times on the person of the child or in the case of a child not able to carry or be responsible for his/her

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own medication, the medication will be kept in an unlocked, safe, easily accessible location and a staff member will be designated its responsibility. Such medication includes, but is not limited to:

- i. inhalers
- ii. adrenaline auto-injector (e.g., EpiPen)
- iii. seizure rescue medication.
- 2. <u>Safety</u>

The location of Health Care Plans will be made known to all staff in the school.

- 3. Appropriate records and administration procedures shall be implemented. Recordkeeping shall comply with <u>The Personal Health Information Act</u> and <u>Policy JRA</u> <u>– Pupil Files/Student Records</u>.
 - a. The staff designate and alternate identified to administer medication shall be trained with a review of procedure occurring on a yearly basis.
 - b. Each person responsible for medication administration shall be fully aware of:
 - i. specific details of medication administration for a student
 - ii. location of the spare key to the locked storage location
 - iii. location of the <u>Authorization for the Administration of Medication for</u> a student
 - iv. emergency procedures relevant to the medication and student.
 - c. To prepare for administration of medication, all persons shall:
 - i. wash their hands
 - ii. prepare supplies (e.g., measuring devices, installation appliances, etc.)
 - iii. assure themselves of:
 - (I) the right medication
 - (2) the right student
 - (3) the right dose
 - (4) the right time
 - (5) the right method

in each and every administration.

- d. The person administering the medication shall read the label three times:
 - i. when removing the medication from the locked storage location
 - ii. before the medication is removed from its container
 - iii. after the medication is removed from its container but before it is administered to the student.
- e. Each student who is administered medication shall have a separate <u>Administration of Medication Record</u>. Each record shall include the:

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- ii. name of the person administering the medication
- iii. date and time of the administration
- iv. outcome of the administration
 - successful
 - refused, missed, or otherwise unsuccessful
- v. in the case of a narcotic medication, the number of pills remaining
- f. reason for unsuccessful administration and/or other comments
- g. The <u>Administration of Medication Records</u> shall be completed immediately following each administration and shall not be signed as given until complete.
- h. The medication record shall be stored in the area where the medication is dispensed.
- i. Medications shall be returned to the locked storage location immediately.
- j. Persons administering the medication shall clean/wash any supplies, devices, or appliances used in the administration.
- k. Persons administering the medication shall wash their hands and implement Reducing Exposure to Bloodborne and Other Bodily Fluid Pathogens <u>administrative protocol</u>, as appropriate.

E. Unsuccessful Administration

A medication administration may be unsuccessful. The most common reason for an unsuccessful administration is refusal by the student.

In instances where medication administration is unsuccessful:

- I. Determine if unsuccessful due to:
 - a. refusal by student
 - b. missed administration
 - c. overmedication, or
 - d. incorrect medication.
- 2. Parent/guardian shall be contacted and informed.
- 3. Determine a course of action in consultation with the parent/guardian which may include:
 - a. contacting the student's physician
 - b. have the parent/guardian take the student home
 - c. bring the student to the hospital, or
 - d. other appropriate course of action.

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4. If the parent/guardian cannot be contacted, the student's emergency contact or dispensing pharmacist or physician shall be contacted.

F. Excursions

(School sponsored activity that is held off school property)

Children who require medication administered while attending a school may accompany other students on an excursion only after the excursion has been planned in consultation with their parent/guardian.

This medication administration regulation may be adapted to permit students with medication administration needs to be included on an excursion. The School Principal will exercise their discretion to determine if volunteers may act as the responsible adult who would administer medication.

In general, consideration should be given to:

- 1. Necessity if it is not necessary to administer a medication during an excursion, it shall not be administered.
- 2. Care and control medication shall be in the care and control of a responsible adult who will ensure safe and appropriate storage thereof in accordance with **PROCEDURES DIa** to **DIj** above, to the greatest extent possible.
- 3. <u>Administration of Medication Record</u> the Record shall be completed by the person responsible for administering the medication during the excursion.
- 4. The <u>Authorization for the Administration of Medication</u> shall be carried by the person responsible to administer the medication.
- 5. Emergency communication there should be reasonable and appropriate access to a telephone, cell phone, or radio communication during an excursion.
- 6. Emergency medical response must be determined and considered reasonable by the parent/guardian and School Principal in consultation with physician, if requested.

G. Expiration and Disposal

- 1. Medications have a finite usable period of effectiveness. The parent/guardian shall be responsible for replacing expired medication, as well as for the removal and disposal of expired medication.
- 2. Medication is the property of the child's family. It is expected that medication will be taken home by parent/guardian for any school closure exceeding two weeks.

H. Parent/Guardian Responsibilities

Parent/guardian is to make every effort to make arrangements with the student's physician to have medication taken at home. When this is not possible parents/guardians are responsible for:

- I. Completing the Authorization for the Administration of Medication.
- 2. Ensuring that the first dose was administered and well tolerated prior to coming to school.

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- medication.4. Ensuring that their child has received the necessary information and training if they are to be responsible for the administration and/or storage of their own medication.
- 5. Ensuring that an adequate supply of medication in the proper dosage is at the school or is brought to school each day and that it is replaced prior to expiry dates and where the child is responsible to carry the medication on his or her person, that the child has been supplied with the medication.
- 6. Ensuring that their child has been made aware of their responsibility to report at the designated time and location in order for their medication to be administered.
- 7. Picking up unused medication at the end of the school year.

Required Forms

Authorization for the Administration of Medication

Administration of Medication Record

Reducing exposure to bloodborne and other bodily fluid pathogens protocol

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