



**CUMBERLAND**  
COUNTY SCHOOLS

# **Protocol for Medication Administration**

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## **CUMBERLAND COUNTY SCHOOLS**

### **Protocol for Medication Administration**

#### **General Information**

Cumberland County Schools (CCS) embraces the diverse health needs of our student population and has created this protocol to educate parents, guardians, and staff with best practices for medication administration. Each school has three medication clerks, as well as, a public health school nurse who is present one day each week. The public health school nurse is always available for phone triage as needed. The school district retains the right to reject a request for the administration of medication. Medication will not be administered beyond school hours. The only responsibility of liability that can be assumed by the school system or its personnel is to comply with instructions forwarded by the parent/guardian and physician. The Office of Health Services in collaboration with the Cumberland County Department of Public Health (CCDoPH) provides a variety of support services, workshops, and connections to community resources.

#### **Parent/Guardian Responsibilities**

The parent/guardian must provide the school with:

- A complete CCS Confidential School Health Form.
- Written parent/guardian consent (schools operate in loco parentis; therefore 18-year-old students who are living with their parent/guardian should still have parent/guardian consent).
- Medications, orders, consents, and supplies.
- A written provider order on an approved CCS medication form(s) and supplies to meet requirements of the order.
- Sign release of liability.
- Sign authorization for school to communicate with student's health care provider, if necessary.
- Provide the medication(s) and any needed supplies or equipment for administration (e.g., syringes and needles, spacers, etc.).
- Check-in and sign out medicines with medication clerk.
- Count/measure medications with the medication clerk before acceptance.
- Bring all medications in an original pharmacy labeled container that matches the physician's order.
- It is the responsibility of the student's parent/guardian to replace used and expired medication.
- The parent/guardian must deliver backup medicine before a student being allowed to self-medicate.
- The parent/guardian will have 30 calendar days to provide the school with appropriate documentation and medication to meet the medical need.
- The parent/guardian must present emergency medications within 30 calendar days to school medication clerk. A physician's order must accompany all requests from the parent/guardian to administer medication.
- The parent/guardian of students who self-medicate during the school day are held liable if another student takes the medication. The school system will assume no liability for students who self-medicate.
- Backup emergency medication is required by House Bill 496 parent/guardian must provide backup medicine for all students who self-administer.
- Communicate any changes in a student's health status and or medication regime.
- A parent/guardian may sign out their student's medication from the school at any time.

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#### **Field Trip Documentation**

It is the responsibility of the parent/guardian to coordinate the administration of the medication that exceeds the school day or requires weekend administration through the school office. If a student needs medication while on field trips, weekend or overnight school-related activities, the principal will designate an individual to administer the medication during the field trip. The designee must review the CCS Medication Protocol. When medicine is transported for a field trip, the medication dosage will be placed in individual containers (Ziploc bag or envelope) by the primary medication clerk or principal's designee, and identified by the following information:

- Student's name
- Name, dosage, and route of medication
- Time to be administered

Copy of the CCS medication form(s) or approved emergency action plan will accompany the student on the field trip.

#### **Best Practices for Completing Medication Paperwork**

- The physician must write a complete order including the name of medication, dosage, time, route and frequency.
- Complete orders on the current CCS medication form(s).
- Orders must have a specific dose, or they will not be accepted.
- An unacceptable order would be written as follows:
  - 2-4 puffs or 1-2 pills.
- Orders must have a specific time for administration, or they will not be accepted.
  - Lunchtime or Breakfast is unacceptable.
  - Orders for as-needed medication must have a specific interval between doses.
    - ◆ Give prn "three times a day" is unacceptable.
    - ◆ Give prn "every eight hours" is acceptable
- Collaborate and communicate medication instructions and pertinent information to school staff and medication clerk.
- Orders that are not legible with a matching pharmacy label will be rejected.

#### **Transporting Medication to School**

- The parent/guardian is responsible for having the medication delivered directly to the school in an appropriately labeled original container by an adult. Medicines should not be transported daily to and from school, with limited exceptions.
- The parent/guardian should be advised to ask the pharmacist for two labeled containers if possible when filling the prescription-one for doses taken at home, and one for doses taken at school.
- Separated medicines may require a provider order specifying for more than one metered dose inhaler or other forms of medication that cannot be divided into separate containers.

#### **Emergency Transport**

- In limited circumstances, a student who is not able to self-administer their medication may need to carry the medication on the bus to transport it to and from school for medical reasons.

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#### **Emergency Transport (continued)**

- Schools will contact their school nurse to submit for special approval for bus driver transport to the parent/guardian. Such instances will be reviewed by the Director of Health Services and School Nurse Supervisor before approval is granted.
- Upon approval, an emergency transport log will be issued to ensure the safety of the student, as well as the safe transport of the medication.
- When transporting medicine on the bus, it should be stored in a secure container. Staff should hand off the prescription to the bus driver or transportation aide, who can then hand it to the parent/guardian when the student returns home. The chain of custody will be documented on the CCS Emergency Medication Transport Log provided by the Health Services Director and Public Health Nursing Supervisor.

#### **Student Non-compliance**

When a student refuses to cooperate with staff who is administering medication the following procedures will be followed:

- **First Incident:** The primary medication clerk or principal designee shall make a telephone call to the parent/guardian explaining the concern. Staff will note concern on the CCS Student Medication Administration Non-compliance Individual Medication Documentation Form.
- **Second Incident:** A parent/guardian conference will be held at the school with the following people: principal, medication clerk, school nurse, and parent/guardian. Staff will note concern on the CCS Student Medication Administration Non-compliance Individual Medication Documentation Form.
- **Third Incident:** The principal will inform the parent/guardian that the student has remained non-compliant with medication administration regulations and that school staff will no longer administer the prescribed medication. Staff will note concern on the CCS Student Medication Administration Non-compliance Individual Medication Documentation Form.

#### **Missed Doses**

- Staff may only administer doses as ordered per medication form on file.
- Medication may be administered 30 minutes before or 30 minutes after the scheduled dose.
- A parent/guardian's request to administer medication, not on the CCS Physician's School Medication Form will not be honored (to include phone requests).
- School staff will complete a CCS Medication Administration Incident Report and copy the required staff. Parent/guardian, school nurse, and physician if necessary must be notified of missed doses immediately.

#### **Handling, Storage, and Disposal of Medications**

- The school district will provide secure, locked storage for all medications to prevent, misuse or ingestion by another individual.
- Schools taking possession of medications are responsible for ensuring the medication is available to the student it is prescribed for while preventing access to the medicines by other students.
- All medications, except as otherwise arranged, should be properly stored and secured within the medication cart provided by Health Services.

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**Handling, Storage, and Disposal of Medications (continued)**

- Medications requiring refrigeration will be kept in a refrigerator used solely for that purpose to avoid cross-contamination.
- Access to stored medicines is limited to the building principal and persons authorized to administer medications. Access to keys is restricted to trained personnel.
- The health office should be locked when health services personnel or staff members trained to assist students are not present. Medication carts must be locked at all times.
- **All unused, discontinued, or outdated medication will be picked up by the parent/guardian. Medication that remains after the school year ends will be discarded within two weeks.**

**Emergency Medication Self Administration**

The following criteria are required for a student to self-carry and administer medication at school and after-school activities:

- Self-administration of medication is permitted only for emergency medication such as inhalers, glucagon, and epinephrine.
- To be considered for approval of self-administration of emergency medication the student must be grade four or higher.
- The student will demonstrate the skill level necessary to use their emergency medication to the school nurse.
- If the child is approved to self-administer, then backup medication must be signed into the front office in case the student forgets or misplaces his emergency medication.
- Medicines that are carried by the students will be labeled with the student's name and must remain in the original container with the original pharmacy label.
- Students must keep a copy of the CCS Emergency Self-Medication Authorization Form with them at all times.
- Medications must be carried in a safe manner preferably in a purse or fanny pack.
- The student will keep the emergency medication in their possession at all times and shall not leave it in a place accessible to other students.
- If the student needs to use the self-carry medicines, they must immediately go to the office to inform the medication clerk or school nurse. Staff will assess the health of the student, document the use of the medication, and arrange for further medical attention as needed. If an EpiPen® (epinephrine injection) is administered, a call will be placed to 911 immediately.
- Students will be responsible for carrying their medication with them to all off-campus school-related functions independently of the front office.
- The parent/guardian must give consent that the student has sufficient maturity to use the medication correctly and release the school and its personnel from any responsibility regarding the emergency medication.
- The final decision to allow a student to self-administer medication must always include the overall supervision of the school nurse with the appropriate, periodic nursing evaluation of the student's technique and self-assessment skills.

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#### **Controlled Substances**

Narcotics are controlled substances that are used for short-term relief from pain. Examples are Tylenol w/codeine, Percocet, etc. Non-narcotic controlled substances may be prescribed for more extended periods of time. Examples are Adderall, Ritalin, and Focalin.

CCS requires the following for controlled substances:

- The CCS Controlled Substance Accountability Form shall list the type of controlled substance, dosage and number of doses furnished and shall indicate: date and hour of administration; the name of student; the name of prescribing physician; the quantity administered; the balance on hand after each administration; and the signature of administering CCS employee.
- Discrepancies should be reported to the parent/guardian and administration immediately.
- The school administration, school nurse, CCS Director of Safety and Security, CCS Director Health Services, and Public Health School Nurse Supervisor should review reports of missing medications and take steps to adjust protocols to prevent future occurrences.

#### **Long-term and Over-the-Counter Medications**

- Long-term medications are prescribed for fifteen (15) days or longer. Before the acceptance of drugs, the parent/guardian must have a completed CCS Physician's School Medication Form.
- Directions on the CCS Physician's School Medication Form must match the pharmacy labeled container.
- Over-the-Counter (OTC) medications (non-prescription medications) must be accompanied by a completed CCS Physician's School Medication Form with a matching pharmacy label.

#### **Short-term Prescription Medications**

The parent/guardian must bring the prescribed medication in the original pharmacy labeled container to the school. Parent/guardian is required to complete a CCS Short-term Medication Form to include:

- Student's name
- Name, dosage, and route of medication
- Time to be administered
- The parent/guardian must also sign the Release of Liability.
- Short-term prescription medications may not exceed 14 calendar days.
- All unused, short-term medications will be picked up by the parent/guardian.
- Medication that remains after the 14 days allowance will be discarded within two weeks.

#### **Intravenous Medication**

Due to the increased number of students with chronic health conditions attending school, schools are being asked to administer medications intravenously more frequently. These types of medications are typically vital for the health and safety of the student. Schools should only administer medications, including intravenous (IV) medications, which must be given during school and cannot be administered at another time of day. With advances in technology, these medications can be safely administered

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### **Intravenous Medication (continued)**

in community settings, including schools, but require a Registered Nurse. Due to limited nursing staff schools do not have a registered nurse daily to perform this procedure. Intravenous medication requests will be reviewed on a case by case basis by the Public Health Nursing Supervisor and the Director of Health Services.

### **Individual Health Care Plans**

The individual health care plan is developed as a result of a cooperative effort between the parent/guardian, health care providers, and school personnel. Each plan is designed with the specific needs of an individual student in mind. The parent/guardian will provide school staff with a doctor's approved care plan within 30 calendar days of school being notified.

### **Asthma**

- The Asthma Medication Plan is required for students diagnosed with asthma who may need a rescue inhaler or nebulizer during the day or prior to physical activity.
- Asthma Medication Plan must include the frequency of the nebulizer treatment/medication, the dose, and the procedures to follow if the student's condition does not improve.
- The parent/guardian will provide a nebulizer machine and prescribed medication for nebulizer administration.
- Replacement tubing and mouthpieces for nebulizer treatment are the responsibility of the parent/guardian. School staff will clean the mouthpiece with hot water and allow to air dry after each administration.
- The parent/guardian will provide training regarding the administration of nebulizer treatment to the designated school staff and nurse.

### **Diabetes**

**Insulin Administration:** Students with a completed CCS Diabetes Care Plan for insulin will likely need such medication during the school day and at school-sponsored events. Insulin is administered subcutaneously (under the skin with a needle) by syringe, insulin pen, or insulin pump per physician's order.

**Insulin Pumps:** independent students grade 4 or higher will need to carry their supplies with them at all times and be permitted to administer their insulin anywhere in the school setting and at school-sponsored events. The parent/guardian is required to train staff on their child's insulin pump.

**Independent Students:** must not be required to go to a specific location, such as the front office, to administer their insulin to themselves or perform any other aspect of their diabetes management. Students should be provided with a private area to administer insulin if requested by the student. Students should be reminded to utilize standard precautions and of their need to be responsible for their supplies including proper disposal of sharps. Such students must carry a copy of their CCS Diabetes Care Plan with them at all times.

**Supervised Students:** will need assistance to administer their insulin, by the school's diabetes care manager. This assistance will be provided by a diabetes care manager and may include verbal cues for following standard precautions; verifying correctness of math for carb counting; and verifying the number drawn up or input by the student on the syringe, pen, or insulin pump is the number the student desires to administer; and/or

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**Supervised Students: (continued)** by providing food and/or juice to treat low blood glucose in accordance with their emergency action plan.

**Diabetes Care Managers:** will assist students by checking their blood glucose, checking urine for ketones, administering emergency glucagon, contacting the parent/guardian or school nurse as needed for assistance beyond care plan specifications.

### **Cystic Fibrosis**

There is no typical child with cystic fibrosis. Please bear in mind that cystic fibrosis affects each child in different ways with varying degrees of severity, and each child's health can change considerably from month-to-month, or even, day-to-day. It is possible to replace most of the missing enzymes with a substance called pancreatin. There are several preparations in capsule form. Usually, they have to be taken with all snacks and meals to ensure proper absorption and maximum nutritional benefit. CCS staff will follow physician directives.

Enzymes are not drugs; they are supplements that should be taken by a child with cystic fibrosis immediately before meals and snacks (and sometimes while eating). They are often taken in large numbers which can look alarming but is, in fact, very safe. Students in grades four or higher with cystic fibrosis can carry these enzymes in a suitable container for use as necessary. The parent/guardian must also complete a **Cystic Fibrosis Self-Carry Authorization Form** for grades four or higher. No special storage is required. Smaller children need a level of supervision to ensure they take their enzymes at the appropriate times. A physician's school medication form must accompany enzymes when presented to the medication clerk.

### **Epilepsy**

A CCS Seizure Care Plan contains the essential information the school staff needs to know to help a student who has seizures. It includes information on first aid, parent/guardian, and health care provider contacts and medications specifically for that child. CCS Seizure Care Plans are an essential tool that helps parents, guardians, and school staff partner to keep children safe and healthy during the school day. Diastat or diazepam is a prescription medication used to treat seizures. It is administered rectally and generally is given to stop a seizure once it has begun. The provider order will specify on the CCS Seizure Care Plan when the medication is to be administered. A student will not be able to self-administer such medicines during a seizure. Staff will contact the school nurse or medication clerk at the onset of a seizure for support and emergency medication.

### **Diastat**

Diastat, as per instructions on the drug package insert, is given under specific circumstances. Diastat will be administered by the school nurse or trained staff who:

- Are able to distinguish the distinct (\*prolonged or) cluster of seizures
- Have been instructed and judged to be competent to administer the treatment rectally.
- Understand explicitly which seizure manifestations may or may not be treated with Diastat.



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#### **Diastat (continued)**

- The school nurse will develop emergency care plans for students who have health and safety conditions (e.g. seizure disorders) that require potential health care interventions in the school setting.
- The school nurse will provide specific steps to care for students having prolonged seizures when the school nurse is in the setting and when the school nurse is not in the setting (e.g., on a school bus).
- It is recommended that the first dose of rectal diazepam not be administered in the school setting. The physician, family, and school nurse should be aware of the effects of medications on students before they are given in school.
- A CCS Seizure Care Plan signed by the doctor and the parent/guardian must be in place to specifically direct the care of the student with a history of prolonged seizures.
- The school staff contacts 911 and the parent/guardian when prolonged or clustered seizures occur during the school day.

#### **VNS Therapy**

Vagus nerve stimulation (VSN) is approved to treat focal or partial seizures that do not respond to seizure medications. VSN may prevent or lessen seizures by sending regular, mild pulses of electrical energy to the brain via the vagus nerve. Upon notification from the parent/guardian of a VSN device, the school nurse will train staff on best practices.

#### **Allergies and Anaphylaxis**

The most critical step to preventing life-threatening allergic reactions is to avoid student contact with food/substances to which they are allergic. In the absence of a physician's written dietary order, the parent/guardian must complete a Temporary Special Nutritional Needs form with assistance from the school nurse or medication clerk and submit to the cafeteria manager.

Students with life-threatening allergies must have a CCS Severe Allergy Medication Plan or CCS Emergency Self-medication Authorization Form for student's grade 4 or higher. Prescription labels must match the order. Students who have provider orders and written parent/guardian consent to carry and administer medication must also be permitted to carry and use their medication on the bus.

- The parent/guardian of students with food allergies will submit the CCS Medical Statement for Students with Unique Mealtime Needs for School Meals to cafeteria staff, principal and school nurse within 30 calendar days.
- The parent/guardian of students with food/substance allergies is requested to supply the classroom teacher with appropriate snacks.
- Students and staff are to use effective hand washing techniques before and immediately following food consumption.
- The school nurse will provide staff training regarding the administration of emergency medication.
- The school nurse or healthcare provider will complete an emergency action plan.
- In the absence of emergency medication, the school staff will call 911 in the event of a severe allergic reaction.

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#### **Epinephrine**

- A student may require an injection of epinephrine (Adrenalin) or EpiPen in case of a severe, life-threatening allergic reaction (anaphylaxis). Severe allergic reactions can occur within minutes of exposure to the allergen. Immediate action is necessary if the student has severe allergic symptoms such as swelling of eyes, lips, face or throat, raised rash (hives), difficulty breathing, loss of consciousness, etc.
- Each school is equipped with epinephrine to provide emergency care for students who are experiencing an anaphylactic event.

#### **In Case of Poisoning**

- School staff will call poison control for suspected poisoning.
- School staff will call 911 as directed by poison control.
- The parent/guardian will be notified of the emergency. 1-800-222-1222 American Association of Poison Control Centers

#### **Children with Disabilities**

It is and shall remain the policy of Cumberland County Board of Education not to discriminate on the basis of gender or disability in its educational programs, activities, or employment policies as required by Title IX of the 1972 Educational Amendments, the 1990 Americans with Disabilities Act, and Section 504 of the Rehabilitation Act of 1973. It is the policy of the Cumberland County Board of Education to provide equal employment opportunities on a nondiscriminatory basis, regardless of sex, race, age, national origin, disability or religion. (Cumberland County Board of Education Policy 1730/4022/7231.)

#### **Additional Information**

The individual designated to ensure district compliance with Section 504 is Dr. Natasha Scott, phone (910) 678-2433; email [natashascott@ccs.k12.nc.us](mailto:natashascott@ccs.k12.nc.us) and the mailing address is Cumberland County Schools, PO Box 2357, Fayetteville NC 28302.