

**CHIGNECTO-CENTRAL
REGIONAL SCHOOL BOARD**

POLICY #ES-G-13

ADMINISTERING MEDICATION TO STUDENTS

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The Chignecto-Central Regional School Board believes that under normal circumstances prescribed medication / medical intervention should be dispensed before and / or after school hours under the supervision of the parent / guardian.

To this end, the Board expects that parents / guardians will, whenever possible, make the necessary arrangements to eliminate the need for school personnel to be involved with the dispensing of medication / medical intervention to students during school hours.

However, the Board recognizes that occasionally it may be necessary for medication / medical intervention to be dispensed while the student is at school.

Accordingly, if in the opinion of a practicing physician a particular student requires medication / medical intervention during school hours, the Board expects the Superintendent of Schools (or designate) to develop and implement administrative procedures and / or guidelines to regulate such administration of medication / medical intervention and to provide appropriate guidance for staff.

ADMINISTERING MEDICATION TO STUDENTS

POLICY #ES-G-13

ADMINISTRATIVE PROCEDURES

- Authorization** These Administrative Procedures have been authorized by the **Superintendent of Schools**.
- Scope** Administrative Procedures #ES-G-13 apply to **parents / guardians, physicians and all school personnel involved with the administration of medication to students during school hours and/or school activities**.
- Responsibility** It is the responsibility of the **Coordinator of Student Services** to ensure that Administrative Procedures #ES-G-13 are implemented.
- Implementation** Administrative Procedures #ES-G-13 shall be implemented by school **Principals** (as appropriate).
- Procedures**
- A. Administration of Medication to Students (Non-Prescription and Prescription Medications)**
1. For the administration of oral, inhaled or over the counter medications (not injections) by prescription from an authorized health care professional; a request for the administration of the above mentioned medications prescribed must be made in writing by the parent to provide such services. The request must be accompanied with copies of any written information provided by a pharmacist, and/or physician, including (but not limited to) the name of the medication, the dosage, the frequency, the time and method of administration, storage and safekeeping requirements, the possible side effects, if any and the dates for which the parental authorization applies.

B. Non-Prescription and Prescription Medications

1. Parents / Guardians shall:

- a) Complete and submit to the school Principal the Administration of Medications / Medical Interventions Form (copy attached) on an annual or as needed basis;
- b) as appropriate, arrange for a training process for school staff conducted by the parent / guardian or a qualified health care professional;
- c) assume responsibility for any expenses associated with training for school staff;
- d) accept responsibility for ensuring that a son / daughter / ward with medical needs is in attendance at school only when healthy enough to cope with the intervention actions approved;
- e) remain familiar with CCRSB Administrative Procedures #ES-G-13;
- f) outline the requirements for proper storage of medications and medical equipment; and,
- g) be responsible for ensuring that the school receives new documentation any time a medication change occurs. Medication must be in its original container provided by the pharmacist with the pharmacy labels attached.

2. The school Principal shall ensure that:

a) Information / Distribution:

- (i) ensure that all parents are aware that a policy exists re: Administration of Medications/ Medical Interventions in Chignecto-Central Regional School Board; and,
- (ii) ensure that a copy of CCRSB Policy and Procedures #ES-G-13, Administering Medication to Students is distributed to parents as appropriate.

b) Security:

- (i) the medication is contained in the original prescription container and clearly labeled;
- (ii) when possible, medications are brought to the school by the parent / guardian; otherwise, contact the parent / guardian to verify amount of medication received;
- (iii) the school provides a secure area to house all medications; and,
- (iv) left-over medication is picked up by the parent / guardian or discarded with parental permission.

c) Records:

- (i) the telephone numbers of parents / guardians and physician for each student are on file and readily available;
- (ii) the names of designated school personnel responsible for supervising or administering the medication are on file;
- (iii) there is a record maintained for all medication received for in-school administration;
- (iv) a binder / log with the most current information available is maintained and on hand for each student requiring medication. (see School Record of Medication Form, copy attached); and,
- (v) school staff maintains on the Student's Daily Record of Medication Form (copy attached) a daily record of drugs administered to each student.

d) Other:

- (i) involved staff receive appropriate training re administration of medication (see Procedure B. 1.b);

- (ii) all CCRSB forms are completed and on file; and,
- (iii) medication is administered:
 - per the pharmacist's direction;
 - in a manner that allows for sensitivity and privacy; and,
 - in a manner that encourages the student to take an appropriate level of responsibility for his / her medication.

3. School Staff Administering Medications shall:

- a) administer medications only as directed by the school Principal (per pharmacist instructions on Administration of Medications / Medical Interventions Form, copy attached);
- b) maintain administration of medication records per direction from the school Principal;
- c) maintain on the appropriate form a daily record of drugs administered to each student; and,
- d) report to the school Principal any concerns / problems re the administration of medication.

Distribution: All Policy and Procedure Manual Holders



Administration of Medications/Medical Interventions in Chignecto-Central Regional School Board

*For the administration of oral, inhaled or over the counter medications (**not injections**) by prescription from an authorized health care professional; a request for the administration of the above mentioned medications prescribed must be made in writing by the parent/guardian to provide such services.*

A. To be completed by Parent/Guardian

Name of Student _____
Name of Parent/Guardian _____ Phone (H) _____ (W) _____
Street Address _____
School _____ Grade _____
Contact in case of emergency _____ Phone _____

I hereby request, authorize and empower the Chignecto-Central Regional School Board to administer medication or treatment as described herein to my child named above. I release any staff member and the Chignecto-Central Regional School Board from any legal liability that may result from the administration of such medication or the giving of such treatment. I also agree to indemnify the Chignecto-Central Regional School Board against claims at any time made arising out of the administration of medication or treatment described herein by my child or by MSI.

The request must be accompanied with copies of any written information provided by the pharmacist, including (but not limited to) the name of the medication, the dosage, the frequency, the time and method of administration, storage and safekeeping requirements, the possible side effects, if any and the dates for which the parental authorization applies.

Date _____ Signature of Parent/Guardian _____

1. Medication:

Medication Prescribed	Dose		Duration	Time of Admin.
	Amount	Frequency		

The parent/guardian is responsible for ensuring that the school receives new documentation any time a medication change occurs. Medication must be in its original container provided by the pharmacist with the pharmacy labels attached.

Type of In-school Intervention necessary:

2. Other: (medical interventions should be clearly stated in writing and attached to this release)

Considerations

- (a) Possible side effects of medication(s) /treatment _____
- (b) Type of storage required for medication _____
- (c) This medication can be safely administered by non-medical personnel. Yes ___ No ___
- (d) Will it be detrimental to the child's health if a single dose/treatment is omitted? Yes ___ No ___

For school use only: Date received: _____ Action taken: _____ Personnel Involved: _____
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