

MEDICATION AT SCHOOL

Under normal circumstances prescribed and over the counter medication should be dispensed before and/or after school hours under supervision of the parent/guardian. If a student must receive prescribed or over-the-counter oral or topical medication, eye drops or ear drops (“medications”) from an authorized staff member, the parent/guardian must submit a written authorization accompanied by a written and signed request from a licensed health professional prescribing within the scope of his/her prescriptive authority. Oral medications are administered by mouth either by swallowing or by inhaling, including through a mask that covers the mouth and nose. If the medication will be administered at school the health professional must also provide written, current and unexpired instructions for the administration of the medication.

The superintendent or designee shall establish procedures for:

- A. Delegating, training and supervision of staff members in the administration of prescribed or non-prescribed oral medication to students by a physician or registered nurse;
- B. Designating staff members who may administer prescribed or non-prescribed oral medication to students;
- C. Obtaining signed and dated parental/guardian and health professional requests for the dispensing of prescribed or non-prescribed oral medications, including instructions from the health professional if the medication is to be given at school;
- D. Storing prescribed or non-prescribed medication in a locked or limited access facility;
- E. Maintaining records pertaining to the administration of prescribed or non-prescribed oral medication; and
- F. Permitting, under limited circumstances, students to carry and self-administer medications necessary to their attendance at school.

If a building nurse is available a nasal spray that is a legend drug or a controlled substance must be administered by the building nurse. If no building nurse is available a nasal spray that is a legend drug or a controlled substance may be administered by a trained staff member or parent-designated adult who is not a building nurse. The board will allow staff members, who have received appropriate training and volunteered for such training, to administer a nasal spray that is a legend drug or a controlled substance. After a staff member who is not a building nurse administers a nasal spray that is a legend drug or a controlled substance, the staff member will summon emergency medical assistance as soon as practicable;

No medication shall be administered by injection except when a student is susceptible to a predetermined, life-endangering situation. In such an instance, the parent/guardian will submit a written and signed permission statement. Such an authorization will be supported by signed and dated written orders accompanied by supporting directions from the licensed health professional. A staff member will be trained prior to injecting a medication.

If the district decides to discontinue administering a student’s medication, the superintendent or designee must provide notice to the student’s parent/guardian orally and in writing prior to the discontinuance. There must be a valid reason for the discontinuance that does not compromise the health of the student or violate legal protections for the disabled.

The Superintendent or designee will designate a professional person licensed under chapter [18.71](#), 18.57, or [18.79](#) RCW as it applies to registered nurses and advanced registered

nurse practitioners, to consult and coordinate with the student's parents/guardians and health care provider, and train and supervise the appropriate staff member in proper procedures for care for students with diabetes to ensure a safe, therapeutic learning environment. Parent-designated adults who are staff members are required to receive the training provided under this subsection. Parent-designated adults who are not staff members will show evidence of comparable training. The parent-designated adult must also receive additional training as established in subsection (2) (a) of this section for the additional care the parents/guardians have authorized the parent-designated adult to provide. The professional person designated under this subsection is not responsible for the supervision of the parent-designated adult for those procedures that are authorized by the parents/guardians.

Parent Designated Adult (PDA)

For the purposes of this section, "parent-designated adult" means a volunteer, who may be a staff member, who receives additional training from a health care professional or expert in epileptic seizure care selected by the parent/guardians, and who provides care for the student consistent with the student's health plan.

To be eligible to be a parent-designated adult, a staff member not licensed under chapter [18.79](#) RCW must file, without coercion by the district, a voluntary written, current, and unexpired letter of intent stating the staff member's willingness to be a parent-designated adult. If a staff member who is not licensed under chapter [18.79](#) RCW chooses not to file a letter under this section, the staff member will not be subject to any district reprisal or disciplinary action for refusing to file a letter.

Cross References:	Policy 3419	Self-Administration of Asthma and Anaphylaxis Medications
	Policy 3420	Anaphylaxis Prevention and Response
Legal References:	RCW 28A.210.260	Public and Private Schools Administration of Oral Medication by — Conditions
	RCW 28A.210.270	Public and Private Schools Administration of Oral Medication by — Immunity from Liability
	RCW 28A.210.260	Public and Private Schools – Administration of Medication - Conditions
	RCW 18.79	Nursing Care

Adoption Date: 10/10/2005

Revised: 1/28/2013; 10/25/2018