



## A Brief Summary of Medication Administration in the School Setting Based on Nebraska Department of Education (NDE) Rule 59

### All rules concerning medication administration in the school setting

The Legislature finds administration of medications by persons other than oneself (student) or one's caretaker (parent/guardian) should be a regulated system to safely assist individuals who do not have ability to take medications independently (student).

### What is a Medication?

Any prescription or nonprescription drug:

- *Intended for treatment or prevention of disease*
- *To affect body function in humans*

Only licensed health care providers such as a physician, physician's assistant, APRN-NP, or dentist can prescribe medication. Prescription drugs are sometimes classified as controlled substances because of their potential for addition. (§71-6721)

### Purpose of the Medication Act

- Ensure public's (student's) health, safety, and welfare.
- Accurate, cost-effective, efficient, safe administration of medications.

### Who Can Give Meds at School? (§71-6722)

- Licensed health care professional for whom medication administration is within scope of practice.
- Staff member of a school may provide routine medications by the usual routes after demonstrating competency.
- Competencies must be reassessed every 3 years and documentation of competency assessment must be kept on file. Schools shall maintain written documentation of:
  - Successful completion of competency assessments,
  - Identification of the individual providing direction and monitoring, and
  - Acceptance of the responsibility for direction and monitoring

## 14 COMPETENCIES REQUIRED

These are a broad range of skills and knowledge to help provide medication safely for students in the school setting. Competency must be assessed by each student's parent/guardian or a licensed health care provider such as a school nurse.

- 1. Recognize the recipient's right to personal privacy.**
  - Recognize the recipient's right to personal privacy regarding health status, any diagnosis of illness, medication and items of similar nature.
  - Information of this nature should only be shared with appropriate interdisciplinary team members. (FERPA)
  
- 2. Recognize the recipient's right to refuse medication.**
  - Recognize and honor the right to refuse medications and at no time force a recipient to take medications.
  - Notify and seek advice from the parent or the school nurse providing direction and monitoring regarding the procedures and persuasive methods to be used to encourage compliance with medication provision.
  - Contact parent/guardian/prescribing health care provider for clarification of issue, and any necessary changes
  - Document all changes made in regimen.
  
- 3. Maintain hygiene and standards of infection control.**
  - Follow currently acceptable standards in hygiene and infection control including hand washing.
    - Soap & water actually removes the dirt and germs from the hands and should be the first choice.
    - Hand sanitizer acts by killing some germs on the hands.
  - Do not put medication directly into student's hand.
  
- 4. Follow District procedures for storage, handling, and disposal of medications.**
  - Encourage parent/guardian to deliver and pick up medications. Consider requiring another adult pick up medication if parent/guardian unable to do it.
  - Discourage parent/guardian from sending medication with child.
  - Document who picked up medications & how much was sent home.
  - Store in a locked or otherwise secure area in accordance with the manufacturer's or dispensing pharmacist's instructions for temperature, light, humidity, or other storage instructions. Emergency drugs should be secured, but not locked.
  - Only authorized school personnel who are designated by the administration of the school district for administration of medications shall have access to the medications
  
- 5. Recognize general conditions when the medication should not be given.**
  - Lack of required written authorizations or instructions. Lack of required labeled container.
  - Inappropriate dosage for child.
  - Rationale for medication being given at school not provided by parent/guardian.

- Unapproved route of administration of medication.
- Unsafe conditions of medication, the child, or the environment.
  - Change in consistency or color of the medication, illegible medication label, and medications that have expired.
  - Recognize that the unsafe conditions should be reported to the caretaker or licensed health care professional responsible for providing direction and monitoring.

#### 6. **Accurately document all medications:**

- Child's name;
- Medication name, dose, route by which the medication was given;
- Time medicine given or refused by child;
- Observations made in connection with the giving the medication;
- Missed dose with reason it was missed (absent, ill, etc.);
- Name of person giving medication to the student.

#### 7. **Follow the Five Rights**

- **Right Person**
  - Specific identification measures are appropriate:
    - Visual identification
    - Ask student's name and teacher
  - Schools are responsible for safeguards to ensure that students are not misidentified when receiving medication.
- **Right Medication**
- **Right Time** - may give 30 minutes before or after scheduled time
- **Right Dose**
- **Right Route** – Oral, Topical, Inhaled, Instilled

#### 8. **Provide medications according to the specialty needs of the recipient.**

- Does student have difficulty swallowing the medication?
- Does the medication need to be taken before, after or with food?
- Other special needs?

#### 9. **Recognize general conditions which may indicate an adverse reaction to medication.**

- Rashes/hives, stomachache, nausea, vomiting, headache, seizures are common adverse reactions.
- Anaphylaxis – initiate Emergency Response Protocol – call 911 and give EpiPen or EpiPen Jr and follow with Albuterol by nebulizer.
- Recognize general changes in student condition which may indicate inability to receive medications.
- Recognize that all such conditions will be reported to the caretaker or licensed health care professional responsible for providing direction and monitoring.

**10. Have the ability to understand and follow instructions.**

- Always read the instructions on the container and follow them exactly.
- If instructions are not understood, ask the school nurse or the parent.

**11. Practice appropriate safety standards when providing medications**

- This may include:
  - Cleaning up any water spilled to avoid falls
  - Having disposable cups for students
  - Cleaning up any broken glass to prevent cuts
  - Not allowing students to access medicine without supervision

**12. Recognize the limits and conditions by which unlicensed persons may legally provide medications.**

- The unlicensed person may administer medications:
  - Only after passing competency assessment by parent or licensed health care professional.
  - Only by the 4 basic routes – oral, topical, inhaled or instilled.
  - Only according to written directions.

**13. Recognize the responsibility to report and the way to report possible child or adult abuse or neglect.**

- Neb. Rev. Stat. §28711 requires school personnel and all adults in Nebraska to report any suspected child abuse and/or neglect.

**14. Recognize the recipient's property rights and personal boundaries.**

- Student's personal possessions.
- Touching/hugging student – suggest getting student permission first.

**Medications Given by Other Routes**

- UAP meeting competency may provide medications through additional (routes) if it has been determined by a licensed health care professional and placed in writing that these activities can be done safely for a specified recipient.
- Includes, but not limited to gastrostomy tube, rectal, vaginal or injected.

**PRN Medication Administration**

- Medications given PRN (as needed) – specific written instructions includes:
  - Child's name
  - Name & dose of Medication
  - Reason medication is given
  - Dosing interval – for example – one dose every 4 hours as needed for headache.

## Emergency Response to Life Threatening Asthma or Systemic Allergic Reactions (Anaphylaxis) – see NDE Rule 59 Appendix

- Free EpiPens for Schools or individuals with a prescription - <http://www.epipen4schools.com/>
  - Currently, EpiPens are free for individuals with regular insurance.
  - For individuals with no insurance or a high-deductible plan, a \$100 coupon is given.

### Observing & Monitoring by UAP

- Direction for observing and reporting for monitoring medication must be:
- In writing and include parameters for the observation and reporting:
  - Desired effects and Side effects
  - Interactions with other medications
  - Did child have difficulty taking medication or keeping it down?
  - If child vomits after taking a medication, notify parent and/or school nurse of the incident including time between dose and vomiting.

### Disposal of Medication

- Notify parent/guardian toward the end of the school year of any medication that will be left at the end of the school year.
- Give parent/guardian option to pick up medication or have it disposed of.
- Don't keep leftover medications—instead, learn how to get rid of them the right way. Don't flush leftover medications! Properly dispose of them by returning them to a participating pharmacy. For questions about disposal of medication, call the Nebraska Regional Poison Center at 1-800-222-1222 or email the Nebraska MEDS Coalition at [infor@nebraskameds.org](mailto:infor@nebraskameds.org).

### Other Considerations for Medication Administration in the School Setting

#### Medication Errors

- Check the well-being of the child & take appropriate actions.
- Document what the error was and if possible why it occurred.
- Notify school nurse and Administrator
  
- Notify parent/guardian unless Nurse or Administrator will be doing this.
- Follow District policy for medication errors.

#### Liquid Medication

- Hold bottle with label toward your palm.
- Do not mix two or more liquid medications in the same measuring device.
- Use syringe or graduated medicine cup for accuracy, do not use a kitchen spoon – it's not accurate.
- Liquid medication should be on a flat surface at eye level to accurately measure the dose.

#### Inhalers (inhaled)

- Have student take a deep breath and exhale as much air as possible

- Inhale puff of the medication through the inhaler with long slow breath
- Hold breath for 1 minute & wait another minute before student takes second puff of inhaler and then repeat for second puff of medication
- May need to rinse out mouth after using the inhaler.
  - Use of a spacer greatly increases the amount of medication going into the lungs and is easier for young children to use.

**Oxygen (inhaled)** – contact the School Health Program for Oxygen Guidelines in the School Setting.

**Eye drops (instilled)**

- Have student close eyes lightly
- Put one drop at a time in the appropriate eye
- Have student blink
- Provide tissue to blot eye drops

**Ear drops (instilled)**

- Pull the outer ear up and back after ear drop is instilled to help it go down the ear canal

**Conditions for School Staff to Give Medications depending on District Policy:**

- Parent/guardian’s & Medical provider’s signed authorization with child’s name, name & dose of medication, diagnosis, time med is to be administered
- Medication will be in original manufacturer or pharmacy labeled container
- Medication authorizations must be renewed annually and updated immediately as changes occur

For more information, contact:

***Carol Tucker BSN, RN, NCSN***

School Health Program

DHHS Division of Public Health

Lifespan Health

Maternal, Child, and Adolescent Health Unit

[carol.tucker@nebraska.gov](mailto:carol.tucker@nebraska.gov)

402-471-1373