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.
  o Change in consistency or color of the medication, illegible medication label, and
    medications that have expired.
  o 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**
     o Specific identification measures are appropriate:
       ▪ Visual identification
       ▪ Ask student’s name and teacher
     o 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/](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.

**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 if 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 devise.
- 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:

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