Students

Administrative Procedure - Dispensing Medication

Actor	Action
Parents/Guardians	Ask the child's physician, dentist, or other health care provider who has authority to prescribe medications if a medication, either prescription or non-prescription, must be administered during the school day. <i>Medication</i> includes an epinephrine injector, e.g., <i>EpiPen®</i> , asthma medication (105 ILCS 5/22-30(a), medical cannabis (105 ILCS 5/22-33(g),), glucagon (105 ILCS 14/27, added by P.A. 101-428), and any medication required under a plan listed in 105 ILCS 5/10-22.21b(c), added by P.A. 101-205, for a student's self-administration of medication.
	For a student using medical cannabis: The parent/guardian is responsible for providing the school with copies of the valid registry identification cards issued to their child and the child's designated caregiver as required by the III. Dept. of Public Health. The student's parent/guardian must also ask the student's health care provider to complete a School Medication Authorization Form – Medical Cannabis. 105 ILCS 5/22-33(b-5), added by P.A. 101-370.
	The designated caregiver shall be allowed to administer a <i>medical</i> cannabis infused product (product) to the student on the premises of the child's school or on the child's school bus. The product must be immediately removed from school premises or the school bus after administration. 105 ILCS 5/22-33(b), amended by P.A.s 101-363 and 101-370.
	Note: State law does not require school personnel to administer medical cannabis to students. The school nurse or an administrator is allowed to administer a product to the student on the premises of the child's school, at a school-sponsored activity, or before/after normal school activities, including while the student attends before-school or after-school care on school-operated property or while being transported on a school bus. 105 ILCS 5/22-33(b-5), added by P.A. 101-370. The District may also allow a qualifying student to self-administer product if the self-administration takes place under the direct supervision of a school nurse or administrator. <u>Id</u> .
	A product administered by a school nurse or administrator, or self-administered under the supervision of a school nurse or administrator, must be stored at school with the school nurse at all times in a manner consistent with storage of other student medication at the school and may be accessible only by the school nurse or an administrator. 105 ILCS 5/22-33(b-10), added by P.A. 101-370, eff. 1-1-20.

For a student with diabetes: The parent/guardian is responsible for sharing the health care provider's instructions. When the student is at school, the student's diabetes will be managed according to a diabetes care plan, if one exists. To the extent there is any conflict between the diabetes care plan and this Procedure, the diabetes care plan shall control. See Care of Students with Diabetes Act, 105 ILCS 145/. Last, the Public Self-Care of Diabetes Act allows a person with diabetes (or a parent/guardian of a person with diabetes) to self-administer insulin (or administer insulin) in any location, public or private, where the person is authorized to be irrespective of whether the injection site is uncovered during or incidental to the administration of insulin (410 ILCS 135/).

For a student with epilepsy: The parent/guardian is responsible for sharing the health care provider's instructions. When the student is at school, the student's epilepsy will be managed according to a seizure action plan, if one exists. To the extent there is any conflict between the seizure action plan and this Procedure, the seizure action plan shall control. See Seizure Smart School Act, 105 ILCS 150/, added by P.A. 101-50.

For a student with asthma: The parent/guardian is responsible for sharing the student's asthma action plan. When the student is at school, the student's asthma will be managed according to an asthma action plan, if one exists. To the extent there is any conflict between the student's asthma action plan and this Procedure, the asthma action plan shall control. See 105 ILCS 5/22-30(j-5). Asthma emergencies shall be managed pursuant to the District's asthma emergency response protocol. 105 ILCS 5/22-30(j-10).

Note: The III. State Board of Education (ISBE)'s model asthma episode emergency response protocol required by 105 ILCS 5/22-30(j-10), that must be incorporated in the District's procedure is available at:

www.isbe.net/Documents/asthma response protocol.pdf.

When developing the District's model protocol, consider that a district may be liable for injury to an asthmatic student during a medical emergency if the district does not respond by immediately calling 911. See In re Estate of Stewart, 406 III.Dec. 345 (2nd Dist. 2016); In re Estate of Stewart, 412 III.Dec. 914 (III. 2017)(school district's appeal denied). Consult the board attorney about: (1) whether all asthma action plans should require immediate 911 calls based upon Stewart; and (2) the duties and responsibilities of a district when it asks for, but does not receive, an asthma action plan from a parent/guardian and the logistics of distributing any received plans to those employees who need to know based upon Stewart.

A student with asthma is allowed to self-administer and self-carry asthma medication if the student's parents/guardians provides the school with: (1) written authorization for the self-administration

and/or self-care of asthma medication; and (2) the prescription label containing the name of the asthma medication, the prescribed dosage, and the time at which or circumstances under which the asthma medication is to be administered. 105 ILCS 5/22-30(b).

For a student self-administering medication: A student with an asthma action plan, an Individual Health Care Action Plan, an Illinois Food Allergy Emergency Action and Treatment Authorization Form, a plan pursuant to Section 504 of the federal Rehabilitation Act of 1973, or a plan pursuant to the federal Individuals with Disabilities Education Act is allowed to self-administer medication if the student's parent/guardian provides the school with: (1) written permission for the student's self-administration of medication; (2) written authorization from the student's physician, physician assistant, or advanced practice registered nurse for the student to self-administer the medication; and (3) the prescription label containing the name of the medication, the prescribed dosage, and the time(s) or circumstances under with the medication is to be administered. 105 ILCS 5/10-22.1b(c), added by P.A. 101-205.

If the child's physician, physician assistant, advanced practice registered nurse, dentist, or other health care provider who has authority to prescribe medications authorizes a child to self-administer medication, then ask the health care provider to complete a School Medicine Authorization Form (SMA Form). This form must be completed and given to the school before the school will store or dispense any medication, before a child may possess asthma medication or an epinephrine injector, and before a child will be allowed to self-administer any medication.

If a student is on a medication on an indefinite or long-term basis, file a new *SMA Form* every year.

Bring the medication to the school office. If the medicine is for asthma or is an epinephrine injector, a student may keep possession of it for immediate use at the student's discretion: (1) while in school, (2) while at a school-sponsored activity, (3) while under the supervision of school personnel, or (4) before or after normal school activities, such as while in before-school or after-school care on school-operated property. 105 ILCS 5/22-30(e).

Bring other prescription medications to the school in the original package or appropriately labeled container. The container shall display:

Student's name

Prescription number

Medication name and dosage

Administration route and/or other direction Date(s) and Time(s) to be taken Licensed prescriber's name Pharmacy name, address, and phone number Bring non-prescription medications to school in the manufacturer's original container with the label indicating the ingredients and the student's name affixed. At the end of the treatment regime, remove any unused medication from the school. If the student is at risk of anaphylaxis, follow the procedures for Individual Allergy Management in 7:285-AP, Anaphylaxis Prevention, Response, and Management Program. School Office Personnel Provide a copy of these procedures, as well as a SMA Form, to inquiring parents/guardians. If the building has no school nurse and a student is identified as having asthma, request the student's parent/guardian to share their child's asthma action plan. If the plan is provided, keep it on file in the school nurse's office or, in the absence of a school nurse, the Building Principal's or designee's office. Tell the school nurse or Building Principal or designee of the receipt of the plan as soon as possible so that he/she may provide copies of it to appropriate school staff interacting with the student on a regular basis and, if applicable, attach it to the student's Section 504 plan or Individualized Education Program (IEP). 105 ILCS 5/22-30(j-5). Whenever a parent/guardian brings medication for a student to the office, summon the school nurse. If the school nurse is unavailable, accept the medication, provided the parent/guardian submits a completed SMA Form and the medication is packaged in the appropriate container. Put the medication in the appropriate locked drawer or cabinet. Tell the school nurse about the medication as soon as possible. School Nurse (certificated Ensure that a parent/guardian who brings medication for his or her school nurse or child has complied with the parent/guardian's responsibilities as non-certificated registered described in this administrative procedure. professional nurse) If a student is identified as having asthma, request the student's parent/guardian to share their child's asthma action plan. If the plan is provided, keep it on file in the school nurse office. Provide copies of it to appropriate school staff who interact with the student on a regular

basis and, if applicable, attach it to the student's Section 504 plan or IEP. 105 ILCS 5/22-30(j-5).

In conjunction with the licensed prescriber and parent/guardian, identify circumstances, if any, in which the student may self-administer the medication and/or carry the medication. A student will be permitted to self-administer medication in accordance with 105 ILCS 5/10-22.1b(c), added by P.A. 101-205. A student may be permitted to self-administer a medical cannabis infused product in accordance with 105 ILCS 5/22-33(b-5), added by P.A. 101-370. A student will be permitted to carry and self-administer medication for asthma or an epinephrine injector.

Develop an emergency action plan for a student who self-administers medication in accordance with 105 ILCS 5/10-22.21b(c), added by P.A. 101-205. The plan must include (105 ILCS 5/10-22.21b(d), added by P.A. 101-205):

- 1. A plan of action in the event a student is unable to self-administer medication, and
- 2. The situations in which a school must call 911.

For students at risk of anaphylaxis, follow the procedures for Individual Allergy Management in 7:285-AP, Anaphylaxis Prevention, Response, and Management Program, which include the development of an emergency action plan.

Prior to administering a medical cannabis infused product in accordance with ILCS 5/22-33(b-5), added by P.A. 101-370,, annually complete the medical cannabis infused product administration training curriculum developed by ISBE. ILCS 5/22-33(f-5), added by P.A. 101-370. See Training resources at: www.isbe.net/Pages/Health.aspx.

Store the medication in a locked drawer or cabinet. A student may keep possession of medication for asthma or an epinephrine injector. Medications requiring refrigeration should be refrigerated in a secure area.

Plan with the student the time(s) the student should come to the nurse's office to receive medications.

Document each dose of the medication in the student's individual health record. Documentation shall include date, time, dosage, route, and the signature of the person administering the medication or supervising the student in self-administration.

Assess effectiveness and side effects as required by the licensed prescriber. Provide written feedback to the licensed prescriber and the parent/guardian as requested by the licensed prescriber.

Document whenever the medication is not administered as ordered

	along with the reasons. If the parent/guardian does not pick up the medication by the end of the school year, discard the medication in the presence of a witness.
Building Principal	Perform any duties described for school office personnel, as needed. Perform any duties described for school nurses, as needed, or delegate those duties to appropriate staff members. No staff member shall be required to administer medications to students, except school nurses, non-certificated and registered professional nurses, and administrators. 105 ILCS 5/10-22.21b(b), amended by P.A. 101-205. Make arrangements, in conjunction with the parent/guardian, supervising teachers, and/or bus drivers for the student to receive needed medication while on a field trip. For students at risk of anaphylaxis, follow the procedures for Individual Allergy Management in 7:285-AP, Anaphylaxis Prevention, Response, and Management Program.

LEGAL REF.: 105 ILCS 5/10-20.14b, 5/10-22.21b, 5/22-30, and 5/22-33.

105 ILCS 145/, Care of Students with Diabetes Act.

105 ILCS 150/, Siezure Smart School Act

410 ILCS 130/, Compassionate Use of Medical Cannabis Program Act.

23 III.Admin.Code §1.540.

In re Estate of Stewart, 406 III.Dec. 345 (2nd Dist. 2016).

In re Estate of Stewart, 412 III.Dec. 914 (III. 2017).