

**SAN LORENZO  
UNIFIED SCHOOL DISTRICT  
BOARD POLICY**

**Student**

BP 5141.21 (a)

**ADMINISTERING MEDICATION AND MONITORING HEALTH CONDITIONS**

The Governing Board recognizes that some students may need to take medication prescribed by a physician during the school day in order to be able to attend school. The Superintendent or designee shall develop processes for the administration of medication to such students by school personnel.

Prescribed medication may be administered by the school nurse or, to the extent permitted by law, other designated school personnel, only when the Superintendent or designee has received a written statement from the student's physician and parent/guardian, as required by Administrative Regulation 5141.21.

School staff who administers medication, including epinephrine auto-injections, to students shall receive training from qualified medical personnel on how such medication should be administered as well as training in the proper documentation and storage of the medication. Staff authorized to administer the medication shall do so in accordance with administrative regulations and shall be afforded appropriate liability protection.

If the parent/guardian so chooses, he/she may administer the medication to his/her child. In addition, the parent/guardian may designate another individual in writing who is not a school employee to administer the medication to the student.

**Emergency Administration of Epinephrine Auto-Injectors**

Effective January 1, 2015, emergency epinephrine auto-injectors must be provided and stored at all school sites. School nurses and designated trained personnel volunteers at each site are authorized to use epinephrine auto-injectors to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an anaphylactic reaction. This emergency treatment is considered to be first aid and part of the legal requirement for diligent care for student health (California Education Code 49400, 49407, and 49414; Senate Bill 1266). Parents will be notified of this requirement each year in the Annual Notification to Parents. A notice to District staff requesting volunteers will also be sent out annually. Volunteers will be trained by a licensed school nurse, or qualified supervisor of health. The District will also provide volunteers with defense and indemnification for any civil liability that may arise under the law.

**Self-Administration and Monitoring**

Upon written request by the parent/guardian and with the approval of the student's physician, a student with a medical condition that requires frequent treatment, monitoring, or testing may be allowed to self-administer, self-monitor, and/or self-test. The student shall observe universal precautions in the handling of blood and other bodily fluids.

Legal Reference:

EDUCATION CODE

48980 Notification at beginning of term

49400 Diligent care to health

49407 Liability for treatment

49408 Emergency information

49414 Emergency epinephrine auto-injectors

49414.5 Providing school personnel with voluntary emergency training

49423 Administration of prescribed medication for student

49423.1 Inhaled asthma medication, conditions upon which pupil may carry and self-administer medication

49423.5 Specialized health care services

49426 School nurses

49480 Continuing medication regimen; notice

Senate Bill 1266

BUSINESS AND PROFESSIONS CODE

2700-2838.4 Nursing, especially:

2726 Authority not conferred

2727 Exceptions in general

CODE OF REGULATIONS, TITLE 5

600-611 Administering medication to students

Management Resources:

NATIONAL DIABETES EDUCATION PROGRAM PUBLICATIONS

Helping the Student with Diabetes Succeed: A Guide for School Personnel, June, 2003

CALIFORNIA DEPARTMENT OF EDUCATION PUBLICATIONS

Training Standards for the Administration of Epinephrine Auto-Injectors, December, 2004

(Formerly Board Policy 506/507)

Board adopted revision: January 15, 2008, December 2, 2014

# **SAN LORENZO UNIFIED SCHOOL DISTRICT ADMINISTRATIVE REGULATIONS**

**Student**

AR 5141.21(a)

## **ADMINISTERING MEDICATION**

### **Definitions**

“Other designated school personnel” may include any individual employed by the District who has consented to administer the medication or otherwise assist the student, and who may legally administer the medication. (5 CCR 601)

“Medication” may include not only a substance dispensed in the United States by prescription, but also a substance that does not require a prescription, such as over-the-counter remedies, nutritional supplements, and herbal remedies. (5 CCR 601)

### **Administration of Medication**

Whenever possible, a school nurse, registered nurse, or other licensed health care professional shall administer medications that require injection, have the potential for severe adverse reactions, or require patient analysis and/or dosage adjustment prior to administration. In emergency circumstances or if it is not possible for a school nurse, registered nurse, or other licensed health care professional to administer such medications, an individual who has been designated by the student’s parent/guardian or other designated school personnel may administer medication in accordance with state law, Board Policies and Administrative Regulations governing administration of medication.

### **Notifications to Parents/Guardians**

At the beginning of each school year, the Superintendent or designee shall notify parents/guardians that students who need to take prescribed medication during the school day may be assisted by a school nurse, other licensed health care professionals, an individual who has been designated by the student’s parent/guardian, or other designated school personnel, or allowed to self-administer certain medication as long as the District receives written statements from the student's physician and parent/guardian in accordance with law, Board Policy and Administrative Regulation. (Education Code 48980, 49423)

The Superintendent or designee shall inform the parents/guardians of any student on a continuing medication regimen for a non-episodic condition of the following requirements: (Education Code 49480)

1. The parent/guardian is required to inform the school nurse or other designated employee of the medication being taken, the current dosage and the name of the supervising physician.

2. With the parent/guardian's consent, the school nurse or other designated employee may communicate with the student's physician regarding the medication and its effects, and may counsel school personnel regarding the possible effects of the medication on the student's physical, intellectual and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission or overdose.

### **Parent/Guardian Responsibilities**

Before a school nurse or other designated employee administers or assists in the administration of any prescribed medication to any student, or before any student is allowed to carry and self-administer auto-injectable epinephrine or prescription inhaled asthma medication during school hours, the District shall have a written statement from the student's physician and a written statement from the student's parent/guardian. The District shall create forms for parents/guardians and physicians to use for this authorization, which shall be used by parents/guardians requesting administration of medication at school. Except in emergency circumstances, failure to complete and submit the District's authorization form shall prohibit District employees from assisting with or administering medication. (Education Code 49423, 49423.1; 5 CCR 600)

At a minimum, the physician's written statement shall clearly: (Education Code 49423, 49423.1; 5 CCR 602)

1. Identify the student;
2. Identify the medication;
3. Specify the method, amount and time schedules by which the medication is to be taken;
4. Contain the name, address, telephone number and signature of the physician; and
5. If a parent/guardian has requested that his/her child be allowed to self-administer auto-injectable epinephrine or prescription inhaled asthma medication, confirm that the student is able to self-administer the medication.

At a minimum, the parent/guardian's written statement shall clearly: (Education Code 49423, 49423.1; 5 CCR 603)

1. Identify the student;
1. Grant permission for the authorized District representative to communicate directly with the student's physician, as may be necessary, regarding the physician's written statement or any other questions that may arise with regard to the medication;

3. Contain an acknowledgment that the parent/guardian understands how District employees will administer or otherwise assist the student in the administration of medication;
4. Contain an acknowledgment that the parent/guardian understands his/her responsibilities to enable District employees to administer or otherwise assist the student in the administration of medication including, but not limited to, the parent/guardian's responsibility to provide a written statement from the physician and to ensure that the medication is delivered to the school in a proper container by an individual legally authorized to be in possession of the medication; and
5. Contain an acknowledgment that the parent/guardian may terminate consent to such administration at any time.

If a parent/guardian has requested that his/her child be allowed to carry and self-administer medication, the parent/guardian's written statement shall also: (Education Code 49423, 49423.1)

1. Consent to the self-administration; and
2. Indemnify, defend and hold harmless District and school personnel from any liability resulting from the self-administering the medication.

The parent/guardian shall annually provide the Superintendent or designee a new written statement from himself/herself and the student's physician. In addition, the parent/guardian shall provide a new physician statement if the medication, dosage, frequency of administration or reason for administration changes. (Education Code 49423, 49423.1)

Parents/guardians shall provide medications in a properly labeled, original container along with the physician's and/or pharmacist's instructions. For prescribed medication, the container shall bear the name and telephone number of the pharmacy, the student's identification, name and telephone number of the physician, and physician's instructions. Medications that are not in their original container shall not be accepted or administered. Medications shall be delivered to the school by the parent/guardian, unless the Superintendent or designee authorizes another method of delivery. Any unused, discontinued or outdated medication shall be returned to the parent/guardian if possible or, if not possible, disposed of by the end of the school year in accordance with the law. (5 CCR 602)

The parent/guardian of a student on a continuing medication regimen for a non-episodic condition shall inform the school nurse or other designated certificated employee of the medication being taken, the current dosage and the name of the supervising physician.

A student who is authorized to carry and self-administer auto-injectable epinephrine or prescription inhaled asthma medication may be subject to disciplinary action if the student uses such medication in a manner other than as prescribed. (Education Code 49423, 49423.1)

### **Designation of Individual to Administer Medication**

A parent/guardian may designate an individual to administer medication to his/her child as long as the individual is clearly identified, willing to accept the designation, permitted to be on the school site, and any limitations on the individual's authority are clearly established. (5 CCR 604) The parent/guardian shall complete and provide the District's written authorization form designating the individual and containing the information required above.

### **Designated Employee/District Responsibilities**

The school nurse or other designated school personnel shall:

1. Administer or assist in administering the medication in accordance with the physician's written statement;
2. Accept delivery of medication from the student's parent/guardian, including counting and recording the medication upon receipt;
3. Maintain a list of students needing medication during the school day, including the type of medication, times and dosage, as well as a list of students who are authorized to self-administer medication;
4. Maintain a medication log documenting the administration of medication including the student's name; name of medication the student is required to take; dose of medication; method by which the student is required to take the medication; time the medication is to be taken during the regular school day; date(s) on which the student is required to take the medication; physician's name and contact information; and a space for daily recording of medication administration

The daily record shall contain the date, time, amount of medication administered, and signature of the individual administering the medication;

5. Maintain a medication record including the physician's written statement, the parent/guardian's written statement, the medication log, and any other written documentation related to the administration of medication to the student;
6. Ensure that student confidentiality is appropriately maintained;
7. Coordinate the administration of medication during field trips and after-school activities;
8. Report any refusal of a student to take his/her medication to the parent/guardian;
9. Keep all medication to be administered by the District in a locked drawer or cabinet;

10. Communicate with the physician regarding the medication and its effects;
11. Counsel school personnel regarding the possible effects of the medication on the student's physical, intellectual and social behavior, as well as possible behavioral signs and symptoms of adverse side effects, omission or overdose; and
12. By the end of the school year, ensure that unused, discontinued and outdated medication is returned to the student's parent/guardian where possible or, if the medication cannot be returned, is disposed of in accordance with state laws and local ordinances

### **Emergency Administration of Epinephrine Auto-Injectors**

The Superintendent or designee shall:

1. Distribute a yearly notice to parents informing them about the inclusion of this emergency treatment as part of first aid and diligent care for student health
2. Distribute a notice to staff requesting volunteers yearly

A licensed school nurse, qualified supervisor of health, or administrator shall:

1. Obtain the prescription for epinephrine auto-injectors from an authorizing physician
2. Obtain standing orders for emergency epinephrine auto-injectors from an authorizing physician
3. Stock, store and maintain epinephrine auto-injectors at each school site in accordance with specified provisions

A licensed school nurse or other qualified supervisor of health shall:

1. Train designated staff volunteers from each site annually regarding:
  - a. Techniques for recognizing symptoms of anaphylaxis
  - b. Standards and procedures for the storage, restocking, and emergency use of epinephrine auto-injectors
  - c. Emergency follow-up procedures, including calling the emergency 911 telephone number and contacting, if possible, the pupil's parent and physician
  - d. Recommendations on the necessity of instruction and certification in cardiopulmonary resuscitation

e. Instruction on how to determine whether to use an adult epinephrine auto-injector or a junior epinephrine auto-injector, which shall include consideration of a pupil's grade level or age as a guideline of equivalency for the appropriate pupil weight determination

2. Provide written materials covering the training components to all volunteers

Records regarding the acquisition and disposition of epinephrine auto-injectors furnished shall be maintained by the school district for a period of three years from the date the records were created. The school district shall be responsible for monitoring the supply of epinephrine auto-injectors and ensuring the destruction of expired epinephrine auto-injectors.

The District shall provide defense and indemnification for any and all civil liability for each employee who volunteers.

Formerly RR 16

Board adopted revision: January 15, 2008, December 2, 2014



**San Lorenzo Unified School District**  
**PARENT/GUARDIAN DESIGNATION FOR ADMINISTRATION OF MEDICATION**

I/We are the parent/s or guardian/s of \_\_\_\_\_ (Student) (Date of Birth: \_\_\_\_\_)  
and have submitted a signed "Authorization For Administration of Medication By School Personnel."

I/We hereby consent for the medication/s identified below to be administered to Student by a School Nurse, Registered Nurse or Licensed Vocational Nurse while at school or a school activity.

I/We understand that a School Nurse or other licensed health care provider (R.M. or L.V.N.) may not be available to assist in administering or to administer medication to Student. Therefore, I designate and request that the following individual/s administer the following medication/s in accordance with the prescription/s issued by the physician and package instructions and in accordance with the "Authorization For Administration of Medication By School Personnel."

Any school employee who has been properly trained and is being supervised by a School Nurse or other licensed health care provider to administer, or assist in administering, the medication described below.

Designee: \_\_\_\_\_  Designee: \_\_\_\_\_

Designee: \_\_\_\_\_  Designee: \_\_\_\_\_

Name of Medication \_\_\_\_\_ Amount \_\_\_\_\_ Time \_\_\_\_\_ Method \_\_\_\_\_

Other instructions: \_\_\_\_\_

Name of Medication \_\_\_\_\_ Amount \_\_\_\_\_ Time \_\_\_\_\_ Method \_\_\_\_\_

Other instructions: \_\_\_\_\_

Name of Medication \_\_\_\_\_ Amount \_\_\_\_\_ Time \_\_\_\_\_ Method \_\_\_\_\_

Other instructions: \_\_\_\_\_

By signing below, I am providing my consent for the individual/s designated above to consult verbally or in writing with the healthcare provider identified below regarding Student's medication and its effects.

I/We agree to indemnify, defend, hold harmless and release from liability the San Lorenzo Unified School District, its officers, agents, and employees, for any injury, illness or death that may occur as a result of my/our choice to designate the individual/s above to administer or assist with the administration of the medication described above to Student in accordance with the physician's direction.

Date \_\_\_\_\_ Parent Name (print) \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_ Parent Name (print) \_\_\_\_\_

Parent Signature \_\_\_\_\_

I consent to serve as a designee as indicated above to assist in administering or to administer the medication described above.

Date \_\_\_\_\_ Designee Name (print) \_\_\_\_\_

Designee Signature \_\_\_\_\_

Date \_\_\_\_\_ Designee Name (print) \_\_\_\_\_

Designee Signature \_\_\_\_\_

Distribution:    White – School            Yellow – District Office:Health Dept.            Pink – Parent/Guardian

San Lorenzo Unified School District

PHYSICIAN'S CONSENT

Name of child \_\_\_\_\_

Name of medication \_\_\_\_\_

Dosage \_\_\_\_\_ Time/Frequency \_\_\_\_\_

Method of administration \_\_\_\_\_

Reason for medication \_\_\_\_\_

Possible side effects/adverse reactions \_\_\_\_\_

Name of medication \_\_\_\_\_

Dosage \_\_\_\_\_ Time/Frequency \_\_\_\_\_

Method of administration \_\_\_\_\_

Reason for medication \_\_\_\_\_

Possible side effects/adverse reactions \_\_\_\_\_

Name of medication \_\_\_\_\_

Dosage \_\_\_\_\_ Time/Frequency \_\_\_\_\_

Method of administration \_\_\_\_\_

Reason for medication \_\_\_\_\_

Possible side effects/adverse reactions \_\_\_\_\_

By signing below, I hereby attest the administration of the medication described above at school is medically necessary and may be performed by the individuals designated above (page i). I agree to communicate with the individual/s designated above regarding administration of the medication/s identified above or other questions that may arise in connection with administration of the medication/s.

Date \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Physician's Printed Name \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Email \_\_\_\_\_

Distribution: White – School

Yellow – District Office:Health Dept.

Pink – Parent/Guardian

## **San Lorenzo Unified School District**

### **Emergency Anaphylaxis Treatment Annual Notification to Parents**

Effective January 1, 2015, Senate Bill 1266 amends California Education Code 49414 and now requires school districts to obtain and stock emergency epinephrine auto-injectors (epiPen) at all school sites. This amended law authorizes school nurses and trained personnel volunteers to use epinephrine auto-injectors to provide emergency medical aid to students suffering, or reasonably believed to be suffering, from an anaphylactic reaction.

Anaphylaxis is a rapid, severe allergic response triggered by insect stings, foods, medications, latex materials, exercise, or in rare cases by unknown causes. This is a life-threatening allergic condition, requiring immediate treatment. Administering epinephrine to students during a medical emergency may help insure the student's health and safety at school. The epinephrine auto-injector rapidly delivers a pre-measured, sterile, single dose of epinephrine by direct injection through the skin. As a result, San Lorenzo Unified School District has adopted a policy to provide the emergency medical care for anaphylaxis under this law.

This emergency treatment is considered to be first aid and part of our requirement to give diligent care to the health of students (California Education Code 49400 and 49407). All students suffering, or reasonably believed to be suffering, from a severe life-threatening allergic reaction will be administered emergency epinephrine by a licensed school nurse or by a trained unlicensed volunteer staff member. If an epiPen is administered under the guidelines of Education Code 49414, staff members are required to call emergency 911. In the event that a school nurse or trained unlicensed volunteer is not immediately available, staff will also call emergency 911.

**San Lorenzo Unified School District**  
**Emergency Anaphylaxis Treatment**  
**Annual Notification to Staff Requesting Volunteers**

Commencing January 1, 2015, an amendment to California Education Code 49414 requires school districts to obtain and stock epinephrine auto-injectors (epiPens) in order for school nurses and other designated trained personnel to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an anaphylactic reaction. Under the provision of Senate Bill 1266, districts are required to distribute a notice at least once per year to all staff requesting volunteers to be trained to administer epinephrine auto-injectors.

Anaphylaxis is a rapid, severe allergic response triggered by insect stings, foods, medications, latex materials, exercise, or in rare cases by unknown causes. This is a life-threatening allergic condition, requiring immediate treatment. Administering epinephrine to students during a medical emergency may help insure the student's health and safety at school. As a result, San Lorenzo Unified School District has adopted a policy for standing orders to provide life-saving epinephrine to students in need of such treatment.

This policy states that a licensed school nurse or trained, unlicensed school staff under the direct or indirect supervision of the licensed school nurse (or supervisor of health) may administer epinephrine in the form of an epinephrine auto injector during a severe life-threatening allergic reaction. The epinephrine auto-injector rapidly delivers a pre-measured, sterile, single dose of epinephrine by direct injection through the skin. This emergency treatment is considered to be first aid and part of our requirement to give diligent care to the health of students (California Education Code 49400 and 49407).

This notice serves as a request for volunteers to be trained to administer an epinephrine auto-injector to a person if the person is suffering from or reasonably believed to be suffering from anaphylaxis.

Components of the volunteer training will include:

- Techniques for recognizing symptoms of anaphylaxis
- Standards and procedures for storage, restocking, and emergency use of epiPens
- Emergency follow-up procedures
- Recommendations on the necessity and certification in cardiopulmonary resuscitation
- Instruction in how to determine whether to use an adult epiPen or a junior epiPen.
- Written materials covering the training components will also be provided to all volunteers

The San Lorenzo Unified School District will provide trained volunteers with defense and indemnification for any civil liability that may arise under the law. Although epiPen volunteers are protected by Board Policy and Education Code, it does not prevent an outside party from making accusations or pursuing legal action with regard to the administration of epiPens.

Staff interested in volunteering to administer emergency epinephrine medication shall contact the District Health Office at 317-4791 or your site administrator.

**San Lorenzo Unified School District**

**EMERGENCY ADMINISTRATION OF EPINEPHRINE MEDICATION by  
VOLUNTEER STAFF**

Board policy states that a licensed school nurse or trained, unlicensed school staff under the direct or indirect supervision of the licensed school nurse or other qualified supervisor of health may administer epinephrine in the form of an epinephrine auto-injector during a severe life-threatening allergic reaction. The epinephrine auto-injector rapidly delivers a pre-measured, sterile, single dose of epinephrine by direct injection through the skin.

This emergency treatment is considered to be first aid and part of our requirement to give diligent care to the health of students (California Education Code 49400 and 49407). All students suffering, or reasonably believed to be suffering, from a severe life-threatening allergic reaction, will be administered emergency epinephrine by a licensed school nurse or unlicensed, trained staff member as part of first aid.

As part of Board policy, the District has asked for volunteers to be trained to administer an epinephrine auto-injector to a student if the student is suffering from or reasonably believed to be suffering from anaphylaxis.

- I agree to serve as a volunteer to administer emergency epinephrine medication as described above.
  
- I understand that, as a trained volunteer, the District will provide me with defense and indemnification for any civil liability that may arise under the law. Although volunteers are protected by Board Policy and Education Code, I understand that it does not prevent an outside party from making accusations or pursuing legal action with regard to the administration of epiPens.
  
- I understand that I will be trained by a licensed school nurse or other qualified supervisor of health. The training will include:
  - o Techniques for recognizing symptoms of anaphylaxis
  - o Standards and procedures for storage, restocking, and emergency use of epiPens
  - o Emergency follow-up procedures
  - o Recommendations on the necessity and certification in cardiopulmonary resuscitation
  - o Instruction in how to determine whether to use an adult epiPen or a junior epiPen.
  - o Written materials covering the training components will also be provided to all volunteers

By signing below, I am volunteering to administer epinephrine to a student suffering from or reasonably believed to be suffering from anaphylaxis.

Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Distribution:    White – School            Yellow – District Office: Health Dept.            Pink – Staff member