

**ADMINISTRATION OF MEDICATION  
BY AUTHORIZED POLK COUNTY SCHOOL PERSONNEL**

1. Principals/Directors of each school are required to designate a minimum of three staff members as Health Contacts who will be responsible for the administration of medication to students.
2. These designated school personnel are authorized under Florida Statute 1006.062, to assist students in the administration of prescribed and non-prescribed medication provided that:
  - a. They have completed a formal instructional class, offered by Polk County School Board Health Services, on medication administration;
  - b. An Authorization for Medication (*Attachment 1*) has been completed and signed by the student's parent/guardian **and** physician/mid-level practitioner;
  - c. The first dose of any new medication shall not be administered during schools hours because of the possibility of an allergic reaction;
  - d. The possible side effects and any special instructions are listed on the Authorization for Medication;
  - e. Prescription medication is received in a **pharmacy-labeled** container with the following information:
    1. student's name
    2. physician's/mid-level practitioner's name
    3. pharmacy's name and phone number
    4. name of medication
    5. directions concerning dosage and administration
    6. time of day to be taken
    7. date of prescription
  - f. Sample prescription medications may be accepted provided that all of the above information is written on the medication sample; with the exception of pharmacy's name and phone number.
  - g. Non-prescription (over-the-counter) medication must be received in its **original container** and labeled with the student's name. A completed and signed Authorization for Medication (*Attachment 1*) **must** accompany each over-the-counter medication.

3. It is the responsibility of these designated school personnel to see that students receive their medication on time, as ordered by the student's physician. If a student fails to appear to take the medication at the appropriate time, he/she must be located and called to receive his/her medication.
4. Training of designated Polk County School Board Personnel in the administration of medication will be provided by a health care professional from Polk County School Board Health Services or the Polk County Health Department. This training will include:
  - a. practical training in the recommended procedures for administration of medication as outlined in "Medication Administration at School: A Handbook for Polk County School Personnel" (*Appendix*). This handbook will be provided to each individual who receives this training.
  - b. information on the proper/safe storage of medications.
5. Upon completion of this training, personnel will be provided Acknowledgement of Training (*Attachment 2*) in medication administration at school.
6. Polk County School Board Health Services or the Polk County Health Department nurses will provide additional instructions and guidance as needed, including:
  - a. information in the purpose, effect, expected results and possible side effects of specific drugs
  - b. an observation, at least annually, using a checklist (*Attachment 3*), to insure that safe practice guidelines for medication administration are being followed. Copies of the completed checklist will be provided to:
    1. the individual being observed
    2. the school principal/director
    3. Polk County School Board Health Services
  - c. any other assistance regarding medication administration that is requested by the school.

## **Polk County School Board Policy and Procedure for Administration of Medication**

1. The following policy and procedure is being implemented to comply with Florida Statute 1006.062, Administration of Medication.

**All medications, treatments and life-saving procedures must be delivered by Polk County School Board or Polk County Health Department trained personnel at school-sponsored events/activities. Please call your Polk County Health Department School Nurse or Polk County School Board Health Services if you require assistance in meeting this requirement.**

A separate **Field Trip Medication In-Service** (*Appendix 2*) is required for those employees who are not Polk County School Board Certified Health Contacts that will be responsible for giving medications to students on field trips. This is a one time in-service that can be scheduled during staff meetings. The Polk County Health Department School Nurse or Polk County School Board Health Services RNs are available to provide this service.

Vocational trainers, trained PCSB personnel that administer medications to students at their job site, must follow the Vocational Trainers Procedure (*Appendix 3*).

2. Definitions:
  - a. Prescription medications: medications that are required to be authorized in writing by a licensed physician/mid-level practitioner for the treatment of a condition and/or illness.
  - b. non-prescription/over-the-counter medications: those medications which may be purchased by the general public for treatment of physical conditions and/or illnesses without the authorization of a licensed physician/mid-level practitioner. Over-the-counter medications shall include, but are not limited to all forms of pills, tablets, capsules, lozenges, liquids, creams, etc., that may be taken internally or applied to the body.
3. NO medication, either prescription or over-the-counter, should be administered to a student by Polk County School Board or Polk County Health Department personnel unless the following criteria are met:
  - a. The medication is used to control chronic conditions or acute illness; and failure to administer it would jeopardize the student's health.

- b. An Authorization for Medication (*Attachment 1*) has been completed and signed by the student's parent/guardian **and** physician/mid-level practitioner.
    - c. Medications may be administered for one day with a written note from the parent/guardian. The Authorization for Medication should be given to the parent and returned to school the following day.
  4. Medications meeting the above criteria must be supplied to the student by the parent/guardian. **ONLY an adult may transport medication to and from the school clinic.**
  5. Medications must be counted, documented and initialed on medication log when received by the clinic para/health contact.
  6. No more than a one month supply of prescription medications may be brought to school. Exceptions may be made to this policy on a case by case basis, with the approval of the principal.
  7. Medications **must not** be given past the recommended length of time indicated on the Authorization for Medication (*Attachment 1*).
  8. The Authorization for Medication must be renewed as follows:
    - a. **Prescription medications for chronic/long-term conditions** must be renewed at the beginning of each school year or anytime a medication and/or dosage change is required.
    - b. **Prescription medications for short-term conditions** must be renewed with each illness.
    - c. **Over-the-counter medications** must be renewed as recommended by the physician/mid-level practitioner on the Authorization for Medication.
  9. A copy of "Medication Administration at School: A Handbook for School Personnel" (*Appendix*) should be kept in the notebook where medications are logged. This notebook and the medications should be stored together in a locked cabinet.
  10. A Student Medication Log (*Attachment 4*) must be kept for each student receiving medications at school. The Authorization for Medication may be attached to the student's Medication Log for easy reference.
  11. Procedures for administering medications to students are provided in detail in "Medication Administration at School: A Handbook for School

Personnel” (*Appendix*). This handbook is designed to be a supplement to, not a substitute for, formal instruction in medication administration provided by Polk County School Board Health Services and the Polk County Health Department.

12. Students are not permitted to carry medications.

a. **Exceptions:** saline solution for contact lenses, lip balm and sunscreen.

b. **Exception:** asthma inhalers

1. In accordance with Florida Statute 1002.20 (h), a student must have a written notation to carry an inhaler on the Authorization for Medication, signed by the student’s parent/guardian **and** physician/mid-level practitioner.
2. A “Medication Contract” must be completed by the school nurse (*Attachment 5*).
3. All school staff, including substitute teachers involved with this child should be made aware of the fact that he/she is allowed to carry this medication.
4. Parents of students who participate in after-school activities, who may require the use of an inhaler, should talk to their physician about obtaining an Authorization for Medication with a notation to carry their inhaler.

c. **Exception:** EpiPen/Ana-Kit

1. A student must have a written notation to carry an on the Authorization for Medication, signed by the student’s parent/guardian **and** physician/mid-level practitioner.
2. A “Medication Contract” must be completed by the Polk County Health Department School Nurse (*Attachment 5*).
3. An initial case conference with student, parent/guardian, school administrator, designated school staff who will be involved with the student and the Polk County Health Department School Nurse. Subsequent case conferences must be annually updated by the Polk County Health Department School Nurse. This conference may be conducted by the Polk County Health Department School Nurse via telephone or a student specific case conference as necessary.
4. Written procedure as outlined in protocol.
5. Special Equipment Affidavit (*Attachment 6*) signed by parent/guardian for release of liability and permission to treat.
6. List of what the parent/guardian must provide in terms of supplies and medication.
7. Documented medical procedure training of staff who will be involved in the treatments.

8. Documentation of emergency telephone procedure.
9. Documentation of emergency plan.
10. Designated school staff members should be trained in the location and use of the EpiPen/Ana-Kit (*Attachment 9*).
11. All school staff, including substitute teachers involved with this child should be made aware of the fact that he/she is allowed to carry medication.
12. This should be documented on the school's high risk list and in the teacher's plan book.
13. Parents of students who participate in after-school activities, who may require the use of an Epi-Pen/Ana-Kit, should talk to their physician about obtaining an Authorization for Medication with a notation to carry an EpiPen/Ana-Kit.

**Special teachers (i.e.—P.E., Art, Music, Computers, etc.) should be made aware of student's life threatening allergy, but do not need to attend the in-service unless they will be one of the responsible persons providing treatment.**

13. Improper handling of the asthma inhaler, EpiPen/Ana-Kit by the student could result in the privilege to carry the asthma inhaler, EpiPen/Ana-Kit being suspended. Parent/guardians will be notified if a problem arises due to the student's misuse/mishandling of an asthma inhaler, EpiPen/Ana-Kit. Further disciplinary action may be taken by school administrator.

14. **Nebulizer Medication**

**Before beginning nebulizer medication at school, the following requirements must be met:**

- a. Clinic para/health contacts must receive training in nebulizer administration during the Polk County School Board Medication Administration Training or by a Polk County Health Department School Nurse (*Attachment 10*).
- b. Completed Authorization for Medication.
- c. Listing of adverse side effects.
- d. An **initial** case conference with parent/guardian, student, school administrator, school staff who will be involved with the student and Polk County Health Department School Nurse. Subsequent case conferences must be updated annually by the Polk County Health

Department School Nurse. This conference may be conducted via telephone or a student specific case conference as necessary.

- e. Written procedure.
- f. Special Equipment Affidavit (*Attachment 6*) signed by parent/guardian for release of liability and permission to treat.
- g. List of what the parent/guardian must provide in terms of supplies and medications.
- h. Documented medical procedure training of staff who will be involved in the treatments.
- i. Documentation of emergency telephone procedure.
- j. Documentation of emergency plan.

**Special teachers (i.e.—P.E., Art, Music, Computers, etc.) need to be made aware of student’s condition, but do not need to attend the in-service unless they will be one of the responsible persons administering the medication. Contact the Polk County Health Department School Nurse assigned to your school for assistance in meeting these requirements.**

#### 15. Storage of Medication

- a. All medications must be stored **in the school clinic** in their original containers and under lock and key at all times. There should be 2 keys for this cabinet in case of loss. These keys should be returned to the principal or designee at the end of each day. **KEYS MAY NOT BE REMOVED FROM SCHOOL PROPERTY.** Exceptions are those medications that students carry and have a “Medication Contract” on file. All other exceptions must have approval by Polk County School Board Health Services.
- b. Medications which require refrigeration should be stored in the refrigerator, separated from food by placement in a sealed container (an airtight plastic container). Medication **must** be in a locked box in the refrigerator or in a locked refrigerator. Food and beverage **should not** be stored in the clinic refrigerator unless the food items are labeled for a specific student’s medical condition.

#### 16. Disposition of Medications

- a. When medications have been discontinued, expired, or there are leftover medications at the end of the school year, notify the parent/guardian and document it. Medications must be claimed by the

parent/guardian and may not be given to the student to take home. Document the date and number of pills given to parent/guardian on the medication log notes.

- b. Medications no longer being administered and not claimed by the parent/guardian after 35 days, will be disposed via the sanitary sewer system. These medications will be counted, documented on the medication log and witnessed by another employee. Exceptions are EpiPens, Ana-Kits and asthma inhalers.

**Every attempt** should be made to return these to the parent/guardian. Otherwise EpiPens, Ana-Kits and asthma inhalers must be disposed in the sharps containers in the presence of another employee. Document the name of the medication and the date of disposal on the medication log. Both employees need to co-sign the medication log.

## 17. Medication Errors

- a. Medication errors include:
  - 1. wrong medication
  - 2. incorrect dosage
  - 3. missed dosage
  - 4. late dosage
  - 5. others not noted above
- b. Report medication errors immediately to:
  - 1. the school principal
  - 2. the parent/guardian
  - 3. if the error involves giving the wrong medication or dose:
    - a. Notify your Polk County Health Department School Nurse or Polk County School Board Health Services.
    - b. If advised to do so by your Polk County Health Department School Nurse/Polk County School Board Health Services call Poison Control for possible adverse side effects.
    - c. It may be necessary to contact the student's physician
    - d. The student should be kept under observation for possible adverse reactions until the situation has been resolved.
  - 4. If the error involves a late/missed dose:
    - a. Call the parent/guardian for recommendation on how to proceed.
    - b. It may be necessary to contact the student's physician.
  - 5. School Health Services: 291-5355

- c. A Medication Error Report (*Attachment 7*) must be completed. A copy of this report should be filed in the student's cumulative folder. Send a second copy to Polk County School Board Health Services and place a third copy in your Polk County Health Department School Nurse's box.
18. At the beginning of each school year, schools must send parents a letter explaining the Polk County School Board's policy regarding administration of medication in school. A sample letter is provided (*Attachment 8*).