MEDICATION AT SCHOOL

Under normal circumstances, all student medications, both prescription and over-the-counter (OTC) medications, should be administered before and/or after school hours under supervision of the parent/guardian.

When it is necessary for a student to receive prescription or OTC oral medication, topical medication, eye drops, ear drops, or nasal spray at school or at school-sponsored events, the parent/guardian must submit a written parental request and a written authorization form from a licensed healthcare practitioner (LHP), prescribing within the scope of his or her prescriptive authority. If the medication will be administered for more than fifteen consecutive days, the LHP must also provide written, current, and unexpired instructions for the administration of the medication.

The superintendent will establish procedures for:

A. Designating staff members who may administer medication to students;

B. Training, delegation, and supervision of staff members in the administration of medication to students by a registered nurse (RN);

C. Obtaining signed and dated parent/guardian and LHP request and authorization for the administration of medications, including instructions from the LHP if the medication is to be given for more than fifteen (15) days;

D. Transporting medications to and from school;

E. Storing medication in an approved locked cabinet;

F. Labeling medication;

G. Administering of medication, including identification of student and medication;

H. Documenting administration of medication, including errors, reactions, or side effects;

I. Disposing of medications;

J. Maintaining records pertaining to the administration of medication;

K. Maintaining student confidentiality;

L. Permitting, as appropriate, possession and self-administration of medications necessary for student school attendance; and

M. Reviewing and evaluating of medication practices and documentation.

Except for limited situations, no school staff other than a RN or licensed practical nurse (LPN) may administer suppositories, rectal gels, or injections (except for emergency injections for students with anaphylaxis, as stated in District Policy and Procedure 3419 Self-Administration of Asthma and Anaphylaxis Medication and District Policy and

Procedure 3420 Anaphylaxis Prevention and Response. In some situations, a parent designated adult (PDA) may administer certain injections.

If the District decides to discontinue administering a student's medication, the superintendent or designee must provide notice to the student's parent/guardian orally and in writing prior to the discontinuance. There must be a valid reason for the discontinuance that does not compromise the health of the student or violate legal protections for the disabled.

Medical Marijuana
Washington State law (RCW 69.51A.060) permits the use of medical marijuana, however, federal law (Title IV-Part A—Safe and Drug Free Schools and Communities and the Controlled Substances Act (CSA) (21 U.S.C. § 811) prohibits the possession and use of marijuana on the premises of recipients of federal funds including educational institutions. School nurses may not administer medical marijuana. See Policy 3423 Parental Administration of Marijuana for Medical Purposes, regarding parental administration of medical marijuana on school grounds, school bus, and school-sponsored activities.

Cross References:
Board Policy 3419	Self-Administration of Asthma and Anaphylaxis Medications
Board Policy 3420	Anaphylaxis Prevention and Response
Board Policy 3423	Parental Administration of Marijuana for Medical Purposes

Legal References:
RCW 28A.210.260	Public and private schools — Administration of medication — Conditions
RCW 28A.210.270	Public and private schools — Administration of Medication—Immunity from Liability — Discontinuance, procedure

Management Resources:
Policy & Legal News, July 2019
Policy & Legal News, August 2018
Policy & Legal News, July 2017
Policy & Legal News, February 2014
Policy & Legal News, August 2012
Policy News, February 2001