



ADMINISTRATION OF MEDICATION POLICY

The Nevada City School of the Arts (“NCSOTA” or the “Charter School”) staff is responsible for overseeing the administration of medication to pupils attending NCSOTA during the regular school day. It is imperative that practices followed in the administration of medication be carefully delineated to ensure the safety of our pupils and the legal protection of our employees. For any student with a disability, as defined under the Individuals with Disabilities Education Act or Section 504 of the Rehabilitation Act of 1973, necessary medication shall be administered in accordance with the student’s individualized education program or Section 504 services plan.

Definitions

- “*Authorized health care provider*” means an individual who is licensed by the State of California to prescribe medication.
- “*Authorizing physician and surgeon*” may include, but is not limited to, a physician and surgeon employed by, or contracting with, a local educational agency, a medical director of the local health department, or a local emergency medical services director.
- “*School nurse*” means an individual who is currently a credentialed and licensed registered nurse employed by NCSOTA.
- “*Designated personnel*” or “*volunteer*” means an individual employed by NCSOTA who has consented to administer the particular medication or emergency assistance to individuals as permitted by this policy and may legally administer the medication or emergency assistance to the individual receiving it. For the purposes of administering epinephrine auto-injectors, this also includes a holder of an Activity Supervisor Clearance Certificate who has specifically volunteered to administer epinephrine auto-injectors to a person if the person is suffering, or reasonably believed to be suffering, from anaphylaxis. To be eligible, the “designated personnel” or “volunteer” must have been designated by NCSOTA and have received the required training as set forth in this policy.
- “*Medication*” includes prescription medication, over-the-counter remedies, nutritional supplements, and herbal remedies. Sunscreen is not considered a medication.
- “*Stock albuterol inhaler*” means albuterol medication in the form of a metered-dose inhaler (MDI) that is ordered by a health care provider and is not prescribed for a specific person and also includes, if necessary, a single-use disposable holding chamber.
- “*Respiratory distress*” means the sudden appearance of signs and symptoms of difficulty breathing. Signs and symptoms of respiratory distress may include one or more of the following: complaints of a tight chest or chest pain; wheezing or noisy breathing; persistent coughing; difficulty breathing; appears to be in distress; lips or fingernails turning blue; and shortness of breath.
- “*Epinephrine auto-injector (“Epi-Pen”)*” means a disposable delivery device designed for the automatic injection of a premeasured dose of epinephrine into the human body to prevent or treat a life-threatening allergic reaction.



- *"Anaphylaxis"* means a potentially life-threatening hypersensitivity to a substance. Symptoms of anaphylaxis may include shortness of breath, wheezing, difficulty breathing, difficulty talking or swallowing, hives, itching, swelling, shock, or asthma. Causes of anaphylaxis may include, but are not limited to, an insect sting, food allergy, drug reaction, and exercise.
- *"Opioid antagonist"* means naloxone hydrochloride ("NARCAN") or another drug approved by the federal Food and Drug Administration ("FDA") that, when administered, negates or neutralizes in whole or in part the pharmacological effects of an opioid in the body, and has been approved for the treatment of an opioid overdose.
- *"Regular school day"* includes during school hours, before- or after-school programs, field trips, extracurricular or co-curricular activities, and camps or other activities that typically involve at least one (1) overnight stay from home.

Administration of Medication with NCSOTA Assistance

Any student who is required to take, during the regular school day, medication prescribed or ordered for the student by an authorized healthcare provider may be assisted by the school nurse or designated school personnel.

In order for a student to be assisted by the school nurse or other designated NCSOTA personnel in administering medication, NCSOTA shall obtain both:

1. A written statement from the student's authorized health care provider detailing the name of the medication, method, amount/dosage, and time schedules by which the medication is to be taken, and
2. A written statement from the parent, foster parent, or guardian of the student indicating the desire that NCSOTA assist the student in the matters set forth in the statement of the authorized health care provider.

These written statements specified shall be provided at least annually and more frequently if the medication, dosage/amount, frequency of administration, or reason for administration changes.

The primary responsibility for the administration of medication rests with the parent/guardian, student, and medical professionals.

Self-Administration of Medication (without NCSOTA Assistance)

Students in grades 4th-8th Grades will be permitted to self-carry and self-administer prescription medication if an authorized health care provider has indicated that a student may need to take this medication or is required to take this medication during the regular school day. Prescription medication includes an epinephrine auto-injector ("Epi-Pen") and inhaled asthma medication. In order to carry and self-administer this medication, NCSOTA must receive the following:



1. A written statement from the student's authorized healthcare provider (1) detailing the name of the medication, method, amount, and time schedules by which the medication is to be taken, and (2) confirming that the student is able to self-administer an Epi-Pen or inhaled asthma medication, and
2. A written statement from the parent, foster parent, or guardian of the student (1) consenting to the self-administration, (2) providing a release for the school nurse or designated school personnel to consult with the health care provider of the student regarding any questions that may arise with regard to the medication, and (3) releasing NCSOTA and school personnel from civil liability if the self-administering student suffers an adverse reaction as a result of self-administering medication.

These written statements specified shall be provided at least annually and more frequently if the medication, dosage/amount, frequency of administration, or reason for administration changes.

NCSOTA may elect to observe and document the student's ability to safely and competently self-carry and self-administer prescription medication as directed by the authorized health care provider. A student may be subject to disciplinary action if the student uses this prescription medication in a manner other than as prescribed.

Any student requiring insulin shots must establish a plan for administration of insulin shots with the Director in consultation with the parent or guardian and the student's medical professional.

A student who is 12 years of age or older, while on campus or participating in school activities, may carry or administer naloxone hydrochloride nasal spray or another opioid antagonist that is federally approved for over-the-counter, nonprescription use, for the purposes of providing emergency treatment to persons who are suffering, or reasonably believed to be suffering, from an opioid overdose. Students who are in middle school or high school, while on campus or participating in school activities, may carry fentanyl test strips or a federally approved opioid antagonist for over-the-counter use for the emergency treatment of persons suffering, or reasonably believed to be suffering, from an opioid overdose.

Staff Training and Emergency Response

Additional information about staff trainings and NCSOTA's response to emergencies may be located within the Employment Handbook and/or the School Safety Plan.

A. Response to Anaphylactic Reaction

The school nurse or designated personnel may use an Epi-Pen to provide emergency medical aid to persons suffering, or reasonably believed to be suffering from, an anaphylactic reaction. NCSOTA will ensure it has the appropriate type of Epi-Pen on site (i.e., regular or junior) and stored in an accessible location to meet the needs of its students. NCSOTA will ensure staff properly store, maintain, and restock the Epi-Pen as needed.



NCSOTA will ensure any designated personnel are appropriately trained regarding the storage and emergency use of an Epi-Pen. Adequate training shall include all of the following:

1. Techniques for recognizing symptoms of anaphylaxis.
2. Standards and procedures for the storage, restocking, and emergency use of Epi-Pens.
3. Emergency follow-up procedures, including calling the emergency 911 telephone number and contacting, if possible, the student's parent(s)/guardian(s) and physician.
4. Recommendations on the necessity of instruction and certification in cardiopulmonary resuscitation.
5. Instruction on how to determine whether to use an adult Epi-Pen or a Epi-Pen, which shall include consideration of a student's grade level or age as a guideline of equivalency for the appropriate student weight determination.
6. Written materials covering the information required pursuant to the training. A copy of these written materials shall be made accessible, such as through publicly posting at the location of the Epi-Pens.

NCSOTA will distribute an annual notice to all staff describing the request for volunteers who will be trained to administer an Epi-Pen to a person if that person is suffering, or reasonably believed to be suffering from, anaphylaxis. The annual notice shall also describe the training the volunteer will receive and shall indicate the location of the Epi-Pens on campus.

B. Response to Respiratory Distress

NCSOTA may provide emergency stock albuterol inhalers (asthma inhaler), including, if necessary, single-use disposable holding chambers, to school nurses or volunteers to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from respiratory distress.

Training in the administration of emergency stock albuterol inhalers shall be consistent with the most recent guidelines for medication administration issued by the California Department of Education ("CDE"), and shall include all of the following:

1. Techniques for recognizing symptoms of respiratory distress.
2. Standards and procedures for the storage, restocking, and emergency use of stock albuterol inhalers.
3. Emergency follow up procedures, including calling the emergency 911 telephone number and contacting, if possible, the student's parent or guardian and physician.
4. Recommendations on the necessity of instruction and certification in cardiopulmonary resuscitation.
5. Written materials covering the information required pursuant to the training, which NCSOTA shall retain for reference.

NCSOTA shall distribute a notice at least once per school year to all staff that contains the following information:



1. A description of the volunteer request stating that the request is for volunteers to be trained to administer a stock albuterol inhaler to a person if the person is suffering, or reasonably believed to be suffering, from respiratory distress and
2. A description of the training that the volunteer will receive.

The school nurse, or the NCSOTA Executive Director or designee, shall obtain from an authorizing physician and surgeon a prescription for stock albuterol inhalers, and shall be responsible for stocking the stock albuterol inhalers and restocking it if it is used.

The school nurse or volunteer may administer a stock albuterol inhaler to a person exhibiting potentially life-threatening symptoms of respiratory distress at school or a school activity when a physician is not immediately available. If the stock albuterol inhaler is used, it shall be restocked as soon as reasonably possible, but no later than two weeks after it is used. Stock albuterol inhalers shall be restocked before their expiration date.

The school nurse or volunteer shall initiate emergency medical services or other appropriate medical follow-up in accordance with the training materials retained.

C. Response to Diabetic or Hypoglycemic Emergency

NCSOTA provides Charter School personnel with voluntary emergency medical training to provide emergency medical assistance to pupils with diabetes suffering from severe hypoglycemia, and volunteer personnel shall provide this emergency care, in accordance with standards established herein and the performance instructions set forth by the licensed health care provider of the pupil. A Charter School employee who does not volunteer or who has not been trained pursuant to this policy may not be required to provide emergency medical assistance.

Training by a physician, credentialed school nurse, registered nurse, or certificated public health nurse according to the standards established pursuant to this section shall be deemed adequate training. Training established shall include all of the following:

- Recognition and treatment of hypoglycemia.
- Administration of glucagon.
- Basic emergency follow-up procedures, including, but not limited to, calling the emergency 911 telephone number and contacting, if possible, the pupil's parent or guardian and licensed health care provider.

All materials necessary to administer the glucagon shall be provided by the parent or guardian of the pupil.

In the case of a pupil who is able to self-test and monitor his or her blood glucose level, upon written request of the parent or guardian, and with authorization of the licensed health care provider of the pupil, a pupil with diabetes shall be permitted to test his or her blood glucose level and to otherwise provide diabetes self-care in the classroom, in any area of the school or school grounds, during any school-related activity, and, upon specific request by a parent or guardian, in a private location.



Designated staff shall establish emergency procedures for specific medical conditions that require an immediate response (i.e., allergies, asthma, diabetes).

D. Response to an Opioid Overdose

NCSOTA provides NCSOTA personnel with voluntary emergency medical training on the administration of opioid antagonists to students exhibiting potentially life-threatening symptoms, or reasonably believed to be suffering, from an opioid overdose at school or a school activity. NCSOTA will ensure staff properly store, maintain, and restock opioid antagonists as needed.

Training shall include all of the following:

1. Techniques for recognizing symptoms of an opioid overdose.
2. Standards and procedures for the storage, restocking, and emergency use of naloxone hydrochloride or another opioid antagonist.
3. Basic emergency follow-up procedures, including, but not limited to, a requirement for the school or NCSOTA administrator or, if the administrator is not available, another school staff member to call the emergency 911 telephone number and to contact the student's parent(s)/guardian(s).
4. Recommendations on the necessity of instruction and certification in cardiopulmonary resuscitation.
5. Written materials covering the information required pursuant to the training.

The Director shall distribute an annual notice to all staff regarding volunteering for training to administer opioid antagonists and a volunteer's right to rescind their offer to volunteer.

E. Response to a Seizure, Seizure Disorder or Epilepsy

Upon receipt of a request by a parent/guardian to administer anti-seizure medication when a student is suffering from a seizure, NCSOTA may designate one or more volunteers to receive training to administer the anti-seizure medication. NCSOTA may allow non-medical personnel to volunteer to provide medical assistance to students who are diagnosed with seizures, a seizure disorder, or epilepsy if NCSOTA does not have a credentialed nurse or other licensed nurse on site. NCSOTA's volunteer personnel shall provide this emergency care in accordance with standards established herein and the performance instructions set forth by the licensed health care provider of the student. A NCSOTA employee who does not volunteer or who has not been trained pursuant to this policy may not be required to provide emergency medical assistance. Volunteer employees are not providing this emergency medical care for compensation, notwithstanding that the employee is a paid public employee.



Upon receipt of the parent/guardian's request, NCSOTA shall notify the parent/guardian that their child may qualify for services or accommodations under the Section 504 plan or an individualized education program ("IEP"), assist the parent/guardian with the exploration of that option, and encourage the parent/guardian to adopt that option if it is determined that the child is eligible for a Section 504 plan or an IEP. NCSOTA shall obtain a signed notice verifying the parent/guardian was provided this information and has the right to request a Section 504 Plan or IEP at any time. Additionally, if NCSOTA does not have any volunteers, then NCSOTA shall notify the parent/guardian of the student's right to be assessed for a Section 504 plan or an IEP.

Prior to administering emergency anti-seizure medication, NCSOTA shall obtain annually a signed seizure action plan from the parent/guardian, that includes the parent/guardian's authorization, in writing for the medication to be administered to the student at school by a non-medical professional who has received training, and a copy of a statement, in writing, from the student's health care provider that includes all of the following information:

1. The student's name, the name and purpose of the medication, its prescribed dosage, method of administration and the frequency with which the medication may be administered;
2. Detailed seizure symptoms, including frequency, type, or length of seizures that identify when the administration of an emergency anti-seizure medication becomes necessary;
3. The circumstances under which the medication may be administered;
4. Any potential adverse responses by the student and recommended mitigation actions, including when to call emergency services, including the emergency 911 telephone number;
5. A protocol for observing the student after a seizure, including, but not limited to, whether the student should rest in the school office, whether the student may return to class, and the length of time they should be under direct observation; and
6. How and where the emergency anti-seizure medication will be stored at the school.

This plan shall be distributed to any NCSOTA personnel or volunteers responsible for the supervision or care of the student if the parent/guardian consents in writing and will be kept in a confidential file in the nurse or Director or designee's office, as applicable.

Training will occur upon volunteering and thereafter annually at no cost to the employee and will occur during regular working hours. Training will be conducted by an authorized health care professional, all training will align with any minimum standards established by the CDE, and will include:



1. Recognition of the signs and symptoms of seizures and the appropriate steps to be taken to respond to those symptoms;
2. Administration, or assisting with the self-administration of, an emergency anti-seizure medication, or a medication or therapy prescribed to treat the symptoms of seizures, seizure disorders, or epilepsy, including manual vagus nerve stimulation; and
3. Basic emergency follow-up procedures.

Any written materials used in the training shall be retained by NCSOTA. NCSOTA shall ensure that each employee who volunteers to administer anti-seizure medication in good faith will be provided defense and indemnification by NCSOTA for any and all civil liability barring gross negligence, or willful or wanton misconduct, and this information shall be reduced to writing, provided to the volunteer, and retained in the volunteer's personnel file.

Upon receipt of a parent/guardian's request to administer anti-seizure medication, NCSOTA shall distribute a notice at least once but no more than two times per school year to all staff that includes all of the following information:

1. A description of the volunteer request stating that the request is for volunteers to be trained to recognize and respond to seizures, including training to administer emergency anti-seizure medication to a student diagnosed with seizures, a seizure disorder, or epilepsy if the student is suffering from a seizure;
2. A description of the training that the volunteer will receive;
3. The right of an employee to rescind their offer to volunteer; and
4. A statement that there will be no retaliation against any individual for rescinding the individual's offer to volunteer, including after receiving training.

If a volunteer rescinds the volunteer's offer to volunteer or is no longer able to act as a volunteer for any reason, or if the placement of a student changes and the student no longer has access to a trained volunteer, an additional two notices per school year may be distributed to all staff.

Upon administration of anti-seizure emergency medication by a volunteer employee, NCSOTA's nurse shall be notified. If NCSOTA does not employ a nurse, NCSOTA's Director or designee shall be notified.

Storage and Record Keeping

- All medication will be kept in a secure and appropriate storage location and administered per an authorized health care provider's instructions by appropriately designated staff.



- Designated staff shall keep records of medication administered at NCSOTA. The medication log may include the following:
 - a. Student's name.
 - b. Name of medication the student is required to take.
 - c. Dose of medication.
 - d. Method by which the student is required to take the medication.
 - e. Time the medication is to be taken during the regular school day.
 - f. Date(s) on which the student is required to take the medication.
 - g. Authorized health care provider's name and contact information.
 - h. A space for daily recording of medication administration to the student or otherwise assisting the student in administration of the medication, such as date, time, amount, and signature of the individual administering the medication or otherwise assisting in administration of the medication.

- Designated staff shall return all surplus, discontinued, or outdated medication to the parent/guardian upon completion of the regimen or prior to extended holidays. If the medication cannot be returned, it will be disposed of at the end of the school year.