

<p style="text-align: center;">DANBURY PUBLIC SCHOOLS Danbury, Connecticut</p>	<p style="text-align: center;">REGULATIONS</p>	
<p style="text-align: center;"><i>ADMINISTRATION OF MEDICATION BY SCHOOL PERSONNEL</i></p>	<p>Approved 1/14/2004 Revised 05/2016</p>	<p>Policy No. 7-143.1</p>
<p>Definitions</p> <p>Administration of Medication means any one of the following activities: handling, storing, preparing or pouring of medication; conveying it to the student according to the medication order; observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.</p> <ol style="list-style-type: none"> 1. Advanced practice registered nurse means an individual licensed pursuant to Section 20-94a of the Connecticut General Statutes. 2. Authorized prescriber means a physician, dentist, optometrist, advanced practice registered nurse or physician assistant and, for interscholastic and intramural athletic events only, a podiatrist. 3. Before- and after-school program means any child care program operated and administered by a local or regional board of education or municipality exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes. Such programs shall not include public or private entities licensed by the Office of Early Childhood or board of education enhancement programs and extra-curricular activities. 4. Board of Education means a local or regional board of education, a regional educational service center, a unified school district, the regional vocational-technical school system, an approved private special education facility, the Gilbert School, the Norwich Free Academy, Woodstock Academy or a non-public school whose students receive services pursuant to Section 10-217a of the Connecticut General Statutes. 5. Cartridge injector means “cartridge injector” as defined in Section 10-212a of the Connecticut General Statutes. 6. Coach means an “athletic coach” as defined in Section 10-222e of the Connecticut General Statutes. 7. Controlled drugs means “controlled drugs” as defined in Section 21a-240 of the Connecticut General Statutes. 		

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<p>8. Cumulative health record means the cumulative health record of a pupil mandated by Section 10-206 of the Connecticut General Statutes.</p> <p>9. Dentist means a doctor of dentistry licensed to practice dentistry in Connecticut pursuant to Chapter 379 of the Connecticut General Statutes, or licensed to practice dentistry in another state;</p> <p>10. Director means the person responsible for the operation and administration of any school readiness program or before- and after-school program.</p> <p>11. Eligible student means a student who has reached the age of eighteen or is an emancipated minor.</p> <p>12. Error means:</p> <p>(A) the failure to do any of the following as ordered:</p> <ul style="list-style-type: none"> (1). administer a medication to an identified student; (2). administer medication within the time designated by the prescribing practitioner; (3). administer the specific medication prescribed for an identified student; (4). administer the correct dosage of medication; (5.) administer medication by the proper route; and/or (6). administer the medication according to generally accepted standards of practice; <p style="text-align: center;">or,</p> <p>(B) the administration of a medication to a student which is not ordered, or which is not authorized in writing by the parent or guardian of such student, except for the administration of epinephrine for the purpose of emergency first aid pursuant to Section 10-212a of the Connecticut General Statutes and subsection (e) of Section 10-212a-2 of the Regulations of Connecticut State Agencies.</p>		

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<p>13. Extracurricular activities means activities sponsored by local or regional boards of education that occur outside of the school day, are not part of the educational program, and do not meet the definition of before- and after-school programs and school readiness programs.</p> <p>14. Guardian means one who has the legal authority and obligations of guardianship of the person of a minor, and includes:</p> <p style="padding-left: 40px;">(1) the obligation of care and control; and</p> <p style="padding-left: 40px;">(2). the authority to make major decisions affecting the minor’s welfare, including, but not limited to, consent determinations regarding marriage, enlistment in the armed forces and major medical, psychiatric or surgical treatment;</p> <p>15. Intramural athletic events means tryouts, competition, practice, drills, and transportation to and from events that are within the bounds of a school district for the purpose of providing an opportunity for students to participate in physical activities and athletic contests that extend beyond the scope of the physical education program.</p> <p>16. Interscholastic athletic events means events between or among schools for the purpose of providing an opportunity for students to participate in competitive contests which are highly organized and extend beyond the scope of intramural programs and includes tryouts, competition, practice, drills, and transportation to and from such events.</p> <p>17. Investigational drug means any medication with an approved investigational new drug (IND) application on file with the Food and Drug Administration (FDA) which is being scientifically tested and clinically evaluated to determine its efficacy, safety and side effects and which has not yet received FDA approval.</p> <p>18. Licensed athletic trainer means a licensed athletic trainer employed by the school district pursuant to Chapter 375a of the Connecticut General Statutes.</p> <p>19. Medication means any medicinal preparation including over-the-counter, prescription and controlled drugs, as defined in Section 21a-240 of the Connecticut General Statutes.</p>		

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<p>20. Medication emergency means a life-threatening reaction of a student to a medication;</p> <p>21. Medication plan means a documented plan established by the school nurse in conjunction with the parent and student regarding the administration of medication in school. Such plan may be a stand-alone plan, part of an individualized health care plan, an emergency plan, or a medication administration form.</p> <p>22. Medication order means the written direction by an authorized prescriber for the administration of medication to a student which shall include the name of the student, the name and generic name of the medication, the dosage of the medication, the route of administration, the time of administration, the frequency of administration, the indication for medication, any potential side effects including overdose or missed dose of the medication, the start and termination dates not to exceed a 12-month period and the written signature of the prescriber;</p> <p>23. Nurse means an advanced practice registered nurse, a registered nurse or a practical nurse licensed in Connecticut pursuant to Chapter 378 of the Connecticut General Statutes.</p> <p>24. Occupational therapist means an occupational therapist employed full time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376a of the Connecticut General Statutes.</p> <p>25. Optometrist means an optometrist licensed to provide optometry pursuant to Chapter 380 of the Connecticut General Statutes;</p> <p>26. Paraprofessional means a health care aide or assistant or an instructional aide or assistant employed by the local or regional board of education who meets the requirements of such board for employment as a health care aide or assistant or instructional aide or assistant;</p>		

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<p>27. Physical therapist means a physical therapist employed full time by the local or regional board of education and licensed in Connecticut pursuant to Chapter 376 of the Connecticut General Statutes;</p> <p>28. Physician means a doctor of medicine or osteopathy licensed to practice medicine in Connecticut pursuant to Chapters 370 and 371 of the Connecticut General Statutes, or licensed to practice medicine in another state;</p> <p>29. Physician assistant means an individual licensed to prescribe medications pursuant to Section 20-12d of the Connecticut General Statutes;</p> <p>30. Podiatrist means an individual licensed to practice podiatry in Connecticut pursuant to Chapter 375 of the Connecticut General Statutes;</p> <p>31. Principal means the administrator in the school;</p> <p>32. Qualified medical professional means “qualified medical professional”, as defined in Section 10-212a of the Connecticut General Statutes; a physician licensed under Chapter 370, an optometrist licensed to practice optometry under Chapter 380, an advanced practice registered nurse licensed to prescribe in accordance with Section 20-94a or a physician assistant licensed to prescribe in accordance with Section 20-12d.</p> <p>33. Qualified personnel for schools means (a) a full-time employee who meets the local or regional board of education requirements as a principal, teacher, occupational therapist or physical therapist and has been trained in the administration of medication in accordance with Section 10-212a-3 of the state regulations; (b) a coach and licensed athletic trainer who has been trained in the administration of medication pursuant to Section 10-212a-8 of the state regulations; or (c) a paraprofessional who has been trained in the administration of medication pursuant to Section 10-212a-9 of the state regulations. For school readiness programs and before- and after-school programs, directors or director’s designee, lead teachers and school administrators who have been trained in the administration of medication may administer medications pursuant to Section 10-212a-10 of the state regulations.</p>		

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<p>34. Qualified school employee means a principal, teacher, licensed athletic trainer, a licensed occupational or physical therapist employed by a school district, coach or school paraprofessional as defined in Connecticut General Statutes 10-212a.</p> <p>35. Research or study medications means FDA-approved medications being administered according to an approved study protocol. A copy of the study protocol shall be provided to the school nurse along with the name of the medication to be administered and the acceptable range of dose of such medication to be administered;</p> <p>36. School means any educational program which is under the jurisdiction of the Board of Education, excluding extracurricular activities.</p> <p>37. School medical advisor means a physician appointed pursuant to Section 10-205 of the Connecticut General Statutes 10-205.</p> <p>38. School nurse means a nurse appointed pursuant to Section 10-212 of the Connecticut General Statutes.</p> <p>39. School nurse supervisor means the nurse designated by the local or regional board of education as the supervisor or, if no designation has been made by the board, the lead or coordinating nurse assigned by the board;</p> <p>40. School readiness program means a program that receives funds from the State Department of Education for a school readiness program pursuant to subsection (b) of Section 10-16p of the Connecticut General Statutes and exempt from licensure by the Office of Early Childhood pursuant to subdivision (1) of subsection (b) of Section 19a-77 of the Connecticut General Statutes.</p> <p>41. Self-administration of medication means the control of the medication by the student at all times and is self managed by the student according to the individual medication plan.</p> <p>42. Supervision means the overseeing of the process of the administration of medication in School.</p>		

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43. **Teacher** means a person employed full time by a board of education who has met the minimum standards as established by that board of education for performance as a teacher and has been approved by the school medical advisor and school nurse to be designated to administer medications pursuant to Sections 10-212a-1 through 10-212a-7 of the Regulations of Connecticut State Agencies.

General Procedures on the Administration of Medication by a Qualified School Nurse and Qualified School Personnel

Prescribed medications may be administered by a qualified school nurse, or in the absence of a licensed nurse, qualified personnel for schools.

- A. Medication shall be administered only 1) when there is a written order from an authorized prescriber, 2) written authorization from a parent or guardian, or eligible student, 3) written permission of the parent or guardian for the exchange of information between the prescriber and the school nurse to ensure the safe administration of such medications.
- B. Prescribed medication shall be administered to and taken by only the person for whom the prescription has been written.
- C. Qualified personnel for school may administer oral, topical, intranasal or inhalant medication only after proper training in the administration of medication. Investigational drugs or research or study medications may not be administered by qualified personnel for schools.
- D. Medications, including medication administered with a cartridge injector may only be administered by qualified personnel for schools or paraprofessionals, to students with a medically diagnosed allergic condition which may require prompt treatment to protect student against serious harm or death; if they have been properly trained in the administration of a cartridge injector.

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<p>F. Coaches and licensed athletic trainers may administer medications during intramural and interscholastic events for select students for whom self-administration plans are not viable only for 1) inhalant medications required to treat respiratory conditions and 2) medications administered with a cartridge injector for students with a medically diagnosed allergic condition.</p> <p>G. Acetaminophen may be administered by the school nurse to students with written permission from a parent or guardian, and with an order from an authorized prescriber.</p> <p>H. Investigational drugs, research or study medications can only be administered by a qualified school nurse.</p> <p>I. All controlled drugs currently listed in Schedule 2 through 5 of the Regulations of Connecticut State Agencies, Section 21a-24b-8 through 21a-24b-11 may be administered in school.</p> <p>J. Prior to each time a medication is administered, the following 5 “R’s” are checked:</p> <p style="padding-left: 40px;">Right Start: Student will independently state name for the qualified nurse or qualified school personnel administering the medication. If there remains any question as to the student’s identity or if the student is non-verbal, identity must be verified by a PowerSchool picture or by verbal confirmation from the classroom teacher.</p> <ol style="list-style-type: none"> 1. Right student 2. Right medication 3. Right dosage 4. Right time 5. Right route <p>K. The following emergency information will be available in each health office in the event of a medication emergency:</p> <ol style="list-style-type: none"> 1. Poison control Number: 1-800-222-1222 2. Students healthcare provider number 3. Person responsible for decision making in the absence of the school nurse <p>Legal Reference: Connecticut General Statutes Section 10-212a-2</p>		

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TRAINING IN THE ADMINISTRATION OF MEDICATION BY SCHOOL PERSONNEL

- A. The qualified personnel for schools, in the absence of a school nurse who administer medications shall be trained in the correct method of administration, safe handling, storage and documentation of medication administration.
- B. Training of qualified personnel for school shall include specific information related to each student’s medication, and each student’s medication plan including the name and generic name of the medication, indications for medication, dosage, routes, time and frequency of administration, therapeutic effects of the medication, potential side effects, overdose or missed dose of the medication, and when to implement emergency interventions.
- C. Training shall be conducted at least annually by the school nurse or medical advisor. Such training shall be annually reviewed and updated. A list of trained personnel will be maintained by the Board of Education.
- D. Documentation of administration of medication training shall be maintained and include, 1) dates of training, 2) content of training, 3) individuals who have successfully completed medication training for the current year and, 4) names and credentials of nurse trainer or trainers.

Qualified school employees who administer epinephrine as emergency first aid to students who experience allergic reactions and who do not have prior written authorization of a parent or guardian or written order of a qualified medical professional for the administration of epinephrine shall, annually complete the training program developed by the Departments of Education and Public health, in consultation with the School Nurse Advisory Council, pursuant to Section 10-212g of the Connecticut General Statutes and training in cardiopulmonary resuscitation (CPR) and first aid.

(Legal Reference: Connecticut General Statutes - 10-2 12a 3)

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SUPERVISION

The school nurse is responsible for the general supervision of the administration of medications by the qualified school personnel that have been designated to administer medication. The duty of supervision includes but is not limited to the following:

The school nurse shall be available on a regular basis to:

1. Provide training to qualified school staff and other nursing personnel on an annual basis and assess that the qualified personnel are qualified and competent to administer medications;
2. Review with personnel responsible for administering medications
 - proper handling and storage of medications;
 - proper documentation;
 - developing a communication system for
 - ✓ questions about medication;
 - ✓ any change in behavior or physical status;
 - ✓ any error in the administration of medication;
 - ✓ changes in appearance of medication;
 - ✓ failure of a student to comply with the medication protocol;
 - ✓ missing medications.
3. Be responsible for :
 - observing qualified school personnel giving medications for the first time and providing appropriate follow-up, at least twice yearly, to assure continued competence;
 - reviewing all documentation of medications on a monthly basis;
 - observing the effects of medication, especially medication given to alter classroom behavior;
 - communicating with the prescribing physician/authorized medical prescriber.
4. Conduct periodic reviews, as needed, with licensed nursing personnel and qualified personnel for schools, regarding the needs of any student receiving medications.

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<p>5. Complete the following tasks prior to a student receiving medication in school:</p> <ul style="list-style-type: none"> • review the medication authorization form; • check the medication bottle for the proper labeling; • check the contents of the bottle to be sure it is the proper medication and document the amount of medication on the medication log; • initiate the individual medication log; • set up the schedule for giving the medication; • knowledge of the schedule shall include the person responsible for administering the medication, the teacher and the student. <p>(Legal Reference: Connecticut General Statutes 10-212a7)</p> <p>SELF ADMINISTRATION OF MEDICATIONS</p> <p>The Board of Education shall permit those students who have a verified chronic medical condition and are deemed capable to self administer prescribed emergency medication, including rescue asthma inhalers and cartridge injectors for medically-diagnosed allergies, to self administer such medication, and may permit such students to self administer other medications as defined in section 10-212a-4 of the Regulations of Connecticut State Agencies, provided:</p> <ul style="list-style-type: none"> A. An authorized prescriber provides a written medication order including the recommendation for self administration. B. Written permission is provided from the parent or guardian or eligible student, allowing self-administration. 		

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<p>C. The school nurse has evaluated the situation and documented on the student's cumulative health record that self-administration is safe and appropriate including that the student:</p> <ol style="list-style-type: none"> 1. Is capable of identifying and selecting the appropriate medication by size, color, amount or other label identification; 2. Knows the frequency and time of day the medication is ordered; 3. Can identify the presenting symptoms that require medication; 4. Administers the medication appropriately; 5. Maintains safe control of the medication at all times; 6. Seeks adult supervision whenever warranted; 7. Cooperates with the medication plan; 8. The school nurse has reviewed the medication order and parental authorization, developed an appropriate plan for self administration, including provisions for general supervision and documented the plan in the students' health record. The plan will be shared with the principal and teachers as appropriate; 9. Medication is transported by the student to the school and maintained under the student's control at all times; 10. Self administration of controlled substances, as defined in section 10-212a-1 of the Regulation of Connecticut State Agencies, may be considered for extraordinary situations, such as international field trips, and will be approved by the coordinator of health services and medical advisor in advance and an appropriate plan will be developed. 11. In the case of inhalers for asthma and cartridge injectors for medically diagnosed allergies, the school nurse's review of a students competency to self administer inhalers for asthma and cartridge injectors for medically diagnosed allergies in the school setting shall not be used to prevent a student from retaining and self administering inhalers for asthma and cartridge injectors for medically diagnosed allergies. The parent/guardian and authorized prescriber shall be notified by the school nurse if there is a question or concern about the student's competency to carry and self administer an inhaler and/or cartridge injector. The notification will be documented in writing in the student's health record. 12. Students may self administer medication with only the written authorization of an authorized provider and written authorization from a parent or guardian or eligible student. 13. Student is advised regarding Board of Education Policy for medication administration. <p>(Legal Reference: Connecticut General Statutes - 10-2 12a 4)</p>		

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HANDLING STORAGE AND DISPOSAL OF MEDICATIONS

- A. All medications, except those approved for self medication and epinephrine to be used for the purpose of emergency first aid to students who do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine, shall be delivered by the parent, guardian, or other responsible adult to the school nurse, or in the absence of such nurse, other qualified school personnel for schools trained in the administration of medication and assigned to the school.

- B. The nurse shall examine on-site any new medication, medication order and parent authorization and, except for epinephrine to be used for the purpose of emergency first aid to students who do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of epinephrine, develop an administration medication plan for the student before any medication is administered by any school personnel.

- C. The school nurse shall review all medication refills with the medication order and parent authorization prior to the administration of medication, except for epinephrine intended for emergency administration to students who do not have a written prior authorization order.

- D. All medications shall be properly stored as follows:
 - 1. Except as other wise determined by a student’s emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled, and readily accessible cabinet or container in the health room during school hours under the general supervision of the school nurse, or in the absence of the school nurse, the principal or principal’s designee who has been trained in the administration of medication;

 - 2. Emergency medications will be locked beyond the regular school day or program hours, except as determined by the emergency care plan;

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3. All other non-controlled medications, except those approved for self-medication, shall be kept in a designated locked container, cabinet, or closet used exclusively for the storage of medication;

4. In the case of controlled substances, they shall be stored separately from other medications in a separate, secure, substantially constructed, locked metal or wood cabinet pursuant to Section 21a-262-8 of the Regulations of Connecticut State Agencies.

E. Access to all stored medications shall be limited to persons authorized to administer medications. Each school or before-and after-school program and school readiness program shall maintain a current list of those persons authorized to administer medications.

F. All medications, prescription and non-prescription, shall be delivered and stored in their original containers.

G. At least two sets of keys for the medication containers or cabinets shall be maintained for each school building or before-and-after school program and school readiness program. One set of keys shall be maintained under the direct control of the school nurse or nurses and an additional set shall be under the direct control of the principal, and if necessary, the program director or lead teacher who has been trained in the general principles of the administration of education shall also have keys.

H. Medications requiring refrigeration shall be stored as follows:

1. In a refrigerator no less than 36 degrees F and no more than 46 degrees F;
2. The refrigerator shall be located in a health office that is maintained for health services purposes with limited access;
3. Non-controlled medications may be stored directly on the shelf of the refrigerator with no further protection needed;
4. Controlled medications shall be stored in a locked box which is affixed to the refrigerator shelf.

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- I. All unused, discontinued or obsolete medications shall be removed from storage areas and either returned to the parent or guardian, or if the medication cannot be returned to the parent or guardian, the medication shall be destroyed in collaboration with the school nurse:
1. non-controlled drugs shall be destroyed in the presence of at least one (1) witness;
 2. controlled drugs shall be destroyed pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies;
 3. accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue and jointly documented on the student medication administration record and on a medication error form pursuant to Section 10-12a (b) of the Connecticut General Statutes. If no residue is present, notification must be made to the Department of Consumer protection (DCP) pursuant to Section 21-a-262-3 of the Regulations of the Connecticut state Agencies.
- J. No more than a three month supply of a medication for a student shall be stored at the school.
- K. No medication for a student shall be stored at a school without a current written order from an authorized prescriber.

(Legal Reference: Connecticut General Statutes - 10-212a- 5)

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<p>DOCUMENTATION AND RECORD KEEPING</p> <p>A. Each school or before-and after-school program and school readiness where medications are administered shall maintain a medication administration record for each student who receives medication during school hours.</p> <p>Medication administration records shall include:</p> <ol style="list-style-type: none"> 1. student's name; 2. name of medication; 3. dosage of medication; 4. the dose or amount of medication administered; 5. route of administration; 6. frequency of administration; 7. name of authorized prescriber; 8. the dates for initiating and terminating the administration of the medication including extended year programs; 9. the quantity received verified by the adult delivering the medication; 10. the date the medication is to be reordered; 11. any student allergies to food and/or medicine; 12. the date and time of administration or omission, including reason for omission; 13. the full written or electronic legal signature of person administering medication; 14. a recording in the electronic record of the controlled substance count that is verified once a week; 15. for schools without electronic records, a controlled medication count should be conducted and documented at least once a week and co-signed by the nurse and a witness. <p>B. Transactions shall either be recorded in ink and shall not be altered or shall be recorded electronically in a record that cannot be altered.</p> <p>C. The medication record shall be made available to the Department of Health for review until destroyed pursuant to Section 11-8a and Section 10-212a (b) of the Connecticut General Statutes for controlled medications.</p>		

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- D. The completed medication administration record for non-controlled medications, at the discretion of the school district, may be destroyed in accordance with Section M8 of the Connecticut Municipality Record Retention Schedule so long as it is superseded by a summary on the student health record;
- E. The completed medication administration record for controlled medications shall be maintained in the same manner as the non-controlled medications. In addition, a separate medication administration record needs to be maintained in the school for three years pursuant to Section 10-212a (b) of the Connecticut General Statutes.
- G. The written order of the authorized prescriber, the written authorization of the parent or guardian to administer the medication, and the written parental permission for the exchange of information by the prescriber and school nurse to ensure the safe administration of such medication shall be filed in the student's cumulative health record, or before-and after-school programs and school readiness programs, in the child's program record.
- H. An authorized prescriber's verbal order, including a telephone order, for a change in any medication order can be received only by a school nurse. Any such verbal order shall be followed by a written order, which may be faxed, and shall be received no later than three (3) school days.

PROCEDURE FOR ERRORS IN THE ADMINISTRATION OF MEDICATIONS

- A. In the event of a medication administration error, the following protocol shall be followed:
 - 1. determine the potential for injury;
 - 2. call 911 if indicated;
 - 3. call the Poison Control Center if applicable, (1-800-222-1222);
 - 4. follow directions of Poison Control, document who was spoken to, time the call was made, what directions were given, and what actions were taken.
 - 5. any such error shall be reported immediately to the school nurse, the Health Services Coordinator, and the parent or guardian;
 - 6. monitor student until EMS arrives, if applicable
 - 7. complete the Medication Error Report;

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<p>8. any error in the administration of a medication shall be documented in the student’s cumulative health record, or for before-and after-school programs and school readiness programs, in the child’s program record.</p> <p>A. Medication Error Definition: Failure to do any of the following as ordered:</p> <ol style="list-style-type: none"> 1. administer the medication to the student; 2. administer medication within the time designated by the authorized prescriber; 3. administer the specific medication prescribed for a student; 4. administer the correct dosage of medication; 5. administer the medication by the proper route; 6. administer medication according to generally accepted nursing practice or pharmacological standard. <p>(Legal Reference: Connecticut General Statutes 10-212a- 6)</p> <p>MEDICATION TO BE ADMINISTERED ON FIELD TRIPS</p> <ol style="list-style-type: none"> A. The school nurse may prepare a single dose of medication, place it in an appropriate labeled envelope and give it to the qualified school personnel designated to administer the medication during a field trip. B. Proper training guidelines for administration of medications apply. C. The qualified school personnel who administer the single dose of medication must document this on the individual medication administration record. D. Any medication transported on a field trip will be stored in a safe manner, either on the person who will administer the medication or in a locked box placed in a safe location. 		

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ADMINISTRATION OF MEDICATIONS BY PARAPROFESSIONALS

Except for administration of cartridge injectors as emergency first aid as provided in subsection (e) of Section 10-212a-2 of the Regulations of Connecticut State Agencies, paraprofessionals, in the absence of a school nurse, may only administer medications to a specific student in order to protect that student from harm or death due to a medically diagnosed allergic condition according to the following:

- A. With the approval of the school medical advisor and school nurse, in conjunction with the Coordinator of Health Services, and under the supervision of the school nurse;
- B. With proper medication authorization from the authorized provider;
- C. With parental permission to administer the medication in school;
- D. With medications necessary for prompt treatment of an allergic reaction using a cartridge injector;
- E. With proper training and supervision from the school nurse which shall include all elements of medication training.

ADMINISTRATION OF MEDICATIONS BY COACHES AND LICENSED ATHLETIC TRAINERS DURING INTRAMURAL AND INTERSCHOLASTIC EVENTS

During intramural and interscholastic athletic events, a coach or licensed athletic trainer may administer medication for select students for whom self administer plans are not viable options as determined by the school nurse for inhalant medications prescribed to treat respiratory conditions and medications administered with a cartridge injector for students with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death provided the following requirements have been met:

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A. The coach or licensed athletic trainer shall be trained in:

1. The general principals of the administration of medication applicable to receiving, storing and assisting with inhalant medications or cartridge inject medications and documentation

B. The school nurse shall provide a copy of the authorized prescriber’s order and the parental permission form to the coaches

C. The parent or guardian shall provide to the coach or licensed athletic trainer the medication in accordance with the regulations for bringing medications to school. This medication shall be stored separately from the medication stored in the school health office for use during the school day.

D. The coach or licensed athletic trainer shall agree to the administration of emergency medication and shall implement the following:

1. Medication shall be stored in containers for the exclusive use of holding medication.
2. Medication shall be stored in a container that preserves the integrity of the medication.
3. Medication shall be stored in a locked and secured cabinet when not in use at athletic events.

E. Errors in the administration of medication by a coach or athletic trainer shall be handled in the same way as other medication errors.

F. Documentation of any administration of medication by a coach or licensed athletic trainer shall be on a separate medication administration record and maintained in the athletic department and submitted to the school nurse at the end of the school nurse

G. Administration of cartridge injector medication shall be reported to the school nurse at the earliest possible time but no later than the next school day. All other medication administration shall be reported to the school nurse at least monthly.

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ADMINISTRATION OF MEDICATION IN BEFORE AND AFTER SCHOOL PROGRAMS

A. On an annual basis the Before and After school administrator in collaboration with the Coordinator of Health Services will determine the level of nursing services needed including the administration of medication plans in these programs.

B. Administration of medication shall only be provided when it is medically necessary for students to access the program and maintain their health status while participating in the program.

C. Directors, lead teachers, or the director’s designee may administer oral, topical, intranasal or inhalant medications.

D. Training in medication administration shall be done by a licensed school nurse annually and will include all components of training of qualified school personnel who administer medication in school.

E. No medication shall be administered without: 1) the written order of an authorized provider
2) the written authorization of a parent or guardian or an eligible student

F. Self administration shall be permitted for those students who have a verified chronic medical condition, and an authorized prescriber provides a written medication order including the guardian or eligible student

G. Cartridge injector medications may be administered by a director, or director’s designee, lead teacher only to a student with a medically diagnosed allergic condition which may require prompt treatment to protect the student against serious harm or death

H. Investigational drugs or research or study medication may not be administered by directors or director’s designee, lead teachers or school administrators

I. Controlled drugs may be administered in before and after school programs

J. Self administration will be allowed for students with a verified chronic medical condition and are deemed capable to self administer prescribed emergency medication, including rescue asthma inhalers and cartridge injectors for medically-diagnosed allergies, to self administer such medication, and may permit such students to self administer other medications, excluding controlled drugs as defined in section 10-212a-1 of the regulations of Connecticut State Agencies, provided: The program will follow the same procedures as regulated during the school day.

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ADMINISTRATION OF MEDICATION IN BEFORE AND AFTER SCHOOL PROGRAMS

K. Whenever possible a separate supply of medication shall be stored according to the regulations during the school day. In the event that a parent cannot supply a separate medications provisions will be made by the school nurse to ensure the timely transfer of medication from the nurse’s office to the program and back on a daily basis.

L. Documentation of medication administration shall be recorded on administration of administration forms and maintained in the program until the end of the school year when it will be submitted to the school nurse and filed in the cumulative health record or summarized I the electronic record.

M. Administration of medication with a cartridge injector shall be reported to the school nurse at the earliest convenience; all other administration of medications shall be reported to the school nurse monthly with a copy of the administration of medication record.

N. Supervision of medication administration shall be conducted at least twice yearly by the school nurse following the same regulations as during the school day.

(Legal ref. - 4-16-90: letter - State Health Department)

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<p>ADMINISTRATION OF GLUCAGON</p> <ol style="list-style-type: none"> 1. With the written authorization of a student’s parent or guardian, and pursuant to a written order of the student’s physician licensed under chapter 370, a school nurse or a school principal shall select, and a school nurse shall provide general supervision to a qualified school employee to administer medication with injectable equipment used to administer glucagon to a student with diabetes that may require prompt treatment in order to protect the student against serious harm or death. 2. Such authorization shall be limited to situations when the school nurse is absent or unavailable. 3. No qualified school employee shall administer glucagon unless <ol style="list-style-type: none"> A. Such qualified school employee annually completes any training required by the school nurse and school medical advisor in the administration of medication with injectable equipment used to administer glucagon; B. The school nurse and school medical advisor have attested in writing that such qualified school employee has completed such training; C. Such qualified school employee voluntarily agrees to serve as a qualified school employee 4. “Injectable equipment used to administer glucagon” means an injector or injectable equipment used to deliver glucagon in an appropriate dose for emergency first aid response to diabetes. 5. For purposes of this subsection, “qualified school employee” means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach, or school paraprofessional. <p>(Legal Reference Public Act No. 15-215)</p>		

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<p>ADMINISTRATION OF ANTIEPILEPTIC MEDICATION</p> <p>1. With the written authorization of a student’s parent or guardian and pursuant to the written order of a physician licensed under chapter 370, a school nurse and a school medical advisor shall select, and a school nurse shall provide general supervision to a qualified school employee to administer antiepileptic medication, including by rectal syringe, to a specific student with a medically diagnosed epileptic condition that requires prompt treatment in accordance with the student’s individual seizure action plan.</p> <p>2. Such authorization shall be limited to situations when a school nurse is absent or unavailable.</p> <p>3. No qualified school employee shall administer antiepileptic medication unless</p> <ul style="list-style-type: none"> A. such qualified school employee annually completes the training program developed by the Department of Education in consultation with the School Nurse Advisory Council (Connecticut General Statutes 10-212a (f); B. the school nurse and school medical advisor have attested in writing that such qualified school employee has completed such training; C. such qualified school employee receives monthly reviews by the school nurse to confirm such qualified school employee’s competency to administer antiepileptic medication; D. such qualified school employee voluntarily agrees to serve as a qualified school employee; <p>4. For purposes of this subsection, a “qualified school employee” means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach, or school paraprofessional.</p>		

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**EMERGENCY ADMINISTRATION OF EPINEPHRINE CARTRIDGE INJECTORS AS
EMERGENCY FIRST AID TO STUDENTS WHO DO NOT HAVE PRIOR WRITTEN
AUTHORIZATION**

1. A school nurse, or in the absence of a school nurse, a qualified school employee shall maintain epinephrine in cartridge injectors for the purpose of emergency first aid to students who experience allergic reactions and do not have a prior written order of a qualified medical professional for the administration of epinephrine. Each school must maintain a stock of epinephrine cartridge injectors for this purpose.
2. A school nurse or a school principal shall select qualified school employees to administer such epinephrine and there shall be at least one such qualified school employee on the grounds of the school during scheduled school hours in the absence of a school nurse. This does not include after school activities or field trips.
3. Handling, storage, and disposal of epinephrine injection cartridges shall be in accordance with district policy and regulations for medication administration.
4. No qualified school employee shall administer epinephrine under this subdivision unless such qualified school employee has completed the annual training program developed by the Departments of Education and Public Health as described in the Connecticut General Statutes Section 10-212a and training in cardiopulmonary resuscitation and first aid.
5. Selected eligible qualified school employees must voluntarily agree to serve and be trained as a qualified school employee.
6. The parent or guardian of a student may submit in writing to the school nurse and school medical advisor that epinephrine shall not be administered to such student under this subdivision. The notice will be valid for one school year if submitted prior to the start of the school year, or for the remainder of the school year in which the notice is provided. The District will annually notify parents and guardians of the need to provide such written notice. Such notification will be included in the annual district mailing to parents and guardians prior to the start of each school year.

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7. Trained qualified school employees who will administer epinephrine cartridges under this statute will be notified by the school nurse of student’s whose parent or guardian has refused the emergency administration of epinephrine by written notice as described above. A written list of student names whose parent/guardian has opted out of emergency epinephrine administration by a qualified school employee will be posted on the inside of the emergency stock epinephrine box.
8. In the event of the absence or unavailability of the school nurse, the trained qualified school employee responsible for the administration of epinephrine as emergency first aid to a student without prior written parent or guardian authorization or a prior written medical order, will be notified by the school administrator when notified by the Coordinator of Health Services or the Coordinator of Health Services designee.
9. For the purposes of this subsection, a “cartridge injector” means an automatic prefilled cartridge injector or similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.
10. A “qualified school employee” means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach, or school paraprofessional.
11. a “qualified medical professional” means a physician licensed under Chapter 370, an optometrist licensed to practice optometry under Chapter 380, an advanced practice registered nurse licensed to practice in accordance with Section 20-94a, or a licensed physician assistant licensed to prescribe In accordance with Section 20-12d.

LEGAL REFERENCES

Connecticut General Statutes

- Section 10-212a-1 Definitions
- Section 10-212a-2 Administration of Medications
- Section 10-212a-3 Training of School Personnel
- Section 10-212a-4 Self Administration of Medications
- Section 10-212a-5 Handling, Storage and Disposal of Medications
- Section 10-212a-6 Documentation and Record Keeping
- Section 10-212a-7 Supervision
- Section 10-212a-9 Administration of Medications by Paraprofessionals Pursuant to
Section 10-212a (d) of the Connecticut General Statutes
- Section 10-212a-10 Administration of Medication in School Readiness Programs and
Before-and- After School Programs

Public Act No. 15-215 An Act Concerning Various Revisions and Additions to the
Education Statutes