

Book	Policy Manual
Section	Issue 3 of 2023 September READY FOR OSBA
Title	Administering Medicines to Students (Version 1)
Code	JHCD
Status	

****This is the OSBA sample policy.****

Administering Medicines to Students
(Version 1)

Many students are able to attend school regularly only through effective use of medication in the treatment of disabilities or illnesses that do not hinder the health or welfare of others. If possible, all medication should be given by the parent(s) at home. If this is not possible, it is done in compliance with the following.

1. Only employees of the Board who are licensed health professionals, or who are appointed by the Board and have completed a drug administration training program meeting State law requirements, conducted by a licensed health professional and considered appropriate by the Board, can administer prescription drugs to students.
2. The school nurse or an appropriate person appointed by the Board supervises the secure and proper storage and dispensation of medications. The drug must be received in the container in which it was dispensed by the prescribing physician or others licensed to prescribe medication.
3. Written permission must be received from the parent(s) of the student, requesting that the school nurse or an appropriate person comply with the physician's order.
4. The school nurse or other designated individual must receive and retain a statement which complies with State law and is signed by the physician who prescribed the drug or other person licensed to prescribe medication.
5. The parent(s) must agree to submit a revised statement, signed by the physician or other licensed individual who prescribed the drug, to the nurse or other designated individual if any of the information originally provided by the physician or licensed individual changes.
6. No employee who is authorized by the Board to administer a prescribed drug and who has a copy of the most recent statement is liable in civil damages for administering or failing to administer the drug, unless he/she acts in a manner which would constitute "gross negligence or wanton or reckless misconduct."
7. No person employed by the Board is required to administer a drug to a student except pursuant to requirements established under this policy. The Board shall not require an employee to administer a drug to a student if the employee objects, on the basis of religious convictions, to administering the drug.

Inhalers for Asthma

Students have the right to possess and use a metered-dose inhaler or a dry-powder inhaler to alleviate asthmatic symptoms or before exercise to prevent the onset of asthmatic symptoms. The right applies at school or at any activity, event or program sponsored by or in which the student's school is a participant.

In order for a student to possess the inhaler, he/she must have written approval from the student's physician and parent or other caretaker. The principal and/or the school nurse must have received copies of these required written approvals.

Epinephrine Autoinjectors

Students are permitted to carry and use an epinephrine autoinjector (epipen) to treat anaphylaxis (severe allergic reactions). The right to carry and use an epipen extends to any activity, event or program sponsored by the student's school or activity, event or program in which the school participates.

Student possession of an epipen is permitted only if the student has written approval from the prescriber of the medication and, if a minor, from his/her parent. Written approval must be on file with the principal and, if one is assigned, the school nurse. In addition, the principal or school nurse must receive a backup dose of the medication from the parent or student.

Diabetes Medication

If a student's treating physician determines a student with diabetes is capable of performing diabetes care tasks, the student is permitted to attend to the self-care and management of his/her diabetes during regular school hours, and at school-sponsored activities upon written request from the student's parent/guardian or other person having care or charge of the student. Students may perform these tasks in the classroom, in any area of the school or school grounds, and at any school-sponsored activity. Students are permitted to possess, at all times, the necessary supplies and equipment to perform the tasks in accordance with the student's treating physician's orders. This right may be revoked if the student performs any care tasks or uses medical equipment for purposes other than the student's own care. The student is provided with a private area for performing self-care tasks if requested by the student, student's parent/guardian or other person having care or charge of the student.

Seizure Medication

If a student has an active seizure disorder diagnosis, the school nurse, or another school employee if the school does not employ a nurse, will create an individualized seizure action plan for that student in accordance with State law. The action plan must include information on how to administer prescribed seizure drugs to the student and school districts must designate at least one employee in each school building aside from a school nurse to be trained every two years on implementing seizure action plans, including training in administering seizure drugs.

Legal References:

ORC 2305.23
ORC 2305.231
ORC 3313.64
ORC 3313.7112
ORC 3313.7117
ORC 3313.712
ORC 3313.713
ORC 3313.716
ORC 3313.718
ORC 3314.03
ORC 3314.141
OAC 3301-35-06

Cross References

EBBA, First Aid
JFCH, Alcohol Use by Students
JFCI, Student Drug Abuse

NOTE: This policy must be accompanied by regulations formally adopted by the Board, which enumerate in more specific terms the requirements of Ohio Revised Code Section (RC) 3313.713.

Beginning July 1, 2011, House Bill (HB) 009 permits only employees of the Board who are licensed health professionals, or who have completed a drug administration training program conducted by a licensed health professional and considered appropriate by the Board, to administer prescription drugs to students in school districts.

The law grants boards the continued authority to outright prohibit any employee, including licensed health professionals, from administering any prescription drugs to students, or to prohibit administration of drugs that require certain procedures, such as injections.

Students With Diabetes

HB 264 (2014), effective September 11, 2014, requires districts to ensure that each student with diabetes who is enrolled in the District receives appropriate and needed diabetes care in accordance with an order signed by the student's treating physician, and in accordance with State law. These requirements appear in RC 3313.7112, and include specific training requirements for nonlicensed health professionals who perform diabetes care tasks for such students — including administration of medications. Within 14 days of receipt of an order signed by a student's treating physician, the Board must inform the student's parent/guardian or other person having care or charge of the student that the student may be entitled to a 504 plan regarding the student's diabetes. If a student has a 504 plan, the specific provisions of State law may be integrated into this student's plan. However, there is no requirement that a student has to have a 504 plan to receive the necessary care outlined.

If the required statutory criteria are met, a student may manage his/her care within the classroom, and all other areas of the school, and possess the equipment and supplies necessary for this care. A student with diabetes must be permitted to attend the school to which he/she would be assigned if the student did not have diabetes, and care must be provided at the school in accordance with the provisions of RC 3313.7112.

A district cannot compel or require employees to complete the statutory trainings, and cannot discipline employees for refusing to be trained. HB 367 (2014) allow a board of education to contract with an educational service center (ESC) for a school nurse, registered nurse or licensed practical nurse employed by the ESC to provide diabetes care to students in the District.

Annually, by December 31, the District must report to the Ohio Department of Education the number of enrolled students with diabetes during the previous school year, and the number of errors associated with administration of diabetes medication during the previous school year.

HB 33 (2023), effective October 3, 2023, requires public school districts and chartered nonpublic schools to create an individualized seizure action plan for every student with an active seizure disorder diagnosis. The new provision also includes training requirements for school staff on implementation of the plan and administration of prescribed seizure disorder drugs to students subject to an individualized seizure action plan. In addition to a written request from the student's parent(s), guardian(s) or other person(s) in charge of the student to have one or more prescribed seizure drugs administered to him/her, seizure action plans must also include drug information from the student's treating practitioner and any other component required by the State Board of Education (BOE).

THIS IS A REQUIRED POLICY

Legal

- [ORC 2305.23](#)
- [ORC 2305.231](#)
- [ORC 3313.64](#)
- [ORC 3313.7112](#)
- [ORC 3313.7117](#)
- [ORC 3313.712](#)
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