



## **Medication Policy (2025–2026)**

The Hilltown Cooperative Charter Public School Board of Trustees approves the following policies governing administration of medications in the schools under its jurisdiction, based on [105 CMR 210.000](#).

### **Management of the Medication Administration Program**

The school nurse shall be the supervisor of the medication administration program in the school.

### **Medication Orders / Parental Consent**

1. Medication Orders from a Licensed Prescriber
  - The school nurse shall ensure there is a proper medication order from a licensed prescriber, renewed as necessary, including at the beginning of each academic year.
  - Telephone or verbal orders may be received only by the school nurse and must be followed by a written order within three school days.
  - Whenever possible, the order shall be obtained, and the plan developed before the student enters or reenters school.
2. a. In accordance with standard medical practice, a medication order from a licensed prescriber shall include:
  - Student's name
  - Name and signature of prescriber, with business and emergency phone numbers
  - Name of medication
  - Route, dosage, frequency, and time of administration
  - Date of order and discontinuation date
  - Diagnosis or condition requiring medication (if deemed confidential)
  - Specific directions for administration
3. b. Every effort shall be made to obtain from the licensed prescriber the following additional information, if appropriate:
  - Side effects, contraindications, adverse reactions

- Other medications the student is taking
  - Date of next scheduled visit
4. c. Special Medication Situations
- *For Short-term medications (those requiring administration for ten school days or fewer):* pharmacy-labeled containers may be used in lieu of prescriber's order (nurse may request written order if needed).
  - *Over-the-counter medications:* nurse follows Board of Registration in Nursing protocols.
  - *Investigational new drugs:* may be administered in the school with a written order by a licensed prescriber, parent/guardian written consent, and pharmacy-labeled container for dispensing. If there is a question, the school nurse may seek consultation and/or approval from the school physician to administer the medication.
5. The school nurse shall ensure that there is written authorization by the parent/guardian which contains:
- Printed name, signature, and emergency phone number
  - List of all medications the student is receiving (unless confidential)
  - Approval for nurse or designated personnel to administer
  - Persons to be notified in case of a medication emergency

### **Medication Administration Plan**

The school nurse, in collaboration with the caregiver whenever possible, shall establish a medication administration plan for each student receiving medication. Whenever possible, a student who understands the issues of medication administration shall be involved in the decision-making process and their preferences respected to the maximum extent possible. If appropriate, the medication administration plan shall be referenced in any other health or educational plan developed pursuant to St. 1972, c. 766 the Massachusetts Special Education Law (Individual Education Plan under Chapter 766) or federal laws, such as the Individuals with Disabilities Education Act (IDEA) or Section 504 of the Rehabilitation Act of 1973.

The plan shall include:

- Student's name
- Licensed prescriber's order and contact information
- Parent/guardian's signed authorization and contact information
- Any known allergies to food or medication
- Diagnosis (unless confidential)
- Name, dosage, frequency, and route of administration
- Specific directions and possible side effects/adverse reactions
- Quantity of medication to be provided to the school
- Storage requirements
- Duration of prescription

- The designation of unlicensed school personnel, if any, who will administer the prescription medication to the student in the absence of the nurse, and plans for back-up if the designated personnel are unavailable. Written consent from the parent/guardian for the named responsible adult to administer the medication shall be obtained. The school nurse shall instruct the responsible adult on how to administer the medication to the child.
- Plans for self-administration, if appropriate
- Notification of relevant teachers (with permission)
- Other medications student is taking (unless confidential)
- Location of administration
- Monitoring plan and procedures for field trips/special events

The nurse will ensure student identification prior to administration and will communicate significant observations (effectiveness, adverse reactions) to parents/guardians and prescribers.

The nurse may refuse to administer any medication deemed harmful, with immediate notification to parent/guardian and prescriber.

Licensed Practical Nurses may administer under supervision of the school nurse.

### **Delegation and Supervision**

The Board approves that responsibility for medication administration may be delegated to trained unlicensed personnel (administrative staff, teaching staff), in accordance with CMR 210.004.

- Epinephrine may be administered by trained personnel in emergencies, as designated in the medication administration plan.
- The nurse, in consultation with the school physician, has final authority regarding delegation.
- Delegated personnel remain under the supervision of the school nurse, who must be on duty and available by phone.
- Parenteral medications may not be delegated, except epinephrine where the child has a known allergy and there is an order for administration and consent from parent/guardian.
- PRN (“as needed”) medications require nurse assessment or consultation for each dose.
- An updated list of trained unlicensed personnel shall be maintained and provided to parents upon request.

### **Supervision of Unlicensed Personnel:**

a. Authorized unlicensed personnel administering medications shall be under the supervision of the school nurse. The school nurse is responsible for selecting, training, and supervising staff designated to administer medications, in consultation with the administrator and, when appropriate, the Board of Health.

b. The school nurse determines the number of unlicensed personnel that can be adequately supervised.

c. The school nurse oversees training consistent with DPH regulations (CMR 210.007)

d. The school nurse shall provide a training review and informational update, at least annually, for those school staff authorized to administer medications.

The school nurse shall document the training and competency of unlicensed personnel designated to assume the responsibility for medication administration.

For the individual child, the school nurse shall:

- (1) determine whether or not it is medically safe and appropriate to delegate medication administration;
- (2) administer the first dose of the medication, if (a) there is reason to believe there is a risk to the child as indicated by the health assessment, or (b) if the student has not previously received this medication in any setting;
- (3) review the initial orders, possible side effects, adverse reactions and other pertinent information with the person to whom medication administration has been delegated;
- (4) provide supervision and consultation as needed to ensure that the student is receiving the medication appropriately. Supervision and consultation may include record review, on-site observation and/or student assessment.

#### Self Administration of Medications

"Self administration" means that the student is able to consume or apply medication in the manner directed by the licensed prescriber, without additional assistance or direction. A student may be responsible for taking his/her own medication after the school nurse has determined that the following requirements are met:

- A. the student, school nurse and parent/guardian, where appropriate, enter into an agreement, which specifies the conditions under which medication may be self administered;
- B. the school nurse, as appropriate, develops a medication administration plan, which contains only those elements necessary to ensure safe self-administration of medication;
- C. the student's health status and abilities have been evaluated by the school nurse who then deems self-administration safe and appropriate. As necessary, the school nurse shall observe initial self-administration of the medication;
- D. the school nurse is reasonably assured that the student is able to identify the appropriate medication, knows the frequency and time of day for which the medication is ordered;
- E. there is written authorization from the student's parent or guardian that the student may self medicate;
- F. if requested by the school nurse, the licensed prescriber provides a written order for self-Administration;
- G. the student's self-administration is monitored based on his/her abilities and health status. Monitoring may include teaching the student the correct way of taking the medication, reminding the student to take the medication, visual observation to ensure compliance, recording that the medication was taken, and notifying the parent, guardian or licensed

prescriber of any side effects, variation from the plan, or the student's refusal or failure to take the medication; and with parental/guardian and student permission, as appropriate, the school nurse may inform appropriate teachers and administrators that the student is self-administering a medication.

### **Handling, Storage and Disposal of Medications:**

A parent, guardian or parent/guardian-designated responsible adult shall deliver all medications to be administered by school personnel or to be taken by self medicating students to the school nurse or other responsible person designated by the school nurse.

1. The medication must be in a pharmacy or manufacturer labeled container.
2. The school nurse or other responsible person receiving the medication shall document the quantity of the medication delivered.

All medications shall be stored in their original pharmacy labeled containers and in such a manner as to render them safe and effective. Expiration dates shall be checked.

All medications to be administered by school personnel shall be kept in a securely locked cabinet used exclusively for medications, which is kept locked except when opened to obtain medications. The cabinet shall be substantially constructed and anchored securely to a solid surface. Medications requiring refrigeration shall be stored in either a locked box in a refrigerator or in a locked refrigerator maintained at temperatures of 38 to 42 degrees Fahrenheit.

Access to stored medications shall be limited to persons authorized to administer medications and to self-medicating students. Access to keys and knowledge of the location of keys shall be restricted to the maximum extent possible.

Parents or guardians may retrieve the medications from the school at any time.

No more than a thirty (30) school day supply of the medication for a student shall be stored at the school.

Where possible, all unused, discontinued or outdated medications shall be returned to the parent or guardian and the return appropriately documented. In extenuating circumstances, with parental consent when possible, such medications may be destroyed by the school nurse in accordance with any applicable policies of the Massachusetts Department of Public Health, Division of Food and Drugs. All medications should be returned at the end of the school year.

### **Documentation and Record Keeping:**

A medication administration record shall be kept for each student who receives medication during school hours. Including a daily log, medication order, parent authorization and medication administration plan.

The school nurse shall document in the student's electronic medical record the dose, the date and time of administration of any medication being administered during the school day.

The school nurse shall also document any significant observations including any adverse reactions or other harmful effects.

The school nurse will complete the School Controlled Substance Registration in accordance with the provision of Massachusetts General Laws, Chapter 94C and renew it yearly as required by the Massachusetts Department of Public Health.

### **Reporting and Documentation of Medication Errors:**

A medication error includes any failure to administer medication as prescribed for a particular student, including failure to administer the medication:

1. within appropriate time frames (the appropriate time frame should be addressed in the medication administration plan);
2. in the correct dosage;
3. in accordance with accepted practice; and
4. to the correct student.

In the event of a medication error, the school nurse shall notify the parent or guardian immediately. (The school nurse shall document the effort to reach the parent or guardian.) If there is a question of potential harm to the student, the nurse shall also notify the student's licensed prescriber or school physician.

Medication errors, as defined in 105 CMR 210.005(F)(5), shall be documented by the school nurse on the school/district's accident/incident report form and in the student's health record. These reports shall be retained in a location as determined by school policy and made available to the Department of Public Health upon request. All suspected diversion or tampering of drugs shall be reported to the Department of Public Health, Drug Control Program. All medication errors requiring medical care or ongoing assessment shall be reported as instructed to the Department of Public Health.

The school district shall comply with the Department of Public Health's reporting requirements for medication administration in the schools.

The Department of Public Health may inspect any individual student medication record or record relating to the administration or storage of medications without prior notice to ensure compliance with 105 CMR 210.000.

### **Response to Medication Emergencies:**

The school nurse shall develop procedures for responding to medication emergencies, i.e., any reaction or condition related to administration of medication which poses an immediate threat to the health or well-being of the student. These procedures shall be consistent with the school's policy for handling all health emergencies and shall include maintaining a list of persons to be notified in case of a medication emergency.

### **Administration of Epinephrine by Auto-injector to Individuals Experiencing Life-Threatening Allergic Reactions**

If the school district/school is registered with the Department of Public Health the school nurse may train unlicensed personnel to administer epinephrine by auto-injector to individuals with diagnosed life-threatening allergic events. The training program is managed, with full decision-making authority, by the designated school nurse leader or responsible school nurse, in consultation with the school physician. This person, or school nurses designated by this person, shall select the individuals authorized to administer epinephrine by auto injector. Persons authorized to administer epinephrine shall meet the requirements of section 210.004(B)(2):

The school personnel authorized to administer epinephrine by auto injector are trained and tested for competency by the responsible school nurse in accordance with standards and a curriculum established by the Department.

1. The designated school nurse shall document the training and testing of competency.
2. The responsible school nurse shall provide a training review and informational update at least twice a year.
3. The school shall maintain and make available, upon request by parents or staff, a list of those school personnel authorized and trained to administer epinephrine by auto injector in an emergency, when the school nurse is not immediately available.

Epinephrine shall be administered only in accordance with an individualized medication administration plan satisfying the applicable requirements of 105 CMR 210.005(E) and 210.009(A)(6), updated every year, which includes the following:

- (1) a diagnosis by a physician that the child is at risk of a life threatening allergic reaction and a medication order containing proper dosage and indications for administration of epinephrine;
- (2) written authorization by a parent or legal guardian;

(3) home and emergency number for the parent(s) or legal guardian(s), as well as the names(s) and phone number(s) of any other person(s) to be notified if the parent(s) or guardian(s) are unavailable;

Epinephrine is to be stored in such a manner as to allow rapid access by authorized persons, including possession by the student when appropriate; and in a place accessible only to authorized persons. The storage location should be secure, but not locked during those times when epinephrine is most likely to be administered, as determined by the school nurse;

When epinephrine is administered, there shall be immediate notification of the local emergency medical services system (generally 911), followed by notification of the student's parent(s) or guardian(s) or, if the parent(s) or guardian(s) are not available, any other designated person(s), the school nurse, the student's physician, and the school physician, to the extent possible; Because of the danger of biphasic reactions, the child should be transported by trained emergency medical personnel to the nearest emergency medical facility.

The school nurse shall submit a written report to the Department of Public Health each time epinephrine is administered to a student or staff, on a form obtained from the Department; and permitting the Department of Public Health to inspect any record related to the administration of epinephrine without prior notice, to ensure compliance with 105 CMR210.100.

Epinephrine may be administered in accordance with these regulations in before and after school programs offered or provided by a school, such as athletic programs, special school events and school-sponsored programs on week-ends, provided that the public school district is registered with the Department pursuant to section 210.100(A) and meets the requirements set forth in section 210.000(B).

In addition to the above policies the Department recommends that each school district have a written protocol (see standing orders), signed by the school physician, authorizing the school nurse to administer epinephrine to previously undiagnosed individuals who experience their first life threatening allergic event in the school setting. Stock supplies of epinephrine will be maintained by the school nurse for this purpose.

## Policy Review and Revision

Review and revision of these policies and procedures shall occur as needed but at least every two years.

Approved by School Physician, Tala Elia, MD : \_\_\_\_\_ Date \_\_\_\_\_

Approved by School Nurse, Mary Price, RN: \_\_\_\_\_ Date \_\_\_\_\_

Approved by Head of School, Chris Kusek: \_\_\_\_\_ Date \_\_\_\_\_

Approved by President of the Board, Kathleen Hulton: \_\_\_\_\_ Date \_\_\_\_\_

Date Registered by the Massachusetts Department of Public Health for Approval to Delegate to Unlicensed Personnel, if applicable, **2/2025-2/2026**