

WEST VIRGINIA  
SECRETARY OF STATE

JOE MANCHIN III

ADMINISTRATIVE LAW DIVISION

Form #2

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2004 MAR 12 P 2:13

OFFICE OF THE WEST VIRGINIA  
SECRETARY OF STATE

NOTICE OF A COMMENT PERIOD ON A PROPOSED RULE

AGENCY: West Virginia Board of Education TITLE NUMBER: 126

RULE TYPE: Legislative CITE AUTHORITY: W.Va. Constitution, Article XII, §2 and W.Va. Code §§18-1-1, 18-2-5, 18-5-22, 18-5-22a, 18A-4-8, and 30-7-1 et seq.

AMENDMENT TO AN EXISTING RULE: YES  NO

IF YES, SERIES NUMBER OF RULE BEING AMENDED: \_\_\_\_\_

TITLE OF RULE BEING AMENDED: \_\_\_\_\_

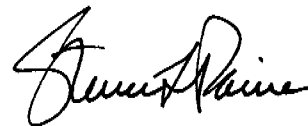
IF NO, SERIES NUMBER OF NEW RULE BEING PROPOSED: 27

TITLE OF RULE BEING PROPOSED: Medication Administration (2422.8)

IN LIEU OF A PUBLIC HEARING, A COMMENT PERIOD HAS BEEN ESTABLISHED DURING WHICH ANY INTERESTED PERSON MAY SEND COMMENTS CONCERNING THESE PROPOSED RULES. THIS COMMENT PERIOD WILL END ON April 12, 2004 AT 4:45 p.m.. ONLY WRITTEN COMMENTS WILL BE ACCEPTED AND ARE TO BE MAILED TO THE FOLLOWING ADDRESS:

Rebecca J. King, Coordinator  
Office of Student Services & Health Promotion  
West Virginia Department of Education  
Capitol Building 6, Room 309  
1900 Kanawha Boulevard, East  
Charleston, West Virginia 25305

THE ISSUES TO BE HEARD WILL BE LIMITED TO THIS PROPOSED RULE



Steven L. Paine  
Deputy State Superintendent of Schools

ATTACH A **BRIEF** SUMMARY OF YOUR PROPOSAL

# **EXECUTIVE SUMMARY**

## **WEST VIRGINIA DEPARTMENT OF EDUCATION**

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### **Policy Number And Title:**

Policy 2422.8  
Medication Administration

### **Background:**

Each school year, over 11,000 children receive medications at school. W.Va. Code §18-5-22a requires that all county boards of education develop specific medication administration policies. In order to standardize safety procedures and develop protocols that are consistent with Nurse Practice Standards set forth by the West Virginia Board of Examiners for Registered Professional Nurses, a state policy is recommended.

A task force convened by the West Virginia Board of Examiners for Registered Professional Nurses drafted a policy, which was formatted by the WV Department of Education and presented it to the West Virginia Board of Education in August 2003. That policy draft was placed on public comment in September 2003. Based on the number and nature of the comments that were received, the West Virginia Board of Education appointed a special committee to review and revise the draft policy. The special committee included the following: West Virginia Board of Education members, Department of Education staff, staff from the West Virginia Board of Examiners for Registered Professional Nurses, a county board of education representative, a county superintendent representative, a school administrator representative, school nurse representatives and parent representatives.

### **Proposals:**

Specific procedures for medication administration are outlined along with the roles and responsibilities of school personnel, parents and students. Medication storage, recording, and student confidentiality are all addressed in this policy. Major issues addressed by the West Virginia Board of Education's committee include the following:

- Clarifications and additions to definitions (4.1. through 4.15.).
- Clarification of process for addressing medication administration at school related events (6.1.7.).
- Clarification of health care plan requirements for medication administration (6.2.3.).
- Provision for student self-administration of medication under specified conditions (6.5.2.).

- Procedures for administration of prescribed medication requiring authorization from a licensed prescriber (7.1. through 7.4.).
- Procedures for administration of non-prescribed medication requiring authorization from a parent/guardian (8.1. through 8.5.)

**Impact:**

The proposed policy will improve the safety and consistency of medication administration. The policy outlines specific procedures for school related medication administration and training requirements for school personnel assigned to this duty. This policy outlines minimum requirements for medication administration. County board of educations may be more restrictive in the medication administration procedures they choose to adopt.

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**TITLE 126  
LEGISLATIVE RULE  
BOARD OF EDUCATION**

**SERIES 27  
MEDICATION ADMINISTRATION (2422.8)**

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SECRETARY OF STATE

**§126-27-1. General.**

1.1. Scope. -- This legislative rule establishes standards for administration of all medication in the West Virginia public school system.

1.2. Authority. -- W. Va. Constitution, Article XII, §2 and W.Va. Code §§18-1-1, 18-2-5, 18-5-22, 18-5-22a, 18A-4-8, and 30-7-1, et seq.

1.3. Filing Date. --

1.4. Effective Date. -- July 1, 2004

1.5. Repeal of Former Rule. -- None. This is a new policy.

**§126-27-2. Purpose.**

2.1. Good health and safety are essential to student learning. The administration of medication to students during the school day should be discouraged unless absolutely necessary for the student's health. Administration of medication during the school day is essential to allow some students to attend school. This policy establishes the standards that must be followed when any medication is required to be administered during attendance at school or school related events and to provide for emergency medication administration, when necessary.

2.2. An objective of this medication administration policy is to promote individual responsibility. This can be achieved by educating students and their families.

**§126-27-3. Application.**

3.1. These regulations apply to school nurses, administrators, other authorized school employees and contracted licensed health care providers (as specified in WV Code §18-5-22a) administering medication to students in the West Virginia public school system.

3.2. County Boards of Education shall develop or amend medication administration policies to meet or exceed the standards set forth in WV Code §18-5-22a as well as the components set forth in this policy.

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3.3. The West Virginia Department of Education may issue and periodically update advisories to provide guidance on the administration of medication to students in the West Virginia public school system.

3.4. This policy shall not impact the operating procedures of School Based Health Centers. It is not the intent of this policy to interfere with existing policies and procedures of health care providers managing School Based Health Centers.

### **§126-27-4. Definitions.**

4.1. "Administration of medication" means a health care procedure, which may be performed by school personnel who are designated, qualified, trained and authorized to administer medications to students.

4.2. "Administrator's designee" means an employee (excluding the school nurse or contracted provider) who is designated by the building administrator, is trained to administer non-prescribed medication, and agrees to administer non-prescribed medications.

4.3. "Contracted licensed health care provider" means an employee of a public health department providing services under a contract with a county board of education to provide services considered equivalent to those required in W.Va. Code §18-5-22.

4.4. "Designated qualified personnel" means an employee or contracted provider who agrees to administer medications, is authorized by the administrator, successfully completes Phase I and Phase II training as defined in Policy 2422.7 – Standards for Health Care Procedures (126CSR25A) and is qualified for the delegation of the administration of prescribed medications.

4.5. "Licensed health care provider" means a medical doctor or doctor of osteopathy, podiatrist, registered nurse, practical nurse, registered nurse practitioner, physician assistant, dentist, optometrist, pharmacist or respiratory care professional licensed under Chapter Thirty of W.Va. Code.

4.6. "Licensed prescriber" means licensed health care providers with the authority to prescribe medication.

4.7. "Long-term and Emergency Prescribed Medication" means medication ordered by a licensed prescriber that is used to treat acute and chronic health conditions including both daily and PRN (as needed) medication.

4.8. "Medication document" means the individual medication record or medicine log used to record the administration of medication to a student.

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4.9. "Non-prescribed Medication" means medication and food supplements that have been approved by the Food and Drug Administration and may be obtained over-the-counter (OTC) without a prescription from a licensed prescriber.

4.10. "Parent/Guardian Authorization Form" means a form completed and signed by parent/guardian in order to authorize medication administration to said parent's/guardian's child. The form must include the following: student name; date; allergies; medication name, dosage, time and route; intended effect of medication; and parent/guardian signature.

4.11. "Prescribed Medication" means medication with a written order signed by a licensed prescriber.

4.12. "School Based Health Centers" means clinics located in schools that: 1) are sponsored and operated by community based health care organizations; 2) provide primary health care services (including but not limited to diagnosis and treatment of acute illness, management of chronic illness, physical exams, immunizations, and other preventive services) to students who are enrolled in the health center; and 3) follow state and federal laws, policies, procedures, and professional standards for provision of medical care.

4.13. "School Nurse" is defined as a registered professional nurse, licensed by the West Virginia Board of Examiners for Registered Professional Nurses (W.Va. Code §30-7-1, et seq.), who has completed a West Virginia Department of Education approved program as defined in West Virginia Board of Education Policy 5100 – Approval of Educational Personnel Preparation Programs (126CSR114) and meets the requirements for certification contained in Policy 5202 – Minimum Requirements for the Licensure of Professional/Paraprofessional Personnel and Advanced Salary Classification (126CSR136). The school nurse must be employed by the county board of education or the county health department as specified in W.Va. Code §18-5-22.

4.14. "School-related event" means any curricular or co-curricular activity, as defined in West Virginia Board of Education Policy 2510 – Assuring the Quality of Education: Regulations for Education Programs (126CSR42), that is conducted outside of the school environment and/or instructional day. Examples of co-curricular activities include the following: band and choral presentations; theater productions; science or social studies fairs; mathematics field days; career/technical student organizations' activities; or other activities that provide in-depth exploration or understanding of the content standards and objectives appropriate for the students' grade levels.

4.15. "Self-administration" means medication administered by the student under the supervision of the school nurse, designated qualified personnel, administrator or administrator's designee. The self-administration of prescribed medication may also include medication taken by a student in an emergency or an acute situation (e.g. rescue inhaler).

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### **§126-27-5. Authorization.**

5.1. Authorized personnel include trained school nurses, other licensed health care providers, administrators, teachers, aides and secretaries as defined in W.Va. Code §§18-1-1, 18A-4-8 and 18-5-22.

### **§126-27-6. Roles and Responsibilities.**

#### **6.1. Role of the school administrator(s).**

6.1.1. Provide for appropriate, secure, and safe storage and access of medications.

6.1.2. Provide a clean, safe environment for medication administration.

6.1.3. Provide a mechanism for safely receiving, counting and storing medications.

6.1.4. Provide a mechanism for receiving and storing appropriate medication authorization forms.

6.1.5. Select potential candidates for medication administration (prescribed and non-prescribed).

6.1.6. Assign qualified employees, who meet a satisfactory level of competence following Phase I & Phase II training, for prescribed and non-prescribed medication administration as defined in Policy 2422.7 – Standards for Health Care Procedures (126CSR25A).

6.1.7. Coordinate development of procedures for the administration of medication during school-related events with classroom teachers, school nurses, parents/guardians, designated qualified personnel and administrator's designees.

#### **6.2. Role of the school nurse and contracted licensed health care provider.**

6.2.1. Determine if the administration of prescribed medication may be safely delegated to designated qualified personnel, as defined in Section 4.4.

6.2.2. Contact the parent/guardian or licensed health care provider to clarify any questions about medication that is to be administered in the WV public school system.

6.2.3. Manage health related problems and decisions. In the role of manager, the nurse is responsible for standards of school nurse practice in relation to health appraisal, health care planning and maintenance of complete and accurate documentation. For students needing long-term and emergency prescription medication to attend school, the school nurse shall assess the student, review the physician's orders, assure

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implementation of needed health and safety procedures, and develop a health care plan.

6.2.4. Utilize the "West Virginia Board of Examiners for Registered Nurses Guidelines for Determining Acts that May be Delegated or Assigned by Licensed Nurses", January 2001, and any revisions thereof, as the mechanism for determining whether or not the administration of prescribed medications may be delegated.

6.2.5. Provide and/or coordinate Phase I and Phase II training, as defined in 2422.7 – Standards for Health Care Procedures (126CSR25A), for all school employees designated to administer prescribed and non-prescribed medication.

6.2.6. Validate and document student knowledge and skills related to self-administration of prescribed medication.

6.3. Role of designated qualified personnel/administrator's designee.

6.3.1. Successfully complete the CPR and First Aid portion of Phase I training and the medication administration portion of Phase II training, as defined in Policy 2422.7 – Standards for Health Care Procedures (126CSR25A).

6.3.2. Store and administer medication, complete the medication document and report medication incidents as outlined in 7.4. and 8.5.

6.4. Role of the parent/guardian.

6.4.1. Administer the initial dose of any medication at home, except for emergency medications.

6.4.2. Complete and sign a parent/guardian authorization form (to be designed by each county), which indicates student name; date; allergies; medication name; dosage, time, and route; intended effect of medication; and parent/guardian signature.

6.4.3. Supply medication and ensure that medication arrives safely at school in a current and properly labeled container (See Sections 7.2 and 8.3). Give the medication to the person authorized by the administrator to receive, store, and administer medication. Maintain effective communication pertaining to medication administration.

6.4.4. Replenish long-term and emergency prescribed medication as needed.

6.4.5. Retrieve unused or outdated medicine from school personnel no later than thirty (30) days after the authorization to give the medication expires or on the last day of school.

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### 6.5. Role of the student.

6.5.1. Consume the medication in the specified manner, in as much as his/her age, development and maturity permit.

6.5.2. Self-administer prescribed emergency or acute medications, such as but not limited to a prescribed bronchodilator (rescue inhaler), Epi-pen, or ibuprofen when the prescription indicates that said student must maintain possession of the medication. The student must be able to bring the medication to school, carry the medication in a safe and responsible manner, and use the medication only as prescribed. At the discretion of county boards of education, high school students (not below grade 9) may be allowed to carry and self-administer non-prescribed medication (OTC) with parent/guardian authorization, unless restricted by the administrator.

### **§126-27-7. Administration of Prescribed Medication.**

7.1. Prescribed medications shall be administered after written authorization from a licensed prescriber is received.

7.2. Prescribed medication shall be in the originally labeled container, which includes the following:

#### 7.2.1. Prescribed medication(s) from a Pharmacy

- a. student's name,
- b. name of the medication,
- c. reason(s) for the medication (if to be given only for specific symptoms),
- d. dosage, time and route,
- e. reconstitution directions, if applicable, and
- f. the date the prescription and/or medication expires.

#### 7.2.2. Prescribed Over-the-Counter Medication(s)

- a. student's name (affixed to original manufacturer's bottle),
- b. name of the medication,
- c. reason(s) for the medication (if to be given only for specific symptoms),

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- d. dosage, time and route,
- e. reconstitution directions, if applicable, and
- f. the date the prescription and/or medication expires.

7.3. Medication administration steps must be followed exactly as outlined in Phase I and Phase II training defined in Policy 2422.7 – Standards for Health Care Procedures (126CSR25A).

7.3.1. Medication administration must take place in a clean and quiet environment where privacy may be established and interruptions are minimal.

7.3.2. The school nurse is to be contacted immediately when a medication's appearance or dosage is questioned. The school nurse shall take the appropriate steps to assure the medication is safe to administer.

7.3.3. The school nurse is to be contacted immediately when a student's health condition suggests that it may not be appropriate to administer the medication.

7.3.4. When a student's medical condition requires a change in the medication dosage or schedule, the parent must provide a new prescription and container. This must be given to designated personnel within an appropriate time frame.

7.4. Medication administration incidents include, but are not limited to, any deviation from the instructions provided by the licensed health care provider. The school nurse and administrator shall be contacted immediately in the event of a medication incident. The school nurse or administrator shall do the following:

7.4.1. Contact the physician and parent/guardian, if necessary.

7.4.2. Implement the school nurse or administrator recommendation/physician's order in response to a medication incident.

7.4.3. Document all circumstances, orders received, actions taken and student's status.

7.4.4. Submit a written report to the administrator and county superintendent at the time of the incident. The report should include the name of the student, the parent/guardian name and phone number, a specific statement of the medication incident, who was notified, and what remedial actions were taken.

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**§126-27-8. Administration of Non-Prescription Medication.**

8.1. Non-prescribed medications shall be administered only after meeting the following requirements:

8.1.1. Parent/Guardian authorization form is provided.

8.1.2. The school administrator has the authority to determine if the administration of the non-prescribed medication may be safely delegated to the administrator's designee as defined in Section 4.2.

8.1.3. The school administrator has the authority to contact the parent/ guardian or a licensed health care provider to clarify any questions about the medication being administered.

8.2. Any non-prescribed medication(s) must be provided by the parent/guardian.

8.3. Non-prescribed medication shall be in the manufacturer's original packaging clearly marked with the following:

8.3.1. student's name (affixed to original manufacturer's bottle),

8.3.2. name of medication,

8.3.3. ingredients,

8.3.4. dosage, time and route,

8.3.5. reconstitution directions, if applicable, and

8.3.6. medication expiration date.

8.4. Medication administration steps must be followed exactly as outlined in Phase I and Phase II training defined in Policy 2422.7 – Standards for Health Care Procedures (126CSR25A).

8.4.1. Medication administration must take place in a clean and quiet environment where privacy may be established and interruptions are minimal.

8.4.2. The parent/guardian is to be contacted immediately when a medication's appearance or dosage is questioned. The administrator's designee shall take the appropriate steps to assure the medication is safe to administer.

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8.4.3. The parent/guardian is to be contacted immediately when a student's health condition suggests that it may not be appropriate to administer the medication.

8.5. Medication administration incidents include, but are not limited to, any deviation from the instructions provided by the parent/ guardian. The school administrator shall be contacted immediately in the event of a medication incident. The school administrator will then contact the parent/ guardian, if necessary. The school administrator or designee shall:

8.5.1. Implement the parent's/guardian's recommended response to a medication incident.

8.5.2. Document all circumstances, orders received, actions taken and student's status.

8.5.3. Submit a written report to the administrator and county superintendent at the time of the incident. The report should include the name of the student, the parent/guardian name and phone number, a specific statement of the medication incident, who was notified, and what remedial actions were taken.

8.5.4. When a parent/guardian authorizes a non-prescribed medication to be given in addition to a known prescribed medication, the administrator or school nurse shall validate the safety of multiple medications. At times, this validation process may require a licensed provider order.

### **§126-27-9. Medication Storage, Inventory, Access and Disposal.**

9.1. Each school shall designate space in the building to store student medication, at the correct temperature, in a secure, locked, clean cabinet or refrigerator, as required.

9.2. All medication shall be entered on a medication inventory and routinely monitored for expiration and disposal.

9.3. Access to medications shall be under the authority of the administrator of the school in conjunction with the school nurse assigned to that school. If there is a full-time school nurse assigned to the building, the school nurse shall have authority over the access to medications.

9.4. An appropriate supply of long-term and emergency prescribed medication may be maintained at the school in amounts not to exceed school dosages within each calendar month.

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9.5. School personnel shall dispose of unused or outdated medicine unclaimed by the parent/guardian no later than (30) days after the parent/guardian medication authorization expires or on the last day of school.

9.6. Medication disposal shall be done in a manner in which no other individual has access to any unused portion. Two (2) individuals will witness the disposal of the medication and the procedure must be documented on the appropriate form related to the specific student.

### **§126-27-10. Confidentiality and Documentation.**

10.1. Student records related to diagnosis, medications ordered and medications given must be maintained according to Family Educational Right to Privacy Act (FERPA) and in such a manner that no one could view these records without proper authorization as specified in West Virginia Board of Education Policy 4350 - Procedures for the Collection, Maintenance and Disclosure of Student Data (126CSR94).

10.2. Documentation of medication administration shall include following information:

10.2.1. student name,

10.2.2. medication(s) name,

10.2.3. dosage, time and route of medication('s) administration,

10.2.4. reaction(s) or untoward effects,

10.2.5. reason(s) the medication was not administered; and

10.2.6. date and signature of person administering medication.

### **§126-27-11. Consequences of Policy Violation.**

11.1. If a student violates the policy regarding medication administration, action will be based upon West Virginia Board of Education Policy 4373 - Student Code of Conduct (126CSR99) and/or WV Board of Education Policy 2422.5 - Substance Abuse (126CSR23).

11.2. Failure of school personnel to comply with the above rules shall result in personnel disciplinary actions based on West Virginia Board of Education Policy 5310 - Performance Evaluation of School Personnel (126CSR142) and West Virginia Board of Education Policy 5902 - Employee Code of Conduct (126CSR162).

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### **§126-27-12. Severability.**

12.1. If any provision of this rule or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of this rule.

**FISCAL NOTE WORKSHEET**  
(Submit 4 Copies)

HD NO \_\_\_\_\_ DRAFT NO \_\_\_\_\_ BILL NO \_\_\_\_\_ RESOLUTION NO \_\_\_\_\_

SUBJECT Policy 2422.8 - Medication Administration FUND \_\_\_\_\_

SOURCE OF REVENUE:  GENERAL FUND  SPECIAL  OTHER (SPECIFY) \_\_\_\_\_

COST OF ESTIMATE BASED ON:  AN ORIGINAL ESTIMATE  BUDGET BILL  OTHER (SPECIFY) \_\_\_\_\_

INCOME ESTIMATE BASED ON:  AN ORIGINAL ESTIMATE  BUDGET BILL  OTHER (SPECIFY) \_\_\_\_\_

**SHOW OVER-ALL EFFECT IN ITEMS 1 AND 2 & GIVE EXPLANATION OF BREAKDOWN BY FISCAL YEAR INCLUDING LONG-RANGE EFFECT**

EFFECT OF PROPOSAL	ANNUAL		FISCAL YEAR		
	INCREASE	DECREASE	CURRENT	NEXT	THEREAFTER
1. ESTIMATED TOTAL COST	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERSONAL SERVICES CURRENT EXPENSES REPAIRS/ALTERATIONS EQUIPMENT OTHER	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2. ESTIMATED TOTAL REVENUES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

3. EXPLANATION OF ABOVE ESTIMATES (INCLUDING LONG-RANGE EFFECT):

DATE

8-18-03

AGENCY

West Virginia Department of Education

AUTHORIZED REPRESENTATIVE

*Thomas R. Paine*

## **Policy 2422.8: Medication Administration Comment Response Form**

Please use this form when commenting on proposed Policy 2422.8. You may attach additional sheets if necessary.

Individual/Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Street Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

### **Comments/Suggestions**

**§126-27-1. General.**

**§126-27-2. Purpose.**

**§126-27-3. Application.**

**§126-27-4. Definitions.**

**§126-27-5. Authorization.**

**§126-27-6. Roles and Responsibilities.**

**Medication Administration Policy (Policy 2422.8)  
Comment Response Form  
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**§126-27-7. Administration of Prescribed Medication.**

**§126-27-8. Administration of Non-Prescribed Medication.**

**§126-27-9. Medication Storage, Inventory, Access and Disposal.**

**§126-27-10. Confidentiality and Documentation.**

**§126-27-11. Consequences of Policy Violation.**

**§126-27-12. Severability.**

**Return comments by APRIL 12, 2004 to:**

**Rebecca J. King  
Coordinator  
West Virginia Department of Education  
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1900 Kanawha Boulevard, East  
Charleston, WV 25305-0330  
E-mail: [rjking@access.k12.wv.us](mailto:rjking@access.k12.wv.us)  
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