

KSBA RECOMMENDED LANGUAGE IN YELLOW

LEGAL: HB 147 AMENDS KRS 158.838 TO ADD MEDICATION PRESCRIBED TO TREAT SEIZURE DISORDER SYMPTOMS.

FINANCIAL IMPLICATIONS: NONE ANTICIPATED

LEGAL: THIS CLARIFIES THAT SCHOOLS SHALL HAVE EMERGENCY CARE PROCEDURES THAT COMPORT WITH REGULATION.

FINANCIAL IMPLICATIONS: NONE ANTICIPATED

JCSP STAFF RECOMMENDED LANGUAGE IN BLUE

- EMERGENCY MEDICATIONS' NAMES VARY BASED ON MANUFACTURER.
- THE NAME "PRIMARY CARE PROVIDER AUTHORIZATION FORM" CAUSED SOME PROVIDERS AND SPECIALISTS NOT TO SIGN THE FORM. THE MORE GENERIC NAME WILL REDUCE THAT OBSTACLE. ALSO, SOME PROVIDERS REQUIRE THE USE OF THEIR SPECIFIC FORMS AND WE NEED TO BE ABLE TO UTILIZE THEIR PLANS OF CARE, AS WE CAN NOT MANDATE WHICH FORMS THEY USE.

STUDENTS

09.224

Emergency Medical Treatment

FIRST-AID ROOM

A first-aid area with appropriate equipment, supplies and provisions for the child to recline shall be designated in each school. At least two (2) adult employees in each school, at least one (1) of whom shall be present at the school at all times during school hours, shall have completed and been certified in a standard first aid course that includes CPR for infants and children.

In accordance with state law, every school shall have personnel trained each school year to administer emergency medication to students for seizures (~~Diastat~~), diabetes (~~Glucagon~~), life threatening allergic reactions (~~EpiPen~~) and asthma (~~Nebulizer, inhaler, etc.~~) as prescribed by the student's health care practitioner or the District School Health Plan ~~directed on the appropriate "Primary Care Provider Authorization" form.~~

STOCK EPINEPHRINE

As suggested in KRS 158.836, each school shall stock epinephrine, so that trained staff may administer epinephrine to any student believed to be having a life-threatening allergic or anaphylactic reaction.¹

When enrolled students, for whom documentation under KRS 158.838 has been provided to the school, are present during school hours or as participants in school-related activities, a school employee shall be present who has been appropriately trained to administer or assist with the self-administration of medications, including but not limited to glucagon, insulin, ~~or~~ seizure rescue medications, or medication prescribed to treat seizure disorder symptoms.

EMERGENCY CARE PROCEDURES

Schools shall have emergency care procedures comporting with regulation² and may utilize the Kentucky Department of Education's Health Services Reference Guide (HSRG) as a resource.

INFORMATION NEEDED

A number at which parents can be reached and the name of the family physician shall be maintained at each school for all its students.² Parents will be notified in the event of an accident.

REFERENCES:

¹KRS 158.836

²702 KAR 1:160

KRS 156.160; KRS 156.502; KRS 158.838

RELATED POLICIES:

09.21; 09.22; 09.2241

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- THE LANGUAGE REQUIRING NOTARIZATION IS OBSOLETE. IN PRACTICE, THE DISTRICT ELIMINATED THIS REQUIREMENT SEVERAL YEARS AGO, BECAUSE IT WAS A BARRIER TO HAVING FAMILIES SUBMIT THE INFORMATION TO SCHOOLS.

STUDENTS

09.2241

Student Medication

School personnel authorized to give medications must be trained in accordance with KRS 158.838, KRS 156.502 and 702 KAR 1:160.

School employees who have completed the appropriate annual (by school year) health services training in accordance with state law may store a student's medication and call the student to take the medication if the “*Authorization to Give Prescription Medication*” form and/or the “*Authorization to Give Over the Counter Medication*” form and/or the appropriate “School Health Plan~~*Primary Care Provider Authorization*~~” form has been completed.

~~The “*Authorization to Give Prescription Medication*” form must be notarized, the medication must be in its original container and written instructions from the health care provider (physician, nurse practitioner, etc.) must be on the container.~~

All prescription medication, original or refill, should be sent to school in a pharmacy labeled container that includes the student's name, date dispensed, medication, dosage, strength, date of expiration, and directions for use including frequency, duration and route of administration, prescriber's name, and pharmacy name, address and phone number. Changes in the dosage and/or times of administration must be received in the form of a written order from the health care provider OR a new prescription bottle from the pharmacy indicating the change and an updated “*Authorization to give prescription medication*” form from the parent.

The “*Authorization to Give Over the Counter Medication*” form must include the health care provider's instructions and signature for administering the medication and the medication must be in its original container.

~~The “*Primary Care Provider Authorization*” form must include the health care provider's instructions and signature, along with the parent/guardian's signature.~~

When medically licensed District personnel are available and are acting within their scope of practice, the medically licensed personnel may administer any medication and/or treatment with the written authorization of the parent/guardian and healthcare provider.

Students may take medicine which is brought from home once a completed authorization form from the parent/guardian is on file.¹

SELF-ADMINISTRATION

Under procedures developed by the Superintendent, a student may be permitted to carry and self-administer medication limited to an EpiPen, asthma inhaler and/or diabetes~~diabetic~~ medication and supplies that have been prescribed or ordered by a health care provider as documented by the

appropriate “~~School Health Plan~~*Primary Care Provider Authorization*” form for the current school year.^{2 & 3}

Students shall not carry any other prescription or over the counter medication. Students shall not share any prescription or over the counter medication with another student. Each year, the District shall notify students in writing of this prohibition and that violations shall result in appropriate disciplinary action, including but not limited to suspension or expulsion.

REFERENCES:

¹[OAG 73-768](#)

²[KRS 158.834](#)

³[KRS 158.836](#)

[OAG 77-530](#)

[OAG 83-115](#)

RELATED POLICIES:

09.22

09.224

Adopted/Amended: 02/10/2014

Order #: 2014-022