#### Glenbrook High School District # 225

#### BOARD POLICY: ADMINISTERING MEDICATION TO STUDENTS

8310

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#### Section A: Introduction

Students should not take medication during school hours or during school-related activities unless it is necessary for a student's health and well-being. When a student's licensed health care provider and parent(s)/guardian(s) believe that it is necessary for the student to take a medication during school hours or school-related activities, they the parent(s)/guardian(s) must request that the school dispense the medication to their child/ward student and otherwise follow the District's procedures on dispensing medication.

Illinois State Law requires written permission by parent(s)/guardian(s) and a licensed health care provider for administration of any medication at school. This form will be kept on file in the Health Office/Nurse's Office and will be valid until graduation.

- 1. No School District employee shall administer to any student, or supervise a <u>any</u> student's self-administration of, any prescription or non-prescription medication until a completed and signed "School Medication Authorization Form" is submitted by the student's parent(s)/guardian(s) and physician.
- 2. No student shall possess or consume any prescription or non-prescription medication on school grounds or at a school-related function other than as provided for in this policy and its implementing procedures.
- 3. A student may possess an EpiPen for a severe allergic reaction or medication prescribed for asthma for immediate use at the student's discretion, provided the student's parent(s)/guardian(s) and physician have completed and signed a "School Medication-Authorization Form." Other medication for immediate use may be possessed by the student if authorized by the parent(s)/guardian(s) and physician and approved by the school nurse.

The School District shall incur no liability, except for willful and wanton conduct, as a result of any injury arising from a student's self-administration of medication or the medication's storage by school personnel. Parent(s)/guardian(s) must indemnify and hold harmless the School District and its employees and agents, against any claims, except a claim based on willful and wanton conduct, arising out of a student's self-administration of medication or the storage of the medication by school personnel.

#### Section B: Self-administration of Medication

A student may possess an epinephrine auto-injector (EpiPen®) and/or asthma medication prescribed for use at the student's discretion, provided the student's parent(s)/guardian(s) has completed and signed a School Medication Authorization Form. The School District shall incur no liability, except for willful and wanton conduct, as a result of any injury arising from a

student's self-administration of medication or epinephrine auto-injector or the storage of any medication by school personnel. A student's parent(s)/guardian(s) must indemnify and hold harmless the School District and its employees and agents, against any claims, except a claim based on willful and wanton conduct, arising out of a student's self-administration of an epinephrine auto-injector and/or medication, or the storage of any medication by school personnel.

Section C: School District Supply of Undesignated Epinephrine Auto-Injectors

The Superintendent or designee shall implement Section 22-30(f) of the School Code and
maintain a supply of undesignated epinephrine auto-injectors in the name of the District and
provide or administer them as necessary according to State law. *Undesignated epinephrine*auto-injector means an epinephrine auto-injector prescribed in the name of the District or one of
its schools. A school nurse or trained personnel, as defined by State law, may administer an
undesignated epinephrine auto-injector to a person when they, in good faith, believe a person is
having an anaphylactic reaction. Each building principal or designee and/or his or her
corresponding school nurse shall maintain the names of trained personnel who have received a
statement of certification pursuant to State law.

Section D: School District Supply of Undesignated Opioid Antagonists

The Superintendent or designee shall implement Section 22-30(f) of the School Code and
maintain a supply of undesignated opioid antagonists in the name of the District and provide or
administer them as necessary according to State law. Opioid antagonist means a drug that binds
to opioid receptors and blocks or inhibits the effect of opioids acting on those receptors,
including, but not limited to, naloxone hydrochloride or any other similarly acting drug approved
by the U.S. Food and Drug Administration. Undesignated opioid antagonist is not defined by
the School Code; for purposes of this policy it means an opioid antagonist prescribed in the name
of the District or one of its schools. A school nurse or trained personnel, as defined in State law,
may administer an undesignated opioid antagonist to a person when they, in good faith, believe a
person is having an opioid overdose. Each building principal or designee and/or his or her
corresponding school nurse shall maintain the names of trained personnel who have received a
statement or certification pursuant to State law.

#### Section E: Void Policy: Disclaimer

The School District Supply of Undesignated Epinepherine Auto-Injectors section of the policy is void whenever the Superintendent or designee is, for whatever reason, unable to: (1) obtain for the District a prescription for undesignated epinephrine auto-injectors from a physician or advanced practice nurse licensed to practice medicine in all its branches, or (2) fill the District's prescription for undesignated school epinephrine auto-injectors.

The School District Supply of Undesignated Opioid Antagonists section of the policy is void whenever the Superintendent or designee is, for whatever reason, unable to: (1) obtain for the District a prescription for opioid antagonists from a health care professional who has been delegated prescriptive authority for opioid antagonists in accordance with Section 5-23 of the Alcoholism and Other Drug Abuse Dependency Act, or (2) fill the District's prescription for undesignated school opioid antagonists.

Upon any administration of an undesignated epinephrine auto-injector or an opioid antagonist, the Superintendent or designee(s) must ensure all notifications required by State law and administrative procedures occur.

<u>Upon implementation of this policy, the protections from liability and hold harmless provisions as explained in Section 22-30(c) of the School Code apply.</u>

No one, including without limitation parents/guardians of students, should rely on the District for the availability of an epinephrine auto-injector and/or opioid antagonist. This policy does not guarantee the availability of an epinephrine auto-injector and/or opioid antagonist; students and their parents should consult their own physician regarding such medication(s).

Nothing in this policy shall prohibit any school employee from providing emergency assistance to students, including administering medication.

The building principal shall include this policy in the Student Handbook and shall provide a copy to the parent(s)/guardian(s) of students.

LEGAL REF.: 105 ILCS 5/10-20,14b, 5/10-22.21b, and 5/22-30.

ADMIN. PROC.: 7:270-AP (Dispensing Medication), 7:270-E (School Medication Authorization Form)

Approved: April 8, 2002

Revised:

#### **Administrative Procedure - Dispensing Medication**

These procedures are designed for the implementation of policy 8310 and are to be followed unless they are in conflict with the prescriber's instructions. In case of any conflict, the district employee will follow the instructions from the prescriber.

	Action
Parents/Guardians	1. Ask the child's physician, dentist, or other health care provider who has authority to prescribe medications if a medication, either prescription or non-prescription, must be administered during the school day or school-related events. <i>Medication</i> includes, without limitation, an epinephrine auto-injector ( <i>EpiPen</i> ®) and asthma inhaler medication (105 ILCS 5/22-30(a)).
	For a student with diabetes: The parent(s)/guardian(s) are responsible to share the health care provider's instructions with the school. When the student is at school, the student's diabetes will be managed according to a diabetes care plan, if one exists, and not this Procedure. See Care of Students with Diabetes Act, 105 ILCS 5/10-22.21b. Last, the Public Self-Care of Diabetes Act allows a person with diabetes (or parent(s)/guardian(s) of a person with diabetes) to self-administer insulin (or administer insulin) in any location, public or private, where the person is authorized to be irrespective of whether the injection site is uncovered during or incidental to the administration of insulin (410 ILCS 135/).
	2. If so, ask the health care provider to complete a School Medication Authorization Form. This form must be completed and given to the school before the school will store or dispense any medication and before a child may possess asthma medication or an epinephrine auto injector.
,	If a student is on a medication indefinitely, the parent(s)/guardian(s) must file a new "School Medication Authorization Form" every year.
	3. Bring the medication to the health/nurse's office. If the medicine is for asthma or is an epinephrine auto-injector, a student may keep possession of it for immediate use at the student's discretion: (1) while in school, (2) while at a school-sponsored activity, (3) while under the supervision of school personnel, or (4) before or after normal school activities, such as while in before-school or after-school care on school-operated property (105 ILCS 5/22-30(e)).
	4. For asthma inhalers, provide the prescription label. Bring other prescription medications to the school in the original package or appropriately labeled container. The container shall display:
	Student's name Prescription number Medication name and dosage Administration route and/or other direction Dates to be taken Licensed prescriber's name Pharmacy name, address, and phone number Name of Pharmacist
	5. Bring non-prescription medications to school in the manufacturer's original container with the label indicating the ingredients and the student's name affixed.
i i	At the end of the treatment regime, or at the end of the school year, retrieve any unused

Actor	Action
Health/Nurse's Office Personnel	Provide a copy of these procedures, as well as a "School Medication Authorization Form," to inquiring parents/guardians.
	Whenever parent(s)/guardian(s) bring medication for a student to the health/nurse's office, contact the school nurse.
	If the school nurse is unavailable, accept the medication, provided the parent(s)/guardian(s) submits a completed "School Medication Authorization Form" and the medication is packaged in the appropriate container.
	Put the medication in the appropriate locked drawer or cabinet. Medications requiring refrigeration should be refrigerated in a secure area. Tell the school nurse about the medication as soon as possible.
School Nurse (certificated	Ensure that the parent(s)/guardian(s) who brings medication for his or her child has complied with the parent(s)/guardian(s) responsibilities as described in this administrative procedure.
school nurse or non-certificated registered professional nurse)	In conjunction with the licensed prescriber and parent(s)/guardian(s), identify circumstances, if any, in which the student may self-administer the medication and/or carry the medication. A student will be permitted to carry and self-administer medication for asthma or an epinephrine auto-injector.
	Store the medication in a locked drawer or cabinet. A student may keep possession of medication for asthma or an epinephrine auto-injector. Medications requiring refrigeration should be refrigerated in a secure area.
	Plan with the student the time(s) the student should come to the nurse's office to receive medications.
	Document each dose of the medication in the student's individual health record. Documentation shall include date, time, dosage, route, and the signature of the person administering the medication or supervising the student in self-administration.
	Assess effectiveness and side effects as required by the licensed prescriber. Provide written feedback to the licensed prescriber and the parent(s)/guardian(s) as requested by the licensed prescriber.
	Document whenever the medication is not administered as ordered along with the reasons.
	If the parent(s)/guardian(s) does not pick up the medication by the end of the school year, discard the medication in a medically appropriate way in the presence of a witness.
Building Principal	Supervise the use of these procedures.
or designee	Perform any duties described within these procedures for school office personnel, as needed.
	Perform any duties described within these procedures for school nurses, as needed, or delegate those duties to appropriate staff members, school nurses, non-certified and registered professional nurses and administrators. No staff member shall be required to administer medications to students with the exception of school nurses, non-certified and registered professional nurses, and administrators.
	Make arrangements, in conjunction with the parent(s)/guardian(s), supervising teachers, and/or bus drivers for the student to receive needed medication while on a field trip.

## Administrative Procedure - Checklist for District Supply of Undesignated Epinephrine Auto-Injectors and/or Opioid Antagonists

The Superintendent, school nurse, and/or other necessary school officials should consult the Board Attorney to develop a plan to implement Section 22-30 of the School Code.

Obtain a prescription to maintain a supply of either or both undesignated epinephrine auto-injector(s) (UEAs) and/or opioid antagonist(s) (OAs) in the District's name pursuant to 105 ILCS 5/22-30(f), amended by P.A.s 98-795 and 99-480.

Designate a secure location(s) to store UEAs and/or OAs where persons needing these medications are most at risk (105 ILCS 5/22-30(f), amended by P.A.99-480). For UEAs, this includes but is not limited to, classrooms and lunchrooms (Jd..).

Develop a method for maintaining an inventory of UEAs and OAs. The inventory should list the expiration dates of the UEAs and OAs.

Identify procedures for a log or other recordkeeping of provisions, or administrations of UEAs or OAs.

Maintain a list in each building administrator and/or his or her corresponding school nurse's office that includes the names of trained personnel who have received a statement of certification pursuant to State law.

Develop procedures to implement the prescribed standing protocol for the provision, or administration of UEAs and/or OAs, including calling 911 and noting any instructions given by Emergency Management Services (EMS) (23 Ill.Admin. Code §1.540(d)). Upon any administration of *any* epinephrine auto-injector or opioid antagonist, procedures must include:

- 1. Immediate activation of the EMS system (105 ILCS 5/22-30(f-5), amended by P.A.99480).
- 2. Notification to the student's parent, guardian, or emergency contact, if known (Jd...).
- 3. The following reports and/or notifications by the school nurse when a(n):

#### **UEA** was administered OA was administered a. The health care professional who provided the a. Physician, physician assistant, or advance practice nurse who provided the standing protocol or prescription for the prescription for the opioid antagonist within 24 hours UEA within 24 hours (105 ILCS 5/22-30(f-10)). (105 ILCS 5/22-30(f-10), amended by P.A. 99-480). b. Ill. State Board of Education (ISBE) within three (3) b. Ill. State Board of Education (ISBE) within three (3) days (105 ILCS 5/22-30(i)). Notification will be on an days (105 ILCS 5/22-30(i-5), amended by P.A. 99-480). ISBE prescribed form, and will include: Notification will be on an ISBE-prescribed form, and will include: i. Age and type of person receiving epinephrine i. Age and type of person receiving the opioid (student, staff, visitor); antagonist (student, staff or visitor); ii. Any previously known diagnosis of severe allergy; ii. Location where symptoms developed; iii. Type of person administering the opioid antagonist iii. Trigger that precipitated allergic episode; (school nurse or trained personnel); and iv. Location where symptoms developed; iv. Any other information required by ISBE on the form. v. Number of doses administered; vi. Type of person administering epinephrine (school nurse, trained personnel, student); and vii. Any other information required by ISBE on the form.

Determine how the District will identify the student populations whose parents/guardians:

- 1. Have not completed and signed a School Medication Authorization Form, or
- 2. Have not provided an epinephrine auto-injector and/or opioid antagonist, as applicable to the student, for a student for use at school, even though they have completed the School Medication Authorization Form.

Determine when the school nurse will provide or administer the UEAs and/or OAs, as applicable, to students.

The school nurse or trained personnel may:

- 1. Provide a UEA or OA, as applicable to the situation, that meets the prescription on file in the School Medication Authorization Form to:
  - a. Any student for his or her self-administration only (105 ILCS 5/22-30(a) & (b-10), amended by P.A. 99-480), or
  - b. A student in need of his or her student-specific or UEA who has an Individual Health Care Action Plan, Food Allergy Emergency Action Plan and Treatment Authorization Form, or Section 504 plan. Such medication may be provided by any personnel authorized. (105 ILCS 5/22-30 (b-5). Any personnel authorized under these plans is limited to a school nurse, registered nurse, or a properly trained administrator in accordance with Section 10-22.21b of the School Code.
- 2. Administer a UEA to any student that the school nurse or *trained personnel* in good faith believes is having an anaphylactic reaction even though the parent(s)/guardian(s) has not completed and signed a *School Medication Authorization Form* or otherwise granted permission to administer the epinephrine autoinjector (105 ILCS 5/22-30(b-10), amended by P.A. 98-795).
- 3. Administer an OA to any student that the school nurse or *trained personnel* in good faith believes is having a reaction to an opioid overdose even though the parent(s)/guardian(s) has not completed and signed a *School Medication Authorization Form* or otherwise granted permission to administer the opioid antagonist (105 ILCS 5/22-30(b-10), amended by P.A. 99-480).

## **Glenbrook High School District 225 Glenbrook North High School Glenbrook South High School**

# **School Medication Authorization Form**

	IC (Over-the-Counter)	MEDICATIONS
administration of any medicatio over-the-counter medication(s)	n at school. Please complete the fo you would like your child to have p	an(s) and licensed healthcare provider for llowing information, circle your preference of which ermission to take, while at school, and provide the kept on file in the Health Office/Nurse's Office and
Student Name:	ID	¥
	Tylenol or Advil	Permission
	you would like your child to have p of the medications listed below (a	permission to take during the school day. The Health scetaminophen and ibuprofen).
Tylenol 325mg 1-2 tablets (Every 6 hours as needed)	Advil 200mg, 1-2 tablets (Every 6 hours as needed)	Tylenol 500mg (Extra strength) 1 -2 tablets (Every 6 hours as needed)
The school will only administer	the medication circled and will not	substitute.
Par	ent/Guardian & Physic	cian Authorization
	ool District 225 to administer said to a minister said to a ministration I	nedications to my child, on an as needed basis, rocedures and Guidelines.
Parent/Guardian Signature _		Date
Physician Signature		Date

Physician's Name (Printed)

\_Date\_\_\_\_\_

\_Date\_\_\_\_

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### Glenbrook High School District 225 Glenbrook North High School Glenbrook South High School

## School Medication Authorization Form PRESCRIPTION MEDICATIONS

Student Name	ID#

Illinois State Law requires written permission by a parent(s)/guardian(s) and licensed healthcare provider for administration of any medication at school. Please complete the following information and have your child's physician provide the appropriate instructions and signatures at the bottom of this form. **Prescription medication orders must be renewed annually.** Parents are responsible for providing the school with all medications in the original prescription-labeled, or manufacturer-labeled bottle.

#### Asthma/Allergies/Diabetes:

Students with asthma or severe allergies are strongly encouraged to carry their rescue inhalers or Epi-pens on their person. Back-up medications may also be stored in the Health Office/Nurse's Office, and is highly encouraged, so that they are readily available in the event of an emergency. Additionally, a nebulizer is available for use with a valid doctor's order. Diabetic students may keep a supply of insulin, syringes, and a glucometer in the Health Office/Nurse's Office for their use, along with any other needed testing supplies. Most diabetic students keep their supplies in a plastic box labeled with their name and ID number. Diabetic students may store food or snacks in the refrigerator. Please supply the Health Office/Nurse's Office with your child's most current Care Plan.

#### PRESCRIPTION MEDICATIONS

Medication Name and Dosage:	Medication Name and Dosage:
Frequency/Instructions:	Frequency/Instructions:
Diagnosis/Indication:	Diagnosis/Indication:
Possible Side Effects:	Possible Side Effects:

## Parent/Guardian & Physician Authorization

I authorize Glenbrook High School District 225 to administer said medications to my child, on an as needed basis, according to School Board Policy and Medication Administration Procedures and Guidelines.

Parent/Guardian Signature	Date	
Physician Signature	Date	
Physician's Name (Printed)	Date	
For parents/guardians of students who need to carry and epinephrine auto-injector:  I authorize Glenbrook School District 225 and its employees administer his or her asthma medication and/or epinephrine a sponsored activity, (3) while under the supervision of school such as while in before-school or after-school care on school-to inform parent(s)/guardian(s) that it, and its employees and advanced practice nurse providing a standing protocol or pres no liability or professional discipline, except for willful and wadministration or a student's self-carry and self-administration	and agents, to allow my child or ward to self-carry and self- uto-injector: (1) while in school, (2) while at a school personnel, or (4) before or after normal school activities, operated property. Illinois Law requires the school district agents, including a physician, physician assistant, or ccription for a school epinephrine auto-injector, are to incur- vanton conduct, as a result of any injury arising from the	
regardless of whether authorization was given by the student' physician assistant, or advanced practice nurse (105 ILCS 5/2		
Please initial to indicate (a) receipt of this information, an her asthma medication or epinephrine auto-injector.	d (b) authorization for your child to carry and use his or	
Parent/Guardian initials		
For all parents/guardians: By signing below, I agree that I am primarily responsible for event that I am unable to do so or in the event of a medical enemployees and agents, on my behalf, to administer or to atten administer pursuant to State Law, while under the supervision prescribed medication in the manner described above. This in injectors or opioid antagonists to my child when, in good faith or reaction to an opioid overdose, whether such reactions are 99-480). I acknowledge that it may be necessary for the action individual other than a school nurse and specifically	nergency, I hereby authorize School District 225 and its apt to administer to my child (or to allow my child to self-in of the employees and agents of the school district), lawfully includes administration of undesignated epinephrine autoh, it is believed my child is having an anaphylactic reaction known to me or not (105 ILCS 5/22-30, amended by P.A. dministration of medications to my child to be performed	
I agree to indemnify and hold harmless Glenbrook School Disexcept a claim based on willful and wanton conduct, arising of medication.		
Parent/Guardian Name (Printed)		
Parent/Guardian Signature		
Primary Phone Number:		
Emergency Phone Number:		

#### Glenbrook High School District #225

#### BOARD POLICY: SUICIDE AND DEPRESSION AWARENESS AND PREVENTION

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#### Section A - Purpose

Youth suicide has a dramatic effect on the school environment. It also affects the staff, diminishing its ability to educate students. Suicide and depression awareness and prevention are important to the overall wellbeing of students and are, as a result, Board goals.

#### Section B – Suicide and Depression Awareness and Prevention Program

The Superintendent or designee shall develop, implement and maintain a suicide and depression awareness and prevention program (Program) that advances the Board's goal of increasing awareness and prevention of suicide and depression. This program must be consistent with School Code Section 5/2-3.163 (c)(2)-(7). The program shall include:

- 1. Protocols for administering youth suicide awareness and prevention education to students and staff.
  - a. For students, implementation will incorporate curriculum content that implements 105 ILCS 5.2-3.139 and 105 ILCS 5/27-7, which requires education for students to develop a sound mind and a healthy body.
  - b. For staff, implementation will incorporate staff development and teachers' institutes under 105 ILCS 5/13-14.8, which requires training as to the warning signs of suicidal behavior.
- 2. Procedures for methods of suicide prevention with the goal of early identification and referral of students possibly at risk of suicide.
  - a. For students in grades 79-12, implementation shall incorporate the training required by 105 ILCS 5/10-22.39 for school guidance counselors, teachers, school social workers, and other school personnel who work with students to identify the warning signs of suicidal behavior in adolescents and teens along with appropriate intervention and referral techniques, including methods of prevention, procedures for early identification, and referral of students at risk of suicide.
  - b. For all students, implementation shall incorporate Illinois State Board of Education (ISBE)-recommended guidelines and educational materials for staff training and professional development, along with ISBE-recommended resources for students containing age-appropriate educational materials on youth suicide awareness, if available on ISBE's website.

#### BOARD POLICY: SUICIDE AND DEPRESSION AWARENESS AND PREVENTION

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- 3. Methods of intervention, including procedures that address an emotional or mental health safety plan for use during the school day and at school-sponsored events for a student identified as being at increased risk of suicide. Implementation will incorporate paragraph number b. 2, above, along with:
  - a. Implementing the goals and benchmarks of the Ill. Learning Standards and 405 ILCS 49/15(b) (requiring student social and emotional development in the District's educational program);
  - b. <u>Implementing guidance and counseling program(s) for students, and 105 ILCS 5/10-22.24a and 22.24b, which allow a qualified guidance specialist or any licensed staff member to provide school counseling services.</u>
  - c. <u>Implementing the Children's Mental Health Act of 2003, 405 ILCS 49/ (requiring protocols for responding to students with social, emotional, or mental health issues that impact learning ability); and</u>
  - d. <u>Identify State and/or federal resources that address emotional or mental health safety</u> plans for students who are possibly at an increased risk for suicide, available on the ISBE's website.
- 4. A process to incorporate ISBE-recommended resources on youth suicide awareness and prevention programs, including current contact information for such programs in the District's Suicide and Depression Awareness and Prevention Program.

#### Section C – Illinois Suicide Prevention Strategic Planning Committee

The Superintendent or designee shall attempt to develop a relationship between the District and the Illinois Suicide Prevention Strategic Planning Committee, the Illinois Suicide Prevention Coalition Alliance, and/or a community mental health agency. The purpose of the relationship is to discuss how to incorporate the goals and objectives of the Illinois Suicide Prevention Strategic Plan into the District's Suicide Prevention and Depression Awareness Program.

#### Section D – Information to Staff, Parents/Guardians, and Students

The Superintendent shall inform each school district employee about this policy and ensure its posting on the District's website. The Superintendent or designee shall provide a copy of this policy to the parent or legal guardian of each student enrolled in the District.

#### Section E – Implementation

This policy shall be implemented in a manner consistent with State and federal laws, including the Children's Mental Health Act of 2003, 405 ILCS 49, Mental Health and Developmental Disabilities Confidentiality Act, 740 ILCS 110, and the individuals with Disabilities Education Act, 42 U.S.C. §12101, et seq.

#### BOARD POLICY: SUICIDE AND DEPRESSION AWARENESS AND PREVENTION

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The District, Board, and its staff are protected from liability by the Local Governmental and Governmental Employees Tort Immunity Act. Services provided pursuant to this policy: (1) do not replace the care of a physician licensed to practice medicine in all of its branches or a licensed medical practitioner or professional trained in suicide prevention, assessments and counseling services, (2) are based on existing resources within the District, (3) do not extend beyond the school day and/or school-sponsored events, and (4) cannot guarantee or ensure the safety of a student or the student body.