

Approved by K-12 Board Action #25-13, February 19, 2025

Policy

The SDABC K-12 Board of Education recognizes that parents are the primary caregivers and responsible for administering or supervising their child's medication. However, in circumstances where certain students require medication to be administered during school hours or during school-sponsored activities, and a parent is unavailable, schools are expected to assist. If no alternative is available, designated staff—such as secretaries, teachers, teacher assistants, or administrative officers—may administer or supervise medication. This Policy applies to all schools under the direction of the BC Conference of Seventh-day Adventist Church.

Definitions

- Administration of Medication: the act of giving or applying medication, including dispensing of medication as well as assisting and supervising students who take their own medication.
- Non-prescription Medication: Over-the-counter drugs (such as Tylenol or cough syrup) not generally prescribed by a physician.
- Prescription Medication: Prescribed by a physician for short term conditions (such as antibiotics, etc.) or chronic conditions (such as asthma, epilepsy, allergies, attention disorders, etc.). Prescribed medications are normally given in a standard dosage and most at preset times.

Procedures for Administering Medication (Non-Emergency)

1. In non-emergency situations, school personnel are to administer, or supervise the self-administration of, prescription or non-prescription medication to a student only when absolutely necessary and if all of the following conditions are met:
 - a. The medication is required while the student is attending school.
 - b. A parent has requested the school's assistance and has signed a release prior to administration of medication (see [Appendix E - Dispensing Medication Permission Form](#)).
 - c. A copy of [Appendix E](#) shall be filed.
 - d. Medication should be brought to school in an original labelled container by a pharmacy or physician, accompanied by clear and concise instructions, which includes the prescription directions and doctor's name.
 - e. The parent will provide school personnel with specific training concerning the administration of the medication by appropriate professional health care personnel, to the satisfaction of the employee and the health care professional; More than one employee at a school shall be adequately instructed in the administration of the medication in order to provide an alternative person in cases of absence or unavailability.
 - f. It is the parent's responsibility to ensure that all prescribed medications are adequately supplied and maintained.
2. The Principal shall make certain that procedures are in place to ensure that:
 - a. Upon receipt of [Appendix E](#), the Principal will develop a school plan of action, including identifying which staff members will administer medication and provide those staff members with instructions.

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- b. All [Appendix E - Dispensing Medication Permission Forms](#) must be kept in the student's file and a copy placed with the medication.
 - c. Teachers-on-Call and substitute teacher assistants must be provided a copy of medical information about any child in that class who either regularly or in an emergency may require medication.
 - d. Bus drivers must be informed about any students who may require the administration of medication while on the bus, especially students subject to anaphylactic reactions. It is the parent's responsibility to ensure that emergency medication (eg. auto-injector) is available on board the bus except where the school provides it for school sponsored field trips.
 - e. School staff supervising field trips must be made aware of any students requiring medication during this period, including the reason for the medication, name of the medication, time(s) medication is required and dosage; and shall ensure administration of medication and maintain a record of the administration. (This includes emergency medication such as ANA kits.)
 - f. For students who require ongoing medication, the principal shall provide staff with the necessary guidelines and review them with any staff members who may be responsible for administering medication. These guidelines must be reviewed with all staff at least once per year, at the start of the school year.
 - g. The parent is informed of his/her responsibility to update medical information every September and as the need arises and to ensure the prescribed medicine supply is maintained. The parents' signature must be obtained each September, authorizing any school-required medical interventions. Parents are required to upgrade information if there is a change of medication or frequency of medication.
3. If a school is required to store medication, the principal shall arrange to have medication stored centrally in the school in a safe and appropriate place.
 - a. All prescribed medication must be in original labelled containers, accompanied by appropriate instructions, which includes the prescription directions and doctor's name.
 - b. In the event that the supply of medication stored at the school is used up, it is the obligation of the parent to renew the supply and keep the school stocked with the medication.
 - c. All prescribed medication is to be kept in a secure but normally unlocked place during school hours and locked at other times.
 - d. Only authorized school personnel shall have access to medication which is stored in a central location. Any unused or expired medication shall be returned to the parent.
 - e. These should be stored out of the reach of students in a designated place which is cool, dry and dark. Emergency medication should be easily accessible to authorized staff. It should be locked up during school hours only when the direct supervision of the designated storage place by a staff member is not possible. In those cases, the location of the key to the locked storage space must be known and available to the staff member(s) designated to administer medication.
 4. If a parent requests, and when absolutely necessary, the principal shall arrange for the supervision of a student who leaves a class for the purpose of self-administration of medication.
 5. If requested in writing by the physician, a teacher will observe and report any change in a child's behaviour while on medication. Staff should communicate immediately with parents

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and physicians concerning any problems encountered with medication. This is particularly important where the dosage may need to be regulated following a trial period.

6. Parents of older students may choose to allow them to administer their own medication. In administering medication to students, care must be taken to ensure appropriate privacy and to avoid drawing attention which might embarrass a student.
7. A record of all medication administered must be kept on a form (see *Administration of Medication Tracking Form*) which should be stored with the medication. This applies to both routine and emergency situations. The tracking form shall show the date, time and dose of each medication administration, any other pertinent information, and the initials of the administering person.
8. In cases where medication is to be administered through injection or where other specialized medical procedures are involved (i.e. catheterization, ostomy care, etc.), a health care plan must be drawn up in consultation with a Public Health Nurse before the student is admitted. Schools which encounter such situations should contact the SDABC Office of Education for further clarification.

Procedures for Administering Medication (Emergency)

1. In emergency situations, school personnel have a duty to provide reasonable assistance to a student within their abilities, including the administration of medication where necessary even without medical training.
2. In all emergencies, a staff member should contact the parent (or the emergency contact if the parent cannot be contacted) as quickly as possible or the student taken to a hospital/medical clinic. To this end, the appropriate telephone numbers should be available on the student's permission form and record of medication. If deemed necessary, 911 should be called.
3. In the case of an anaphylactic reaction, it is important for staff members to deal with the reaction immediately, then to call 911 as soon as possible, and finally to contact the parent or guardian. There is no danger in responding quickly to the onset of a reaction, and grave danger in reacting too slowly (see *Anaphylaxis & At Risk Anaphylaxis Policy, SDABC K-12 Board Policy #21-37*).
4. Procedures for dealing with specific emergency situations such as seizures and anaphylactic reactions must be discussed with staff and posted appropriately. Administrators and nurses should arrange to provide true to life demonstrations of approved processes for dealing with these emergency reactions. These demonstrations must be conducted at least once each year while an at-risk student is registered at the school.
5. An emergency incident report must be filed with each emergency situation.

Review

This policy will be reviewed and updated as needed.