

1 **Bigfork School District**

2  
3 **STUDENTS**

3416

4  
5 Administering Medication to Students

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7 “Medication” means prescribed drugs and medical devices that are controlled by the U.S. Food  
8 and Drug Administration and are ordered by a healthcare provider. It includes over-the-counter  
9 medications prescribed through a standing order by the school physician or prescribed by the  
10 student’s healthcare provider.

11  
12 Except in an emergency situation, only a qualified healthcare professional may administer a drug  
13 or a prescription drug to a student under this policy. Diagnosis and treatment of illness and the  
14 prescribing of drugs are never the responsibility of a school employee and should not be  
15 practiced by any school personnel.

16  
17 Administering Medication

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19 The Board shall permit administration of medication to students in schools in its jurisdiction. A  
20 school nurse or other employee who has successfully completed specific training in  
21 administration of medication, pursuant to written authorization of a physician or dentist and that  
22 of a parent, an individual who has executed a caretaker relative educational authorization  
23 affidavit, or guardian, may administer medication to any student in the school or may delegate  
24 this task pursuant to Montana law.

25  
26 Emergency Administration of Medication

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28 In the event of an emergency, a school nurse or trained staff member, exempt from the nursing  
29 license requirement under § 37-8-103(1)(c), MCA, may administer emergency medication to any  
30 student in need thereof on school grounds, in a school building, at a school function, or on a  
31 school bus according to a standing order of an authorized physician or a student’s private  
32 physician. In the event that emergency medication is administered to a student, the school nurse  
33 or staff member shall call emergency responders and notify the student’s parents/guardians. A  
34 building administrator or school nurse shall enter any medication to be administered in an  
35 emergency on an individual student medication record and retain the documentation.

36  
37 Assisting Students with Self-Administration of Medication

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39 A building principal or other school administrator may authorize, in writing, any school  
40 employee:

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42 To assist in self-administration of any drug that may lawfully be sold over the counter  
43 without a prescription to a student in compliance with the written instructions and with  
44 the written consent of a student’s parent or guardian; and

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46 To assist in self-administration of a prescription drug to a student in compliance with

written instructions or standing order of an authorized physician or a student's private physician and with the written consent of a student's parent or guardian.

A school employee authorized, in writing, assist students with self-administration of medications, may only rely on the following techniques:

- Making oral suggestions, prompting, reminding, gesturing, or providing a written guide for self-administering medications;
- Handing to a student a prefilled, labeled medication holder or a labeled unit dose container, syringe, or original marked and labeled container from a pharmacy;
- Opening the lid of a container for a student;
- Guiding the hand of a student to self-administer a medication;
- Holding and assisting a student in drinking fluid to assist in the swallowing of oral medications; and
- Assisting with removal of a medication from a container for a student with a physical disability that prevents independence in the act.
- Other guidance or restrictions previously provided in writing to the school by a student's parent, an individual who has executed a caretaker relative educational authorization affidavit, or guardian is on file.

#### Self-Administration or Possession of Asthma, Severe Allergy, or Anaphylaxis Medication

Students with allergies or asthma may be authorized by the building principal or Superintendent, in consultation with medical personnel, to possess and self-administer emergency medication during the school day, during field trips, school-sponsored events, or while on a school bus. The student shall be authorized to possess and self-administer medication if the following conditions have been met:

- A written and signed authorization from the parents, an individual who has executed a caretaker relative educational authorization affidavit, or guardians for self-administration of medication, acknowledging that the District or its employees are not liable for injury that results from the student self-administering the medication.
- The student shall have the prior written approval of his/her primary healthcare provider. The written notice from the student's primary care provider shall specify the name and purpose of the medication, the prescribed dosage, frequency with which it may be administered, and the circumstances that may warrant its use.
- Documentation that the student has demonstrated to the healthcare practitioner and the school nurse, if available, the skill level necessary to use and administer the medication.
- Documentation of a doctor-formulated written treatment plan for managing asthma, severe allergies, or anaphylaxis episodes of the student and for medication use by the student during school hours.

Authorization granted to a student to possess and self-administer medication shall be valid for

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4 the current school year only and shall be renewed annually. A student's authorization to possess  
5 and self-administer medication may be limited or revoked by the building principal or other  
6 administrative personnel.

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8 If provided by the parent, an individual who has executed a caretaker relative educational  
9 authorization affidavit, or guardian, and in accordance with documentation provided by the  
10 student's doctor, backup medication shall be kept at a student's school in a predetermined  
11 location or locations to which the student has access in the event of an asthma, severe allergy, or  
12 anaphylaxis emergency.

13  
14 Immediately after using epinephrine during school hours, a student shall report to the school  
15 nurse or other adult at the school who shall provide follow up care, including making a call to  
16 emergency responders.

#### 17 18 Self-Administration of Other Medication

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20 The District shall permit students who are able to self-administer specific medication to do so  
21 provided that all of the following have occurred:

- 22  
23 • A physician, dentist, or other licensed health care provider provides a written order for  
24 self-administration of said medication;  
25 • Written authorization for self-administration of medication from a student's parent, an  
26 individual who has executed a caretaker relative educational authorization affidavit, or  
27 guardian is on file; and  
28 • A principal and appropriate teachers are informed that a student is self-administering  
29 prescribed medication.

#### 30 31 Administration of Glucagons

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33 School employees may voluntarily agree to administer glucagons to a student pursuant to § 20-5-  
34 412, MCA, only under the following conditions: (1) the employee may administer glucagon to a  
35 diabetic student only in an emergency situation; (2) the employee has filed the necessary  
36 designation and acceptance documentation with the District, as required by § 20-5-412(2), MCA,  
37 and (3) the employee has filed the necessary written documentation of training with the District,  
38 as required by § 20-5-412(4), MCA. Designation of staff is to be made by a parent, and individual  
39 who has executed a caretaker relative authorization affidavit, or guardian of a diabetic student, and  
40 school employees are under no obligation to agree to designation. Glucagon is to be provided by the  
41 parent or guardian. All documentation shall be kept on file.

#### 42 43 Handling and Storage of Medications

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45 The Board requires that all medications, including those approved for keeping by students for  
46 self-medication, be first delivered by a parent, an individual who has executed a caretaker

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5 relative educational authorization affidavit, or other responsible adult to a nurse or employee  
6 assisting with self-administration of medication. A nurse or assistant:

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- 8 • Shall examine any new medication to ensure it is properly labeled with dates, name of  
9 student, medication name, dosage, and physician's name;
  - 10 • Shall develop a medication administration plan, if administration is necessary for a  
11 student, before any medication is given by school personnel;
  - 12 • Shall record on the student's individual medication record the date a medication is  
13 delivered and the amount of medication received;
  - 14 • Shall store medication requiring refrigeration at 36° to 46° F;
  - 15 • Shall store prescribed medicinal preparations in a securely locked storage compartment;  
16 and
  - 17 • Shall store controlled substances in a separate compartment, secured and locked at all  
18 times.
  - 19 • All non-emergency medication shall be kept in a locked, nonportable container, stored in  
20 its original container with the original prescription label. Epinephrine, naloxone, and  
21 student emergency medication may be kept in portable containers and transported by the  
22 school nurse or other authorized school personnel.
  - 23 • Food is not allowed to be stored in refrigeration unit with medications.
  - 24 • Shall notify the building administrator, school district nurse, and parent or guardian of  
25 any medication error and document it on the medication administration record.
- 26

27 The District shall permit only a forty-five-(45)-school-day supply of a medication for a student to  
28 be stored at a school; and all medications, prescription and nonprescription, shall be stored in  
29 their original containers.

30

31 The District shall limit access to all stored medication to those persons authorized to administer  
32 medications or to assist in the self-administration of medications. The District requires every  
33 school to maintain a current list of those persons authorized by delegation from a licensed nurse  
34 to administer medications.

35

36 The District may maintain a stock supply of auto-injectable epinephrine to be administered by a  
37 school nurse or other authorized personnel to any student or nonstudent as needed for actual or  
38 perceived anaphylaxis. If the district intends to obtain an order for emergency use of epinephrine  
39 in a school setting or at related activities, the district shall adhere to the requirements stated in  
40 law.

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42 The District may maintain a stock supply of an opioid antagonist to be administered by a school  
43 nurse or other authorized personnel to any student or nonstudent as needed for an actual or  
44 perceived opioid overdose. A school that intends to obtain an order for emergency use of an  
45 opioid antagonist in a school setting or at related activities shall adhere to the requirements in  
46 law.

Disposal of Medication, Medical Equipment, Personal Protective Equipment

The District requires school personnel either to return to a parent, an individual who has executed a caretaker relative educational authorization affidavit, or guardian or, with permission of the parent, an individual who has executed a caretaker relative educational authorization affidavit, or guardian, to destroy any unused, discontinued, or obsolete medication. A school nurse, in the presence of a witness, shall destroy any medicine not repossessed by a parent or guardian within a seven-(7)-day period of notification by school authorities.

Medical sharps shall be disposed of in an approved sharps container. Building administrators should contact the school nurse or designated employee when such a container is needed. Sharps containers are to be kept in a secure location in the school building. Disposal of sharps container, medical equipment, and personal protective equipment is the responsibility of the school nurse or designated employee in accordance with the Montana Infectious Waste Management Act and the manufacture guidelines specific to the container or equipment.

Legal Reference:	§ 20-5-412, MCA	Definition – parent-designated adult administration of glucagons – training
	§ 20-5-420, MCA	Self-administration or possession of asthma, severe allergy, or anaphylaxis medication
	§ 20-5-421, MCA	Emergency use of epinephrine in school setting
	§ 37-8-103(1)(c), MCA	Exemptions – limitations on authority
	ARM 24.159.1601, et seq	Delegation of Nurse Duties
	§ 20-5-426, MCA	Emergency use of an opioid antagonist in school setting – limit on liability
	§ 75-10-1001, et seq	Infectious Waste Management Act
	37.111.812, ARM	Safety Requirements
	10.55.701(s), ARM	Board of Trustees

Policy History:

Adopted on:

Revised on:

1 **Bigfork School District**

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3 **STUDENTS**

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4  
5 Use of Restraint, Seclusion, and Aversive Techniques for Students

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7 Conduct of Employees Directed Toward Students

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9 The use by appropriately trained District personnel towards or directed at any student of any  
10 form of restraint or seclusion as defined in this policy, is prohibited except in circumstances  
11 where proportional restraint or seclusion of a student is necessary when a student's conduct  
12 creates a reasonable belief in the perspective of a District employee, that the conduct of the  
13 student has placed the student, the employee, or any other individual in imminent danger of  
14 serious bodily harm.

15  
16 The employee or any employee who is a witness to this event shall immediately seek out the  
17 assistance of the school's administration or, if such administrator is not available, a certified or  
18 classified employee with special training in seclusion and restraint, if available. Upon the arrival  
19 of such individual, the administrator or if no administrator is available, the most senior trained  
20 individual on seclusion or restraint shall take control over the situation.

21  
22 Seclusion or restraint of a student shall immediately be terminated when it is decided that the  
23 student is no longer an immediate danger to him or herself or to any other third person or if it is  
24 determined that the student is exhibiting extreme distress or at such time that appropriate  
25 administrative personnel have taken custody of the child or upon such time that the parent/legal  
26 guardian of the child has retaken custody of the child.

27  
28 Regardless of employee training status, no District personnel shall use any form of aversive  
29 technique or corporal punishment against any student. All seclusion will be in compliance with a  
30 student's IEP or Section 504 Plan.

31  
32 If a situation occurs where a properly trained District employee must use acts of restraint or  
33 seclusion against a school student, the following shall occur:

- 34
- 35 1. The employee shall immediately report to their building principal, in writing, the  
36 following information:
    - 37 A. The date the event occurred;
    - 38 B. The circumstances leading to the event;
    - 39 C. The student involved; and
    - 40 D. Other witnesses or participants to the event.
  - 41
  - 42 2. The building principal shall notify the Superintendent's office of the event, providing the  
43 Superintendent's office with a copy of the report of events.
  - 44
  - 45 3. The building principal shall ascertain if any of the school's video equipment captured the  
46 event on a recording. If such event was captured on recording, the principal shall take all

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4 best efforts to maintain a copy of the recording and provide such to the Superintendent's  
5 Office for the Superintendent's official records of the event.  
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- 7 4. The Superintendent or designee shall ascertain the special needs status of the student  
8 involved in the seclusion or restraint and shall ascertain and maintain documentation as to  
9 whether or not such events were consistent with or contraindicated due to the student's  
10 psychiatric, medical, or physical condition(s).  
11
- 12 5. The Superintendent or designee of the Superintendent shall notify the parent or legal  
13 guardian of the subject student of the situation and the event of restraint or seclusion via  
14 telephone and provide the parent/legal guardian with the name and telephone contact  
15 information of the building principal where the parent may obtain additional information  
16 regarding the event.  
17
- 18 6. The Superintendent or designee of the Superintendent shall provide the parent/legal  
19 guardian of the student with written notice of the event of restraint or seclusion of their  
20 student.  
21
- 22 7. The Superintendent's **building Principal's** office shall maintain documentation as to  
23 events of restraint and seclusion and the **Principal/Superintendent** shall prepare any and  
24 all necessary reports to legal entities upon whom such reports are or may become due  
25 pursuant to State and federal regulations.  
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### 27 Training of School Personnel

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29 As part of the training and preparation of each certified administrator, certified teacher, and in-  
30 building classified employee of the District, the following shall occur:  
31

- 32 1. Training to personnel as to proper situations and events leading to student seclusion and  
33 intervention, including possible preventative alternatives to seclusion and restraint, safe  
34 physical escort, de-escalation of student crisis situations, and positive behavioral  
35 intervention techniques and supports;  
36
- 37 2. Training of personnel in crisis/conflict management and emergency situations which may  
38 occur in the school setting, including examples and demonstrations of proper activities  
39 and techniques and trainers observing employee use of proper activities and techniques in  
40 the training setting;  
41
- 42 3. Techniques to utilize to limit the possibility of injury to the student, the employee and  
43 any other third party in the area;  
44
- 45 4. Information as to the school's student seclusion areas in each respective school building  
46 to which the employee is assigned; and

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4 5. Provision of the employee with a copy of this policy.  
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6 ~~Employees authorized to engage in seclusion and restraint will also be trained in CPR and basic~~  
7 ~~first aid.~~  
8

9 ~~It is a goal that all new employees are trained in the area of student restraint and seclusion during~~  
10 ~~their first week of employment. However, this may not be possible due to realities of the~~  
11 ~~operation of a school district. If an employee has not yet undergone training and a situation~~  
12 ~~necessitating student restraint or seclusion occurs, and another properly trained employee of the~~  
13 ~~District is present at the event, the properly trained employee shall take the lead in addressing the~~  
14 ~~student crisis.~~  
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16 Designated Locations  
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18 Each school building for which students are present must have a building designated location for  
19 student seclusion. It is the responsibility of the building's principal, or designee of the principal,  
20 to assure that the building's designated seclusion location is a safe and clean location and that  
21 such location has appropriate supervision when any student has been placed into seclusion  
22 pursuant to this policy. All seclusion will be in compliance with a student's IEP or Section 504  
23 Plan. Appropriate supervision shall include an adult in the seclusion location which has  
24 continuous visual observation of the secluded student.  
25

26 Definitions  
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28 For the purposes of this policy, the following definitions shall apply:  
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30 **Restraint:** The immobilization or reduction of a student's freedom of movement for the purpose  
31 of preventing harm to students or others through chemical, manual method, physical, or  
32 mechanical device, material, or equipment.  
33

34 **Seclusion:** Involuntary confinement in a room or other space during which a student is prevented  
35 from leaving or reasonably believes that the he or she can leave or be prevented from leaving  
36 through manually, mechanically, or electronically locked doors that, when closed, cannot be  
37 opened from the inside; blocking or other physical interference by staff; or coercive measures,  
38 such as the threat of restraint, sanctions, or the loss of privileges that the student would otherwise  
39 have, used for the purpose of keeping the student from leaving the area of seclusion.  
40

41 **Aversive Technique:** Physical, emotional, or mental distress as a method of redirecting or  
42 controlling behavior including by not limited to corporal punishment.  
43

44 Policy History:

45 **First reading on: 1/11/23**

46 **Second reading/Approved on: 2/8/23**