



Medication Administration in Schools

Memory Jogger

What are the laws, regulations, and policies that apply to medication administration in MA schools?

1

The laws, regulations, and policies that apply to medication administration in schools in MA are:

- MGL Ch 94C: Controlled Substances Act - covers how medications are handled, stored, distributed, registered, and administered throughout MA. Sections 7 and 9 specifically apply to school nurse managers. Section 7 requires registration with the commissioner of public health. Section 9 grants authority to MDPH to establish rules and regulations that control dispensing of medications.
- MGL Ch 71C, s54B: Administration of Medications in School Settings - protects students with specific special health care needs including diabetes, life threatening allergy, and cystic fibrosis. Schools may not prohibit students from possessing necessary equipment or administering their medications. Schools shall allow epinephrine storage in secure but unlocked locations in every part of the school grounds where allergic students are most at risk.
- 105 CMR 210: Administration of Prescription Medications in Public and Private Schools: Provides minimum standards for safe and proper administration of prescription medications in both public and private primary and secondary schools. School districts can opt to implement stricter policies to meet the needs of their student population. School nurse managers can put stricter protocols/procedures in place to meet the unique needs of their school community

105 CMR 210 covers students during the school day. What is the definition of “school day”?

2

The “school day” is defined as any part of the day that students are in the custody of the school, whereby the school has the authority and duty to provide care and protection of the students. Events that are meant to be participated in by all students fall under that definition (e.g., field trips, prom). Spectators in voluntary community events do not fall under this definition, but nursing coverage may be needed for students that participate in the event (e.g., diabetic student in a play or on a team). Individual assessment in these situations is needed to determine the level of care required.

What are the key responsibilities of the school nurse manager in medication administration?

3

The school nurse manager has many responsibilities in the medication administration program, including:

- *Supervising and evaluating the total medication program*
- Collaborating with school committee, administrators, and school physician to establish policies that are compliant with 105 CMR 210 and other laws and regulations of the Commonwealth at least every 2 years
- Establishing procedures and oversight for medication administration and delegation
- Selecting appropriate training materials
- Establishing record-keeping systems
- Assigning and advocating for appropriate staffing which ensures student safety
- Registering the school or district with the MDPH School Health Service (SHS) unit

What are the four options of how medications can be administered under 105 CMR 210?

4

The four options of how medications can be administered under 105 CMR 210 are:

1. Direct administration by a nurse (RN or LPN) – Reminder nurses do not delegate to other nurses as they have their own licenses
2. Delegation by RN to unlicensed personnel
3. Self-administration (student handles and dispenses their own medication)
4. Epinephrine training

What is the difference between training and delegation?

- 5** There is a difference between training and delegating. When you delegate, you apply the five rights of delegation, provide training, supervision, and consultation. You must be on call when delegated medications are being administered by unlicensed personnel. You retain responsibility and supervise administration. When you train, you pass the responsibility onto the trainee, and you no longer need to be present to provide administration oversight.

What are some key delegation points to remember about 105 CMR 210?

- 6** Staffing: 105 CMR 210.004 (B)(3) states, “*a school nurse shall be on duty in the school system/school while prescription medications are being administered by designated unlicensed school personnel and available by telephone should consultation be required.*” The nurse manager ensures staffing is in compliance with this regulation, and if not, to request in writing that the school administration provides this staffing.
- Parenteral medications may not be delegated. Epinephrine can be administered by unlicensed personnel who have been trained in use (this is not delegation).
- PRN (as needed) medications: Per 105 CMR 210.004 (5)(B) PRN medications may be administered only under the following conditions: a physician's order is in place, an assessment is completed by or in consultation with the school nurse for each dose, the nurse has delivered the first dose in school, AND the unlicensed person has delivered their first dose under nurse supervision at the worksite.
- The school nurse supervising the student is the only one with the authority to delegate. The nurse manager advocates for the nurse and educates the principal when needed.

How are medication errors reported?

- 7** In all situations: **complete a district level incident report** and **notify the student’s caregiver**.

In addition, if the error results in a serious illness that requires medical care: **report the error to MDPH SHS** via RedCap (link provided in resources below) and **contact the prescribing provider**.

All medication errors should be documented and stored at the school. The MDPH SHS unit can request a log of medication errors from the school at any time. Medication error reports to MDPH are done through RedCap. The school nurse manager should create a system of review and quality improvement to address existing medication errors that attempts to avoid future medication errors. The school nurse manager may need to make changes to systems as a result of a medication error. When changes to systems are made, the school nurse manager must communicate the changes clearly to the school nurses, and check to ensure changes are being adhered to consistently throughout the district.

What should I do if I suspect diversion or drug loss?

- 8** If you suspect diversion or drug loss, you should report it directly to the MDPH Drug Control Program, your school administration, and your local authorities. It should also be reported to BORN when a nurse is suspected or identified as the person diverting drugs. The school nurse manager does not need to collect evidence – just the suspicion is enough to report.

What are some best practices related to medication administration in schools?

9

- Never give the first dose of a medication at school; never crush or open extended release medications; never pre-pour medication.
- **Store autoinjector trainers** and expired live epinephrine autoinjectors **separately from live epinephrine autoinjectors**. Storing live epinephrine autoinjectors with trainers has resulted in accidental epinephrine administration during trainings.
- Have a solid plan in place for storing and accessing emergency drugs given in the school setting.
- While the FDA has recently approved various prefilled glucagon formulations (intranasal, rescue pens, autoinjectors), under current MA laws and regulations only the nurse can administer these medications.
- For short-term prescriptions (≤ 10 days), it is acceptable to use the medication bottle as the prescription.
- Only FDA-approved drugs prescribed by an approved medical provider can be administered in schools. Cannabis cannot be administered, but FDA-approved drugs that mimic cannabis, such as EPIDIOLEX®, are acceptable. Herbal treatments are not FDA-approved and would need to be listed in the pharmacopeia to be administered.
- FDA-approved drugs with a block box warning (e.g., intranasal Midazolam) and narcotics which may be appropriate for some students (e.g., sickle cell), but not others (e.g., post oral surgery), should be discussed with your school physician before administering in schools.
- Investigational drugs must come in a pharmacy-labeled container, and the student's physician, parent, and school physician must all agree to it being given in school. (See CMR 210.005.)
- Remember that nursing practice must comply with state laws and regulations. Nurses should question any order that does not comply with state laws or regulations, and can refuse to accept it.

What is the process, and who needs to complete applications, for delegation of medication administration and/or training on administration of epinephrine by autoinjector?

10

MGL Ch 94 allows only licensed healthcare professionals to administer prescription medications, unless the school/district completes the application for delegation to unlicensed personnel and/or the application for training unlicensed personnel to administer epinephrine via autoinjector. *All primary and secondary schools/districts delegating medications, or training unlicensed personnel to administer epinephrine via auto-injector, or that store and handle medications must apply.*

Registrations must be submitted *annually* and expire 365 days from the date of the Massachusetts Controlled Substances Registration (MCSR) approval. You can register at any time during the year. Note that the typical application processing and approval time is at least two weeks. It is recommended you register early and not wait until the current registration expires. No delegation of any medications can be done without a current registration.

To register, use the [Health Professional Licensing System](#). MCSRs will be approved by the MDPH School Health Services, and issued by the MDPH Drug Control Program via the Health Professions Licensing System. Note: Certificates of attendance from the two mandatory courses (Medication Administration in a School Setting: School Nurse Practice in Massachusetts, and Medication Administration in Schools: What School Nurse Managers Need to Know) must be submitted with your application. These courses must be completed every three years.

Key Resources:

11

- [Drug Incident Report](#) to report drug discrepancies, suspected diversion or tampering to the Drug Control Program
- [Homeopathic Pharmacopoeia of the United States](#)
- [Managing Life Threatening Allergies in Schools and MA Guide to Managing Diabetes in Schools toolkits](#)
- [MDPH School Health Services contact information](#)
- [MDPH School Health Services: Medication Administration](#): Registration information, reporting epi-pen administration, reporting medication errors, and sample policies and forms
- [MPDH School Health Services Padlet](#): Medication program updates, announcements, memorandums, and forms
- [School Nurse Regional Consultant or Public Health Nurse Advisor](#)
- [SHIELD's Medication Administration and Delegation resources](#): Advisories, laws, regulations, reporting forms, sample policies, application information, [Ebook](#), and training tools/materials