

## **DEPARTMENT OF EDUCATION**

### **Colorado State Board of Education**

#### **RULES FOR STUDENT POSSESSION AND ADMINISTRATION OF ASTHMA, ALLERGY AND ANAPHYLAXIS MANAGEMENT MEDICATIONS OR OTHER PRESCRIPTION MEDICATIONS**

##### **1 CCR 301-68**

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#### **Statement of Basis and Purpose**

The statutory basis for the enactment of the Rules, adopted by the State Board of Education on December 8, 2005 and re-adopted on April 6, 2006 is found in 22-1-119.5 (2)(b)(IV) & (8), C.R.S. The Colorado Schoolchildren's Asthma and Anaphylaxis Act requires the State Board of Education to promulgate rules on determining students' qualifications, contract requirements and treatment plan requirements.

#### **Statement of Basis and Purpose**

The statutory basis for the revision of these Rules is found in SB09-226, Section 22-2-135(3)(a), C.R.S. The Colorado School Children's Food Allergy and Anaphylaxis Management Act requires the State Board of Education to promulgate rules for the management of food allergies and anaphylaxis among students enrolled in public schools of the state.

The statutory basis for the revision of these Rules is found in S.B. 11-12, section 22-1-119.3 (4), C.R.S. allowing the State Board of Education to promulgate rules for the implementation of the student possession and administration of prescription medication.

#### **1.00 Definitions**

- 1.01 "Health Care Plan" hereinafter referred to as the "Plan" is a plan for a specific student that addresses the administration of medications and/or treatments for the student, including emergency treatment, and is based on the student's Health Care Practitioner's orders for the administration of medications and/or treatments for the student and includes input from the parents or legal guardian..
- 1.02 "Appropriate Staff" means employees of the school whom the principal or equivalent executive, in consultation with the school nurse, determines to be appropriate recipients of emergency anaphylaxis treatment training, which employees shall include, but need not be limited to, employees who are directly involved during the school day with a student who has a known food allergy.
- 1.03 "Contract" means the written contract between the student, the student's parents or legal guardian, and the school nurse or the school administrator in consultation with the school nurse, which clearly defines responsibility for the student to self-carry his/her emergency medication.
- 1.04 "Healthcare Practitioner" means a physician, nurse practitioner, or physician assistant who has prescriptive authority and is licensed to practice in the State of Colorado.

## **2.00 Policy for Management of Food Allergy and Anaphylaxis in the School**

Each school district board of education, including the Charter School Institute, shall adopt and implement a policy for the management of food allergies and anaphylaxis among students enrolled in the public schools of the school district. This policy, at a minimum, shall address the following requirements.

- 2.01 The management of food allergies and anaphylaxis in the school setting shall be a collaboration between the school district, parents, Healthcare Practitioner, and student, as appropriate.
- 2.02 The school nurse or school administrator, in consultation with the school nurse, shall be responsible for the development and implementation of the Plan for each student with the diagnosis of a potential life-threatening food allergy after reviewing the information provided by the student's parent or legal guardian and Healthcare Practitioner on the allergy and anaphylaxis standard form developed by the Colorado Department of Public Health and Environment pursuant to section 25-1.5-109, C.R.S. and referenced in section 22-2-135, C.R.S. If a student qualifies as a student with a disability in accordance with federal law, including but not limited to Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, or the Individuals with Disabilities Education Act, the development of a Health Care Plan and/or other plan as appropriate, in accordance with such federal laws, shall be deemed to meet the requirements of these rules.
- 2.03 The school shall have a plan in place for communication between the school and emergency medical services, including instructions for emergency medical responders.
- 2.04 Reasonable accommodations shall be made to reduce the student's exposure to agents that may cause anaphylaxis within the school environment as set forth in section 22-2-135(3)(a)(II), C.R.S. The school nurse, school personnel, Healthcare Practitioner, the student's parent or legal guardian, and student as appropriate, shall work in partnership to develop reasonable accommodations to reduce the risk of the student's exposure to agents that cause anaphylaxis. If a student qualifies as a student with a disability in accordance with federal law, including but not limited to Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, or the Individuals with Disabilities Education Act, the development of a Health Care Plan and/or other plan as appropriate, in accordance with such federal laws, shall be deemed to meet the requirements of these rules.
- 2.05 Training shall be done for appropriate staff as outlined below in section 3.00 of these rules.
- 2.06 Emergency medications shall be kept in a secure location easily accessible for designated staff.
- 2.07 The parent or legal guardian of the student shall be responsible, whenever possible, to supply to the school in a timely fashion the medication needed for treatment of food allergies or anaphylaxis unless the student is authorized to self-carry.
- 2.08 Prior to the beginning of each school year, each school district shall provide notice to the parent or legal guardian of each student enrolled in a public school of the policy adopted by the school district pursuant to section 22-32-139, C.R.S. The notice shall direct the parent or legal guardian how to access the standard form referred

to in section 22-2-135(3)(b), C.R.S. and developed by the Colorado Department of Public Health and Environment pursuant to section 25-1.5-109, C.R.S.

### **3.00 Appropriate Staff Training**

- 3.01 The principal or an equivalent school administrator, in consultation with the school nurse, shall determine the appropriate recipients of emergency anaphylaxis treatment training, including Appropriate Staff directly involved during the school day with a student who has a known food allergy.
- 3.02 Training shall, at a minimum, prepare Appropriate Staff to have a basic understanding of food allergies and the importance of reasonable avoidance of agents that may cause anaphylaxis, the ability to recognize symptoms of anaphylaxis, and the ability to respond appropriately in the event of the student suffering an anaphylactic reaction. The training shall include the administration of self-injectable epinephrine.
- 3.03 Staff training and delegation of emergency medications by the school nurse shall be done in accordance with the State of Colorado Guide for Medication Administration: An Instructional Program for Training Unlicensed Persons to Give Medications in Out of Home Childcare, School and Camp Settings, (Qualistar Pub., Revised 2008) and the Colorado Nurse Practice Act, section 12-38-103(10) C.R.S.

### **4.00 Requirements for Students to Self-Carry Asthma/Anaphylaxis Medication**

- 4.01 In order to determine whether a student is eligible to administer his/her own medication, the school nurse or administrator in consultation with the school nurse and in collaboration with the parent or legal guardian and Healthcare Practitioner shall make an assessment of the student's knowledge of his/her condition and his/her ability to self-administer medication. The skill level assessment shall include, but not be limited to, the following areas: ability to identify the correct medication, a demonstration of the correct administration technique, knowledge of the dose required, the frequency of use, and the ability to recognize when to take the medication.
- 4.02 A Contract between the school nurse or school administrator in consultation with the school nurse, the student, and the student's parents or legal guardian shall be established assigning levels of responsibility for each individual. This Contract shall accompany orders for the medication from a Healthcare Practitioner. There must be agreement by all parties that noncompliance with the Contract may result in withdrawal of the privilege.
- 4.03 The Contract for the student shall include, but not be limited to: the ability to demonstrate competency in taking his/her medication, the ability to demonstrate asthma/allergy management and self-care skills, notify school staff if emergency medication has been administered or when having more difficulty than usual with his/her condition, and the express prohibition against allowing another person to use his/her medication.
- 4.04 The Contract for the parent or legal guardian shall include, but not be limited to: the provision of a written order by the Healthcare Practitioner; the provision of a written authorization by the parent or legal guardian; the assurance that the container is appropriately labeled by a pharmacist or Healthcare Practitioner; that the medication device contains the medication; that the medication has not expired, that backup medication will be provided to the Health Office for emergencies, and

that, on a regular basis, the status of the student's asthma/allergy is reviewed with the student.

- 4.05 The Contract for the school nurse or the school administrator, in consultation with the school nurse, shall include but not be limited to: the review with the student of the correct technique for use of the medication device(s); an understanding of the order for time and dosages; and an understanding of the appropriate use of the medication; a review of the status of the student's asthma/allergy with the student on a regular basis; a requirement to notify school staff that needs to know whether the student has asthma, or a life-threatening allergy and has permission to carry and self-administer the medication, and the assignment of a designee to make a 911 emergency call if the student has an exposure that results in the need to use epinephrine.

#### **5.00 Policy for Management of Student Possession and Administration of Prescription Medication**

A local school board of education may continue to adhere to the policy for management of food allergy and anaphylaxis management, as described in section 2.00 of these rules above, or may adopt a policy that applies to other prescription medications. In the event the local school board adopts a policy for student possession and administration of prescription medication, the local school board shall be exempt from the requirements for students to self-carry asthma/anaphylaxis medications, described in section 3.00 of these rules above. A policy for management of student possession and administration of prescription medication shall address the following requirements.

- 5.01 The parent or legal guardian of a student for whom prescription medication is required shall notify the school's administration or school nurse of the student's medical needs and that he/she will be in possession of the medication. . The policy may require the notification to include a Plan developed by the Licensed Healthcare Practitioner for any qualifying student or as deemed appropriate by the school nurse or the school administrator in consultation with the school nurse.
- 5.02 There shall be a process by which a school nurse or school administrator in consultation with the school nurse, with input from the prescribing healthcare practitioner, and parent or legal guardian, to determine any restrictions for a student to possess and self administer his/her medication, Factors to be ~~taken into consideration~~ considered include the age and/or maturity of the student, the degree of responsibility of the student, the type of medication, and whether the student's possession or self-administration poses a significant risk of harm to the student or to other students. ~~The School District may limit a student's ability to possess and carry medication for any reason, including in the event the student misuses, shares or sells the medication.~~ The School District may limit a student's ability to possess and carry medication in the event the student's possession of the medication becomes a disruption or danger to the student or learning environment.
- 5.03 If a prescription medication is carried ~~is~~ for a life-threatening condition, the parent or legal guardian of the student shall provide a sufficient supply to be kept at the school and be accessible for emergencies.
- 5.04 A student shall carry only one day's dose of a prescription medication and the medication shall be kept in the original container with the prescription label that includes the student's name, name of medication, dosage and the name of the prescribing provider. This restriction shall not apply to medication that is contained in a multi-dose device including but not limited to asthma inhaler or insulin pump.

- 5.05     Controlled substances, including medical marijuana, as defined in section 12-22-303, C.R.S., shall not be permitted to be in possession by the student on school grounds, on a school bus, or at any school sponsored event. Exceptions to the restriction against controlled substances, other than medical marijuana, may be determined by the school administrator and parents or legal guardian in consultation with the school nurse. The sale or sharing of any drug or controlled substance may be grounds for suspension or expulsion according to section 22-33-106(1)(d)(I), C.R.S.