Administration of Asthma Medications to Students

The school principal, as stated in the Virginia Code §22.1-274.2 and §8.01-226.5:1, shall permit a student with a diagnosis of asthma to possess and self-administer inhaled asthma medications during the school day, at school-sponsored activities, while on a school bus, during any Prince William County School Extended Day or Overnight Field Trip, at School Age Child Care (SACC), or other school property provided the following conditions have been satisfied:

I. A Virginia Asthma Action Plan must be completed and signed by the parent/guardian and healthcare provider.

II. It is recommended that students in grades K-5 keep their medication in a designated area where they can be observed while the medication is being administered.

III. A new Virginia Asthma Action Plan must be completed and signed by the healthcare provider and parent/guardian if any medication adjustments are required. All changes shall be subject to approval and shall adhere to the procedures outlined in this regulation. Upon approval, the school personnel/Child Care Contractor (CCC) responsible for the Virginia Asthma Action Plan shall then be instructed on all changes.

IV. Medication must be in the original container with a prescription label attached.

V. The permission granted to a student with a diagnosis of asthma to possess and self-administer inhaled asthma medications shall be effective for one school/SACC year and must be renewed annually. The school/SACC may withdraw permission to possess and self-administer the said asthma medication at any point during the school/SACC year if it is determined the student has abused the privilege of possession and self-administration or that the student is not safely and effectively self-administering the medication.

VI. The Parent/Guardian Request for Administration of Medication form (Attachment I) is required for School Boards, school personnel, and CCC.

VII. Disclosure or dissemination of information pertaining to the health condition of a student to School Board employees/CCC should comply with Virginia Code §22.1-287 and §22.1-289 and the federal Family Education Rights and Privacy Act of 1974, as amended, 20 USC §1232g, which govern the disclosure and dissemination of information contained in student records.
VIII. It is recommended that all students with a diagnosis of asthma provide a Virginia Asthma Action Plan to the school and/or SACC (if applicable) even if medication is not administered during the school day or during SACC. The Virginia Asthma Action Plan provides vital information in the event of an emergency due to asthma or other allergies.

IX. The Virginia Asthma Action Plan must be renewed for each new school/SACC year.

The Associate Superintendent for Student Learning and Accountability (or designee) is responsible for implementing and monitoring this regulation.

The Associate Superintendent for Student Learning and Accountability (or designee) is responsible for reviewing this regulation in 2018.

References:

VDOH/VDOE “Guidelines for Specialized Healthcare Procedures” (Revision 2004)

CINCH/Virginia Asthma Coalition “Asthma Health Care Action Plan and Authorization for Medication” (Revision 3/07)

Legal Reference:

Virginia Code §22.1-274.2, §8.01-226.5:1, §54.1-3408, §22.1-287, and §22.1-289.20 USC §1232g
PARENT/GUARDIAN REQUEST FOR ADMINISTRATION OF MEDICATION

Student:_____________________ DOB:_____________________ School:_________________

Schools/Child Care Contractor (CCC) must obtain specific written parental/guardian authorization before any medical treatment including medication administration can be provided. When signed by the parent/guardian this written informed consent gives trained school/CCC staff authorization to implement the medical order. When parents/guardians authorize a medical treatment for their child in school/School Age Child Care (SACC) such authorization includes permission for appropriate communications between the school health professional and the medical prescriber related to the specific treatment ordered. Health treatment plans not signed and dated by the parent/guardian will not be implemented until all signatures have been obtained. Legally appropriate school health professional-medical prescriber communications based on the medical orders generally include the following:

- The prescription of treatment itself (e.g., questions regarding dosage, method of administration, potential drug interactions);
- Implementation of the treatment in school/SACC (e.g., questions regarding safety concerns, infection control, issues, or modifications in the treatment order related to the school setting or student’s academic schedule); and
- Student outcomes from the treatment (e.g., questions regarding observed side effects, possibly untoward reactions, observation of behavior in the classroom).

Student may not attend school until the written parental/guardian authorization has been signed and returned to the school.

In accordance with the Virginia Code § 22.1-274, I agree to the following:

I will not hold the School Board, any of its employees, or CCC liable for any negative outcome resulting from the self-administration of said emergency medication by the student.

I/We are aware that non-medical personnel may be performing the above procedure on my child. I/We hereby release the Prince William County Public School Division and all of its employees and from any and all liability in law for damages either we or our child may incur as a result of performing this procedure.

Upon review and agreement by the school nurse, parent, CCC, and health care provider, this Asthma Action Plan will remain in effect until annual review date or student’s medical status requires changes.

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<tr>
<th>Physician’s Printed Name</th>
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<tr>
<td>Parent/Guardian’s Printed Name</td>
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<tr>
<td>School Nurse/CCC Printed Name</td>
<td>School Nurse/CCC Signature</td>
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