

MEDICAL NEEDS AT SCHOOL

Emergency Medical Authorization

The Corporation will distribute annually to parents or guardians of all students the Emergency Medical Authorization Form.

The Emergency Medical Authorization Form will be kept in an easily accessible file in each school building during the school year.

Any time the student is taken out of the Corporation by Corporation employees to participate in a school event (such as field trips, academic contests, music or athletic trips) the staff in charge of the event will take the Emergency Medical Forms for that student. This does not include student spectators at events.

The Corporation will follow the instructions of the Emergency Medical Authorization Form in the event of a medical emergency, provided however that the Corporation will defer to instructions provided by licensed health care professionals and/or first responders on the scene.

Student Emergencies and Accidents

If an accident or emergency occurs on school property; off school grounds at a school activity, function, or event; or traveling to or from school for a school activity, function, or event, the Board directs Corporation employees to take all necessary steps to render assistance to the student in good faith, which may include summoning medical assistance, administering first aid by persons trained to administer first aid, notifying administration, notifying the student's parent, and filing accident reports.

Employees should administer first aid, emergency stock medication, or overdose intervention drugs within the limits of their knowledge of recommended practices. The Superintendent may provide for an in-service program on first aid and CPR procedures.

Commented [A1]: This is recommended for schools that wish to stock emergency medication for administration.

The Policy committee recommends adopting the policy as presented by legal.

Board member recommendation (paragraph 3 – Student Emergencies and Accidents):

~~The administrator in charge must submit an accident report to the Superintendent on all accidents.~~
The Superintendent shall develop, maintain and review a Medical Emergency Response Plan to implement this policy.

Administering Medicine at School

The administration of prescribed medication and/or medically-prescribed treatments to a student during school hours will be permitted only when failure to do so would jeopardize the health of the student, the student would not be able to attend school if the medication or treatment were not made available during school hours, or the child has a disability and as a result, requires medication to benefit from his/her educational program.

All medication needed during school hours or at school functions that are supervised by school staff, except those subject to I.C. 20-33-8-13 (student possession and self-administration), will be administered by the nurse, administrator, or designated trained staff under the following conditions:

1. A written authorization form for medication administration must be completed by the parent/guardian and be on file before any medication transported to the health clinic (prescription or non-prescription) will be administered.
 - a. Medication shall be administered in accordance with the instructions printed on the bottle (in the case of non-prescription medicine) or the physician's order (on the case of prescription medicine).
 - b. The consent of the parent shall be valid only for the period specified on the consent form and in no case longer than the current school year.
2. All non-prescription medicine must be kept in its original container accompanied by the package label or package information.
3. All prescription medicine, including medication administered by injection, student/parent/guardian-provided emergency medication (i.e. Epinephrine, Glucagon), and diabetes monitoring of a student must be accompanied by a physician's order, which is current and correct to the way that the student is to receive the medicine. The nurse may require additional information prior to administering medication.
4. All medication administration will be documented and kept on file in the health office.
5. If the medication is to be terminated prior to the date on the prescription, a withdrawal of consent of the parent is required. The written consent of the parent and the written order of the physician shall be kept on file in the health office.

Commented [A2]: Language recommended if the school wishes to use emergency stock medication discussed below to make clear the difference between the types of emergency medications.

The Corporation does not honor requests by parents or physicians to administer over-the-counter herbs, minerals and vitamins and other homeopathic products as there is currently no standardization relative to these products and no FDA approval and guidelines.

Any unused medication which is unclaimed by the parent will be destroyed by the Corporation when a prescription is no longer to be administered according to the authorization form, or at the end of the school year.

All designated staff responsible for administering medication to students will be trained by a registered nurse on the proper administration of medication and/or diabetes care. A record of this training will be kept on file in the health office.

All medication, both prescription and non-prescription, must be brought into the nurse's office by a parent or guardian. Only students meeting the criteria of Indiana code who have valid medical authorization and parent permission on file in the school office will be permitted to carry medications and self-administer such substances. These exceptions are explicitly stated in the law and detailed below.

The Corporation may fill a prescription or statewide standing order for albuterol, epinephrine, and ~~naloxone~~ federal Food and Drug Administrative approved opioid overdose reversal medication, including nasal spray (collectively, "emergency medications") if such emergency medications are prescribed for schools or school corporations by an Indiana-licensed healthcare provider whose scope of practice includes the prescribing of medication or if the state health commissioner or the health commissioner's legally authorized designee, if any, issues a statewide standing order for such emergency medication for schools or school corporations. Injectable epinephrine that is filled and used in accordance with this policy must have an expiration date of not less than twelve (12) months from the date that the pharmacy dispenses the injectable epinephrine to the Corporation.

Commented [A3]: HEA 1367 (2025) permits additional medications, not just naloxone.

All emergency medication must be stored in a safe location where only school employees have access.

A school nurse may administer emergency medication obtained under this policy to a student, employee, or visitor of the school if such individual is demonstrating signs or symptoms of a life-threatening emergency and the individual does not have emergency medication at the school or the individual's prescription is not available. Such administration must be within the manufacturer's guidelines.

Commented [A4]: Indiana grants civil immunity for such administration where within the manufacturer's guidelines.

A school employee may administer emergency medication obtained under this policy to a student, employee, or visitor of the school if the administering employee has voluntarily received training in recognizing a life threatening emergency and in the proper administration of the emergency medication administration. Such training must be by a health care provider who is licensed or certified in Indiana, for whom the administration of emergency medication is within the health care provider's scope of practice, who has received training in the administration of emergency medication, and who is knowledgeable in recognizing the symptoms of a life-threatening emergency and the administration of emergency medication. Such administration must be within the manufacturer's guidelines.

Commented [A5]: Indiana grants civil immunity for such administration where within the manufacturer's guidelines.

All emergency medication administration will be documented and kept on file in the health office.

Commented [A6]: This section is appropriate if a school wishes to stock under I.C. 20-34-4.5 emergency stock medication for administration to those without their own medication in life threatening emergencies. If a school elects to add this provision, also make recommended changes to the language above to make clear that section applies to student/parent-provided medication for school administration.

Indiana law permits an individual or entity in a position to assist an individual who, there is reason to believe, is at risk of experiencing an opioid-related overdose, to administer an overdose intervention drug to an individual who is suffering an overdose.

The Corporation, in good faith, believes it is an entity in a position to assist an individual who there is a reason to believe is at risk of experiencing an opioid-related overdose; therefore, it may obtain an overdose intervention drug from a prescriber or entity acting under a standing order issued by a prescriber and may maintain such intervention drug on-site in school facilities to provide such assistance.

All overdose intervention drug medication administration will be documented and kept on file in the health office.

Chronic Disease or Medical Condition

In accordance with Indiana statute, a student with a chronic disease or medical condition may possess and self-administer medication for the chronic disease or medical condition on school grounds immediately before or during school hours, or immediately after school hours, or at any other time when the school is being used by a school group; off school grounds at a school activity, function, or event; or traveling to or from school for a school activity, function, or event, if the following conditions are met:

1. The student's parent has filed an authorization with the student's principal for the student to possess and self-administer the medication. The authorization must include the physician's statement described below in #2.
2. A physician states in writing that:
 - a. the student has an acute or chronic disease or medical condition for which the physician has prescribed medication;
 - b. the student has been instructed in how to self-administer the medication; and
 - c. the nature of the disease or medical condition requires emergency administration of the medication.

The authorization and statement described in subsection (2) must be filed with a student's principal annually.

The Board is not liable for civil damages as a result of a student's self-administration of medication for an acute or chronic disease or medical condition except for an act or omission amounting to gross negligence or willful and wanton misconduct.

Commented [A7]: For consideration

Students with diabetes, seizures, or chronic diseases shall be appropriately accommodated per Indiana statutes. An appropriate plan for the student, which may be a Section 504 Plan, individual health plan, or IEP, will be developed and implemented.

Transportation of Medications by Students

Medication that is possessed by a school for administration during school hours or at school functions for a student may be released to:

1. The student's parent or guardian;
2. An individual who is at least eighteen years of age and designated in writing by the student's parent or guardian to receive the medication; or
3. The student, if the student's parent provides written permission for the student to receive the medication. (Note: This section does not apply to medication possessed by a student for self-administration under Indiana Code as specified above).

Do Not Resuscitate (DNR) Orders / Physician Orders for Scope of Treatment (POST) Forms

Each student with a potentially life-threatening medical condition should have a health care plan and/or emergency medical plan. Corporation employees shall follow normal procedures for addressing emergencies occurring while students are on Corporation property (including being transported in vehicles owned, leased, or operated by Corporation); and during Corporation events, even if held outside of Corporation property (for example, prom or field trips).

Corporation employees will not adhere to Do Not Resuscitate (DNR) Orders or Physician Orders for Scope of Treatment (POST) forms which prohibit individuals from administering resuscitation (CPR) or medical interventions measure to a student. This policy shall not interfere with a health care provider's obligations under Indiana law.

If the school is presented with a DNR order or POST form, the parent or guardian should be advised of the Corporation's policy and should be directed to the hospital(s) in the area where the student may be transported in an emergency and advised to discuss the order with such facility.

Student Concussions and Sudden Cardiac Arrest

Corporation employees shall abide by legal obligations regarding student athletes and avoiding injuries, including informing and educating coaches, student athletes, and parents of student athletes regarding the nature and risk of concussion, head injury, and sudden cardiac arrest to student athletes. Corporation employees shall additionally abide by legal obligations regarding students in extracurricular activities and sudden cardiac arrest.

The following individuals must complete a sudden cardiac arrest training course (approved by the Indiana Department of Education); ~~including training in the use of an automated external defibrillator (AED)~~; head coach or assistant coach who coaches an athletic activity (including competitive or non-competitive cheerleading), a marching band leader, a drama or musical leader, and a leader of an extracurricular activity in which students have an increased risk of sudden cardiac arrest activity as determined by the Indiana Department of Education in consultation with an appropriate organization. Such individuals may not lead or coach an activity in which students

Commented [A8]: Changes to this section implement HEA 1515's changes to I.C. 20-34-8-9, IDOE's Legislative Guidance re: same, and IDOE's June 2013 letter from Jolene Bracale to Superintendents, Principals, and School Nurses.

Commented [A9]: The 2025-26 IDOE training guidance does not list any additional professionals. I am inclined to leave this in, however, in case future guidance list additional professionals.

have an increased risk of sudden cardiac arrest until such training is complete and must complete the training every two (2) years thereafter. ~~The training must include signs and symptoms, response, the use of automated external defibrillators (AEDs), and be approved by the IDOE.~~ The provider of the training course shall provide a certificate of completion, and the Corporation shall maintain all certificates of completion for each individual required to undergo sudden cardiac arrest training.

There must be an AED present at athletic activities and marching band, drama, or musical events. In addition to completing the training as required above, a head coach, assistant coach, who coaches an activity, including cheerleading, marching band leader, drama, or musical leader shall"

- Ensure an operational AED present at the venue for each event in which s/he is providing coaching or leadership, and
- Inform all individuals who are coaching or providing leadership at the event of the location of the AED.

The Corporation shall:

- Develop a venue specific emergency action plan for sudden cardiac arrest which includes detailed instructions regarding how to respond to sudden cardiac arrest that includes elements recommended by the American Heart Association, Heart Safe Schools Program, or other nationally recognized evidence-based program and indicates the location of the nearest AED at the venue.
- Share the plan with each head coach, assistant coach, and marching band, drama, or musical leader.
- Share the plan with students, before the beginning of the season for each athletic, band, drama, or musical activity.

~~The Board has determined that it may enhance school safety to have an AED placed in building(s) within the Corporation for use by employees with proper training. The Board directs the Superintendent to develop guidelines that govern response to sudden cardiac arrest and AEDs, including a venue specific emergency action plan and associated training or practice for execution of such plan, distribution, sharing, and posting of such plan, the use of AEDs, placement of AEDs, availability of the AED (including for use by more than one event), notification of school employees, volunteers, other event leaders, students, and others of the location and availability of AEDs, proper maintenance of the AEDs, expectations for school personnel, training and oversight by a medical doctor or by the local EMS Medical Director.~~

Communicable Diseases

The Corporation will collaborate with and follow guidance from the Indiana Department of Health to meet its obligations to control communicable diseases impacting the school community. See *Policy A325 Communicable Disease*.

Immunizations

Commented [A10]: The statute states that the people requiring training must ensure that an operational AED is present at each event in which the students have an increased risk of sudden cardiac arrest for which they are providing coaching or leadership. The language here tracks the language used in IDOE's 2025 legislative guidance on this amended statute.

Consistent with state law, the School Board requires that all students be immunized in accordance with the requirements of the Indiana Department of Health.

The Superintendent shall require parents to furnish to their child's school, no later than the first day of school attendance, proof of the student's immunization status, either as a written document from the health care provider who administered the immunization or documentation provided from the state immunization data registry. Students whose parents do not provide the required documentation by the first day of school attendance may be granted a twenty (20) school day waiver. However, if the student remains unimmunized at the close of the twenty (20) school day waiver period, the student may not be permitted to attend school, unless the parents have filed a religious or medical exemption in accordance with state law.

The Superintendent or his or her designee will provide information concerning meningococcal disease (meningitis) and its vaccines to students and parents or guardians at the beginning of each school year.

The Corporation shall provide each parent of a student who is entering grade 6 with information prescribed by the state department of health concerning the link between cancer and the human papillomavirus (HPV) infection and that an immunization against the human papillomavirus (HPV) infection is available.

The Corporation shall provide materials concerning immunizations and immunization preventable diseases to parents and guardians of students. Posting the materials on the school building's website shall satisfy the distribution requirement.

The Superintendent shall ensure that all applicable immunization information is complete in the state immunization data registry (CHIRP) no later than the first Friday in February each year.

Examinations

The Corporation may conduct student physical examinations or screenings required by federal or state law (such as hearing and vision screening). In addition, the Corporation may require physical examinations or screenings for voluntary participation in athletic programs. The Corporation will also, with parental consent, administer physical examinations (such as a physical or occupational therapy evaluations) that are necessary for determining a student's need for related services as part of a Free, Appropriate Public Education (FAPE). Examinations or screenings administered by the Corporation will be conducted by appropriately qualified examiners.

Mental Health Treatment Notification

Prior to referring a student to a provider of mental health services due to a pattern of aberrant or abnormal behavior, a school official will contact a student's parent. A school official shall also hold a conference with the student and the student's parent prior to referring student to a provider of mental health services.

I.C. 20-34-3-18
I.C. 20-34-3-21
I.C. 20-34-3-26
I.C. 20-33-8-13
I.C. 20-34-7 *et. seq.*
I.C. 20-34-8
I.C. 34-30-12-1
I.C. 16-36-5-19
I.C. 16-36-6 *et. seq.*
I.C. 20-34-5
I.C. 20-34-4.5
I.C. 34-30-14-6
I.C. 16-42-27-1 *et seq.*

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Centerville-Abington Community Schools

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