

## **Students Administering Medication to Students--REGULATION**

### **Regular School Day**

The Board of Education (Board) allows students to self-administer medication and qualified personnel for school to administer medication to students in accordance with the following establish procedures. These procedures shall be reviewed and/or revised and approved by the School Medical Advisor, the school nurse coordinator and the Board of Education. The District's School Medical Advisor (or other qualified physician) will approve this policy, its regulations and any changes prior to submission to the Board of Education for its approval.

The administration of medication includes the activities of handling, storing, preparing or pouring of medication, conveying it to the student according to the medication order, observing the student inhale, apply, swallow, or self-inject the medication, when applicable; documenting that the medication was administered; and counting remaining doses to verify proper administration and use of the medication.

**Note:** Investigational drugs may not be administered by any personnel in the school setting.

### **Approved School Personnel Administrators**

Medication may be administered by a licensed registered nurse, or in the absence of such licensed personnel, any other nurse licensed pursuant to the provisions of Chapter 378, including a nurse employed by, or providing services under the direction of the Board of Education, qualified personnel for schools (principals, teachers, licensed physical or occupational therapists and coaches and licensed athletic trainers during intramural and/or interscholastic athletics) trained in the administration of medication. They shall not be held liable for any personal injuries which may result from acts or omissions constituting ordinary negligence.

Medication will be administered according to the following procedures:

1. The school nurse will develop a medication administration plan for each student before medication may be administered by any staff member. The school nurse will also review regularly all documentation pertaining to the administration of medication for students.
2. The qualified personnel for schools will be formally trained by the school nurse prior to administering medication. The school nurse, acting as designee and under the direction of the School Medical Advisor, will annually instruct such staff members in the administration of medication. The training shall include, but not be limited to:

**Students**

**Administering Medications to Students**

**Approved School Personnel Administrators (continued)**

- A. The generic principles of safe administration of medications.
- B. Review of state statute and school regulations regarding administration of medication by school personnel.
- C. Procedural aspects of the administration of medication, including the safe handling and storage of medication, and documentation.
- D. Specific information related to each student's medication and each student's medication plan including the name and generic name of the medication, indications for medication, dosage, routes, time and frequency of administration, therapeutic effects of the medication, potential side effects, overdose or missed dose of the medication, and when to implement emergency interventions.

3. A list of qualified personnel successfully trained and approved to administer medication along with documentation shall be kept in the school clinic. All such individuals including school nurses and nurse practitioners must have also satisfactorily passed the criminal background check.

The documentation for medication administration shall include the dates of general and/or student-specific training, the content of the training, individuals who have successfully completed general and/or student-specific administration of medication training for the current school year, and names and credentials of the nurse or School Medical Advisor trainer or trainers.

4. A current list of those authorized to give medication shall be maintained in the school.

A student who is required to receive medication during school hours must provide:

- 1. The authorized prescriber's (physician, dentist, optometrist, advanced practice registered nurse, or physician assistant; and a podiatrist in the case of interscholastic or intramural athletic events) orders for medication on a medical form which specifies the student's name, condition for which the drug is being administered, name of drug and method of administration and dosage of drug. For students receiving medicine the time of administration and duration of the order, side effects to be observed (if any) and management of such effects, and student allergies to food and/or medicine is also required on the form. This medical order must be renewed yearly if a student is to be administered medication by school personnel.
- 2. Written authorization from his or her parent or guardian allowing school personnel to administer said medication. This authorization shall be renewed yearly and shall include parental consent for school personnel to destroy said medication if not repossessed by the parent or guardian within a seven (7) day period of notification by school authorities.

**Students**

**Administering Medications to Students**

**Approved School Personnel Administrators (continued)**

3. The medication must have its original correct label from the pharmacy or manufacturer.

**Student Self-Administration**

Students who have a verified chronic medical condition and are deemed capable, are permitted to self-administer ONLY the following prescribed emergency medications:

- Cartridge injectors for medically diagnosed allergies
- Rescue asthma inhalers
- Diabetic Medications

Students who are able to self-administer medication may do so provided:

1. An authorized prescriber provides a written order for self-administration of said medication.
2. There is written authorization for self-administration of medication from the student's parent or guardian.
3. The school nurse has evaluated the situation and deemed it to be safe and appropriate; has documented this on the student's cumulative health record, and has developed a plan for general supervision.
4. The student and school nurse have developed a plan for reporting and supervision of self administration and notification of teachers.
5. The principal and appropriate teachers are informed that the student is self-administering prescribed medication.
6. Such medication is transported to the school and maintained under the student's control within these guidelines.

A child with diabetes may test his/her own blood glucose level per the written order of a Connecticut-licensed physician stating the need and the capacity of such child to conduct self testing, along with the written authorization of the parent/guardian. Such self-testing shall be pursuant to guidelines promulgated by the Commissioner of Education. The time or place where a student with diabetes may test his/her blood-glucose level on school grounds shall not be restricted provided the student has written parental/guardian permission and a written order from a physician licensed in Connecticut.

The school nurse or school principal shall select a qualified school employee to, under certain conditions, give a glucagon injection to a student with diabetes who may require prompt treatment to protect him/her from serious harm or death. The nurse or principal must have the written authority from the student's parent/guardian and a written order from the student's Connecticut-licensed physician. The authorization shall be limited to situations when the school nurse is absent or unavailable. No qualified school employee shall administer this medication

**Students****Administering Medications to Students****Students Self-Administration (continued)**

unless he/she has annually completed any training required by the school nurse and school medical advisor in the administration of medication with injectable equipment used to administer glucagon, the school nurse and school medical advisor must attest that the qualified school employee has completed such training and the qualified school employee voluntarily agrees to serve as a qualified school employee. The injections are to be given through an injector or injectable equipment used to deliver an appropriate dose of glucagon as emergency first aid response to diabetes.

The school nurse shall assess the student's competency for self-administration in the school setting and deem it to be safe and appropriate, including that a student:

1. Is capable of identifying and selecting the appropriate medication by size, color, amount, or other label identification;
2. Knows the frequency and time of day for which the medication is ordered;
3. Can identify the presenting symptoms that require medication;
4. Administers the medication properly;
5. Maintains safe control of the medication at all times;
6. Seeks adult supervision whenever warranted; and
7. Cooperates with the established medication plan.

The school nurse is responsible for:

1. Reviewing the medication order and parental authorizations;
2. Developing an appropriate plan for self-administration;
3. Documenting the medication plan in the student's or participant's health record; and
4. Informing qualified personnel for schools and other staff regarding the student's self administration of prescribed medication.

In the case of cartridge injectors for medically diagnosed allergies, rescue asthma inhalers and diabetic medications, the school nurse's review of a student's competency to self-administer in the school setting shall not be used to prevent a student from retaining and self-administering inhalers for asthma and cartridge injectors for medically-diagnosed allergies. Students may self administer such medications only with the written authorization of an authorized prescriber and written authorization from the student's parent or guardian or eligible student. If a student competency or safe administration is a concern, the nurse will immediately notify the parent and M.D. for an alternate plan until safety and competency can be maintained.

In the case of extraordinary situations, self-administration of prescription medication may be considered for field trips. Such self-administration must be approved by the school nurse supervisor, the School Medical Advisor, the student's physician and parent/guardian in writing.

**Students Administering Medications to Students  
Students Self-Administration (continued)**

An appropriate plan shall be developed by the school nurse.

With the approval of the school nurse supervisor and school medical advisor, the school nurse may, in rare circumstances, if judged appropriate and necessary for a safe emergency medication plan, delegate the administration of a specific medication for a specific student to a certified athletic trainer or coach of the student in intramural or interscholastic athletics according to the requirements of C.G.S. Sec. 10-212a (c) and its regulations, and school district policy and procedures.

During intramural and interscholastic athletic events, a coach or licensed trainer may administer (1) inhalant medications prescribed to treat respiratory conditions and (2) medication administered with a cartridge injector for students with a medically diagnosed allergic condition to a specific student when a plan for self-administration of medication is not a viable option, as determined by the school nurse, provided the following requirements have been met:

The school nurse, responsible for the student's individualized medication plan, shall provide the coach with a copy of the authorized prescriber's order and the parental/guardian permission form. Parents are responsible for providing the coach or licensed athletic trainer the medication, such as the inhaler or cartridge injector, which shall be kept separate from the medication stored in the school health office during the school day.

Medications to be used in athletic events shall be stored in containers for the exclusive use of holding medications; in locations that preserve the integrity of the medication; under the general supervision of the coach or licensed athletic trainer trained in the administration of medication; and in a locked secure cabinet when not in use at athletic events.

The coach or licensed athletic trainer's agreement is necessary for the administration of emergency medication and the implementation of the student's emergency care plan.

Coaches and licensed athletic trainers are required to fulfill the documentation requirements as outlined in these administrative regulations. A separate medication administration record for each student shall be maintained in the athletic area. Errors in the administration of medication shall be addressed as specified in Section 10-212a-6 of the Regulations of Connecticut State Agencies, and detailed in these administrative regulations. If the school nurse is not available, a report may be submitted by the coach or licensed athletic trainer to the school nurse on the next school day.

An administration of medication record shall be submitted to the school nurse at the end of each sport season and filed in the student's cumulative health record.

**Students****Administering Medications to Students****Storage and Administration Epinephrine (continued)****Storage and Administration of Epinephrine**

Definitions (For purposes of this subsection of this regulation)

**Cartridge injector** means an automatic prefilled cartridge injector of similar automatic injectable equipment used to deliver epinephrine in a standard dose for emergency first aid response to allergic reactions.

**Qualified school employee** means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by the district, coach or school paraprofessional.

**Qualified medical professional** means a licensed physician, optometrist, advanced practice registered nurse, or a physician assistant.

**Storage and Use of Epinephrine Cartridge Injectors (Emergency Administration of Epinephrine to Students without Prior Written Authorization)**

A school nurse or, in the absence of a school nurse, a “qualified school employee” shall maintain epinephrine in cartridge injectors for the purpose of emergency first aid to students who experience allergic reactions, who were not previously known to have serious allergies and therefore do not have a prior written authorization of a parent/guardian or a prior written order of qualified medical professional for the administration of epinephrine.

The school nurse or school principal shall select qualified school employees who voluntarily agree to be trained annually to administer such epinephrine as emergency first aid, pursuant to PA 14-176. There shall be at least one such qualified school employee on the grounds of each District school during regular school hours in the absence of the school nurse. Each school must maintain a store of epipens for such emergency use.

No qualified school employee shall administer epinephrine unless he/she annually completes the training program regarding emergency first aid to students who experience allergic reactions, developed by the Departments of Education and Public Health in consultation with the School Nurse Advisory Council. The training program shall include instruction in cardiopulmonary resuscitation; first aid; food allergies; the sign and symptoms of anaphylaxis; prevention and risk-reduction strategies regarding allergic reactions; emergency management and administration of epinephrine; follow-up and reporting procedures after a student has experienced an allergic reaction; and any other relevant issues and topics related to emergency first aid to students who experience allergic reactions.

The school shall fulfill all conditions and procedures promulgated in the regulations established by the State Board of Education for the storage and administration of epinephrine by school personnel to students for the purpose of emergency first aid to

**Students**

**Administering Medications to Students**

**Storage and Use of Epinephrine Cartridge Injectors (Emergency Administration of Epinephrine to Students without Prior Written Authorization (continued))**

students who experience allergic reaction and do not have prior written authorization of epinephrine administration.

The school nurse or, in the absence of unavailability of such school nurse, such qualified school employee may administer epinephrine to a student experiencing a life-threatening undiagnosed allergic reaction, as emergency first aid to students who do not have prior written authorization from a parent or guardian or a prior written order from a qualified medication professional for the administration of epinephrine. A qualified school employee must annually complete the required training program in order to be permitted to administer epinephrine utilizing an epipen.

The parent/guardian of a student may submit, in writing, to the school nurse and school medical advisor that epinephrine shall not be administered to his/her child permitted by statute. The school district shall annually notify parents/guardians of the need to provide written notice if they do not want emergency administration of epinephrine to be given to their child. Such notice shall be given to the school nurse or school medical advisor.

The person responsible for decision-making in the absence of the school nurse shall be the qualified school employee administering the epinephrine.

The school nurse, when the need exists to be absent for unavailable from his/her school assignment, shall notify the Principal or his/her designee and the trained qualified school employee(s) who shall be responsible for the emergency administration of epinephrine. Each school shall have a sufficient number of trained qualified school employees to ensure that there is a least one qualified and trained employee on the grounds of each school during regular school hours in the absence of the school nurse.

Emergency administration of epinephrine with a cartridge injector must be reported immediately to the school nurse and the student's parent/guardian. A separate administration of medication form for each student shall be maintained and submitted to the school nurse at the earliest possible time but not later than the next day and filed in or summarized on the student's cumulative health record.

Medication errors shall be reported immediately to the school nurse, nurse supervisor, medical advisor, and the student's parent or guardian. Documentation of the medication error shall be submitted to the school nurse at the earliest possible time but not later than the next school day and filed in or summarized on the student's cumulative health record.

The principal's/nurse's office shall notify the persons who will administer epinephrine as emergency first aid to students who experience allergic reactions but do not have prior written authorization of a parent/guardian and from a qualified medical professional of the students who

**Students**

**Administering Medications to Students**

**Storage and Use of Epinephrine Cartridge Injectors (Emergency Administration of Epinephrine to Students without Prior Written Authorization (continued))**

parents have refused the emergency administration of epinephrine.

Following the emergency administration of epinephrine by a qualified school employee to a student without a prior authorization or medication order, such administration shall be reported immediately to the school nurse or school medical advisor and the student's parent or guardian. A medication record shall be submitted to the school nurse not later than the next school day and filed in or summarized on the student's cumulative health record.

Handling and Storage of Medications

All medication, except those approved for keeping by students for self-medication and epinephrine intended for emergency administration to students who do not have a prior written authorization or order, must be delivered by the parent or other responsible adult and shall be received by the nurse assigned to the school or, in the absence of such nurse, by other qualified personnel for schools trained in the administration of medication and assigned to the school. Access to all stored medications shall be limited to persons authorized to administer medications. The school nurse must:

- A. Examine on site any new medication, medication order and parent/guardian authorization and except for epinephrine intended for emergency administration to students who do not have written prior authorization or order, to insure that it shall be properly labeled with dates, name of student, medication name, dosage and physician's name, and that the medication order and permission form are complete and appropriate.
- B. Develop an administration of medication plan for the student before any medication is given by qualified personnel for schools.
- C. Review all medication refills with the medication order and parent/guardian written authorization prior to the administration of medication except for epinephrine intended for emergency administration to students who do not have written prior authorization or order. No more than a three month supply of a medication for a student shall be stored at the school.
- D. Except as indicated by a student's emergency care plan, emergency medications shall be stored in an unlocked, clearly labeled and readily accessible cabinet or container during school hours under the supervision of the nurse or the principal or principal's designee trained in the administration of medication.
- E. Emergency medications shall be locked beyond the regular school day or program hours except as otherwise determined by a student emergency care plan.



**Students****Administering Medications to Students Handling and Storage of Medications (continued)**

F. Record on the Student's Individual Medication Record the date the medication is delivered and the amount of medication received.

G. Store medication requiring refrigeration in a refrigerator at no less than 36 degrees Fahrenheit and no more than 46 degrees Fahrenheit. The refrigerator shall be located in a health office maintained for health service purposes with limited access. Non-controlled medications may be stored directly on the shelf of the refrigerator with no further protection needed. Controlled medications shall be stored in a locked box affixed to the refrigerator shelf.

H. Store prescribed medicinal preparations in securely locked storage compartment. Controlled substances shall be contained in separate compartments, secured and locked at all times. At least two sets of keys for the medication containers or cabinets shall be maintained for each school building. The school nurse shall maintain one set of keys. The additional set shall be under the direct control of the Principal and/or designee.

**Destruction/Disposal of Medication**

No less than seven (7) days prior to the end of the school year or whenever a student's medication is discontinued by the authorized prescriber, the parent or guardian is to be notified and requested to repossess the unused medication by the last day of school. If the parent/guardian does not comply with this request, all medication (non-controlled drugs) is to be destroyed by the school nurse according to the following procedures on the last day of school.

The following information is to be charted on the student's health folder and signed by the school nurse and witness:

- A. Date of destruction.
- B. Time of destruction.
- C. Name, strength, form and quantity of medication destroyed.
- D. Manner of destruction of medication.

**1. Non-Controlled Medication**

A. Keep the medication in its original container. • To protect privacy and discourage misuse of the prescription, cross out the patient's name with a permanent marker or duct tape or remove the label. (Chemotherapy drugs may require special handling. Work with your healthcare provider on proper disposal options for this type of medication.)

B. Modify the medications to discourage consumption. • For solid medications: such as pills or capsules: add a small amount of water to at least partially dissolve them. • For liquid medications: add enough table salt, flour, charcoal, or nontoxic powdered spice, such as turmeric or mustard to make a pungent, unsightly mixture that discourages anyone from

**Students****Administering Medications to Students Destruction/Disposal of Medication (continued)**

eating it. • For blister packs: wrap the blister packages containing pills in multiple layers of duct or other opaque tape.

C. Seal and conceal.

- Tape the medication container lid shut with packing or duct tape. • Place it inside a non-transparent bag or container such as an empty yogurt or margarine tub to ensure that the contents cannot be seen.
- Do not conceal medicines in food products because animals could inadvertently consume them.

D. After following the procedures noted above, discard the container in the clinic's trash can.

E. The completed medication administration record for non-controlled medications may be destroyed in accordance with Section M8 of the Connecticut Municipality Retention Schedule, provided it is superseded by a summary on the student health record.

2. Controlled Medication Disposal

A. Controlled substances shall not be destroyed by the school nurse. Controlled substances shall be destroyed pursuant to Section 21a-262-3 of the Regulations of the Connecticut State Agencies. In the event that any controlled substance remains unclaimed, the school nurse or Supervisor of Nursing shall contact the Connecticut Commissioner of Consumer Protection to arrange for proper disposition. Destruction may also be conducted by a Connecticut licensed pharmacist in the presence of another pharmacist acting as a witness.

B. To dispose of controlled substances the school nurse will call the Drug Control Division of the CT Department of Consumer Protection for assistance at 860-713- 6055.

C. Any accidental destruction or loss of controlled drugs must be verified in the presence of a second person, including confirmation of the presence or absence of residue and jointly documented on the student medication administration record and on a medication error form pursuant to Connecticut General Statute 10-212a(b). If no residue is present notification must be made to the Department of Consumer Protection (DEP) pursuant to Section 21a-262-3 of the Regulations of Connecticut State Agencies.

**Documentation and Record Keeping**

Record keeping of medication administration shall either be in ink and shall not be altered or shall be recorded electronically, in a record that cannot be altered, on the individual student's

**Students****Administering Medications to Students Documentation and Record Keeping (continued)**

medication record form which, along with the parental authorization form and the authorized prescriber's order, becomes part of the student's permanent record. Records shall be made available to the Connecticut State Department of Education upon request, for review until destroyed pursuant to C.G.S. 11-8a and C.G.S. 10-212a(b) for controlled medications.

The completed medication administration record for controlled medications shall be maintained in the same manner as the non-controlled medications. In addition, a separate medication administration record needs to be maintained in the school for three years, pursuant to Connecticut General Statute 10-212a(b).

The written order of the authorized prescriber, the written authorization of the parent or guardian to administer the medication and the written parental/guardian permission for the exchange of information by the prescriber and school nurse to ensure the safe administration of such medication shall be filed in the student's cumulative health record.

Record of the medication administered shall be entered in ink on an individual student medication record form and filed in the student's cumulative health folder. If the student is absent, it shall be so recorded. If an error is made in recording, a single line shall be run through the error and initialed.

An authorized prescriber's verbal order, including a telephone order, for a change in any medication may be received only by a school nurse. Such verbal order must be followed by a written order within three (3) school days.

**These procedures will be followed as part of recordkeeping:**

1. An error in the administration of medication shall be reported to the school nurse who will initiate appropriate action and documentation in a student incident report and on his/her cumulative record.
2. Untoward reactions to medication shall be reported to the school nurse, the parent, and the student's physician.
3. Records of controlled substances shall be entered in the same manner as other medications with the following additions:
  - A. The amount of controlled drug shall be counted and recorded on the individual student medication record form after each dose given.
  - B. A true copy (carbon or NCR) of the forms shall be retained by the school for 3 years and the original filed in the student's permanent health record.
  - C. Loss, theft or destruction of controlled substances shall be immediately, upon discovery, reported to the Supervisor of Nursing Services who will contact the Connecticut Commissioner of Consumer Protection.

**Students****Administering Medications to Students Medication Errors (continued)****Medication Errors**

A medication error includes any failure to administer medication as prescribed for a particular student, including failure to administer the medication:

- Within the appropriate timeframe.
- In the correct dosage.
- In accordance with accepted practice.
- To the correct student.

An error in the administration of medication shall be reported immediately to the school nurse. The school nurse shall notify the Nurse Supervisor, parent or guardian, and the building Principal or designee. The nurse shall document the effort to reach the parent or guardian. If there is a question of potential harm to the student and medical treatment may be required, the nurse and/or building administrator shall also notify the student's authorized prescriber or the School Medical Advisor. In a severe emergency, 911 should be called. Contact the Poison Control Center as deemed necessary.

Any errors in the administration of a medication shall be documented by the nurse in the student's cumulative health record. A written report shall also be made using a medication error form. The report must include any corrective action taken.

In case of an anaphylactic reaction or the risk of such reaction, a school nurse or qualified school personnel may administer emergency oral and/or injectable medication to any student in need thereof on the school grounds, in the school building, or at a school function according to the standing order of the School Medical Advisor or the student's private physician.

**Administration of Emergency Medication under Connecticut General Statute 10-212a**

Whenever a student has an untoward reaction to administration of a medication, resolution of the reaction to protect the student's health and safety shall be the foremost priority. The school nurse and the authorized prescriber shall be notified immediately, or as soon as possible in light of any emergency medical care that must be given to the student.

The school nurse is responsible for notifying the parent or guardian, advising of the existence and nature of the medication emergency and all steps taken or being taken to resolve the emergency and protect the health and safety of the student, including contact with the authorized prescriber and/or any other medical action(s) that are being or have been taken.

As soon as possible, in light of the circumstances, the Principal shall be notified of the medication emergency. The Principal shall immediately thereafter contact the Superintendent or the Superintendent's designee.

**Students****Administering Medications to Students Administration of Emergency Medication under Connecticut General Statute 10-212a (continued)**

In the absence of a school nurse, any other nurse licensed pursuant to provisions of Chapter 378 including qualified personnel for schools may give emergency medication orally or by injection to students with a medically diagnosed allergic condition which would require such prompt treatment to protect the child from serious harm or death so long as the administrator or teacher has completed training in administration or such medication.

Emergency medical care to resolve a medication emergency may include but is not limited to the following, as appropriate under the circumstances or:

- A. Contact 911 emergency response system;
- B. Contact the Poison Control Center;
- C. Transport the student to the nearest available emergency medical care facility that is capable of responding to a medication emergency.
- D. Apply appropriate emergency care techniques, such as cardio-pulmonary resuscitation;
- E. Administration of emergency medication in accordance with policy #5141.21 and this administrative regulation;

**Supervision of the Administration of Medication**

The school nurse(s) is/are responsible for general supervision of administration of medications in the school(s) to which that nurse is assigned. The school nurse's duty of general supervision includes, but is not limited to the following:

1. Availability on a regularly scheduled basis to:
  - a. Review orders or changes in orders, and communicate these to personnel designated to administer medication for appropriate follow-up;
  - b. Set up a plan and schedule to ensure medications are given;
  - c. Provide training to qualified personnel for schools and other licensed nursing in the administration of medications, and assess that the qualified personnel for schools are competent to administer medications;
  - d. Support and assist other licensed nursing personnel and qualified personnel for schools to prepare for and implement their responsibilities related to the administration of specific medications during school hours; and,
  - e. Provide consultation by telephone or other means of telecommunications. (In the absence of the school nurse, an authorized prescriber or other nurse may provide this consultation.)
2. In addition, the school nurse shall be responsible for:
  - a. Implementing policies and procedures regarding the receipt, storage, and

**Students**

**Administering Medications to Students**

**Administration of Emergency Medication under Connecticut General Statute 10-212a  
(continued)**

administration of medications;

b. Reviewing, on a monthly basis, all documentation pertaining to the administration of medications for students;

c. Observing the competency to administer medication by qualified personnel for schools; and 5141.21(l) Students Administering Medications to Students Supervision of the Administration of Medication (continued)

d. Conducting periodic reviews, as needed, with licensed nursing personnel and qualified personnel for schools, regarding the needs of any student receiving medication.

Legal Reference: Connecticut General Statutes

10-206 Health assessment

10-212 School nurses and nurse practitioners. Administration of medications by parents or guardians on school grounds. Criminal history; records check

10-212a Administration of medicines by school personnel. (as amended by P.A. 03-211, PA 04-181 and PA 09-155)

19a-900 Use of cartridge injector by staff member of before- or afterschool program, day camp or day care facility

21a-240 Definitions

29-17a Criminal history checks. Procedure. Fees

52-557b Immunity from liability for emergency medical assistance first aid or medication by injection. School personnel not required to administer or render. (as amended by PA 05-144 – An Act Concerning the Emergency Use of Cartridge Injectors) Connecticut Regulations of State Agencies

10-212a-1 through 10-212a-10 Administration of Medication by School Personnel and Administration of Medication During Before- and After School Programs and School Readiness Programs, as amended

1307.21 Code of Federal Regulation

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BROOKFIELD PUBLIC SCHOOLS

Brookfield, Connecticut