Note: For more resources to develop, implement, and evaluate school health programs, visit the Texas Health and Human Services (DSHS) website at Texas Guide to School Health Services.[1] Additional information regarding Medication Administration in the School Setting[2] can be found on the Texas School Nurses Organization website.[3]

Injury or Illness at School

A student who is injured or becomes ill at school or at a school activity will be evaluated and the student's parent will be notified for further instructions.

Employees will comply with traumatic injury response protocols, including contacting emergency medical services, when required by law [see CKD].

Employees may also contact emergency medical services for emergency care when deemed necessary.

If a parent cannot be reached, decisions concerning medical treatment will be made by school staff in accordance with parental consent provided on the Authorization to Consent to Medical Treatment of a Student. [See FFAC(EXHIBIT) — A]

A student may consent to medical treatment without parental consent in accordance with Family Code 32.003.

Administering Medication

Administration of medication to students will be strictly governed by FFAC(LEGAL), FFAC(LOCAL), FFAF(LEGAL), FFAF(LOCAL), any related procedures, and the following:

1. Only school administrators may assign to willing and trained District employees the task of administering medication by any mode, including injectable medication, oral medication, inhalants, topical medication, or rectally administered

[1] Texas Health and Human Services (DSHS), Texas Guide to School Health Services: https://www.dshs.texas.gov/texas-school-health/texas-guide-school-health-services
[2] Medication Administration in the School Setting: https://higherlogicdownload.s3.amazonaws.com/NASN/b385213b-35e8-49e3-97fe-d6627843f498/UploadedImages/Public%20Documents/tsno_medication_position.pdf
[3] Texas School Nurse Organization: https://www.txsno.org/home

medication. Only authorized District employees may administer medication to students.

2. District employees authorized to administer medication will be provided orientation, instruction, and supervised practice appropriate to the task. The school nurse will explain to the principal or designated building administrator, employees authorized to administer medication, and, as applicable, the student's teachers any adverse side effects of the medication and the recommended action to be taken.

3. Medication for a specific student will be provided and brought to school by the parent of the student. Students will not carry medication or administer it to themselves unless authorized by their physician and permitted by state law to self-carry and self-administer. The physician must provide the District campus written documentation for the student to self-carry and self-administer. [See FFAC(LEGAL) and FFAF]

4. The principal or designee will appoint one employee, such as the school nurse, to supervise the storing and administering of medications and to maintain records of the administration of medication. Any District employee administering medication to a student must record each dose given on a medication administration record. Records will also include the parent's written request.

5. The principal will provide locked storage space where all medication may be maintained apart from office supplies, stored at the appropriate temperatures, and accessible only to authorized employees.

6. Each student's medication must have the original pharmacy label, including the student's name, the name of the medication, directions concerning dosage, and the schedule for administration.

7. Unless a shorter duration is specified, all parent requests or permissions for the District to administer medication will expire at the end of each school year and new requests or permissions must be reviewed prior to the beginning of each school year. Renewed, written permission for treatment will be required from both the physician and the parent for each new school year.

8. Hypodermic injections may be administered by a school nurse, if available, when the parental request also includes the prescribing physician's request. The physician's request must include detailed information concerning the

administration of the medication, as well as follow-up procedures. The student's parent will be instructed to furnish sterile, disposable syringes and needles. Used syringes and needles will be disposed of in accordance with rules of disposal of sharp instruments.

9. When the course of treatment is complete, or at the end of the school year, the parent will be asked to pick up any medication within a specified amount of time. The District will dispose of any unclaimed medication.

10. The Superintendent or designee may approve additional procedures concerning the handling, storing, administering, transporting, and disposing of medication in accordance with law and policy.

Unassigned epinephrine delivery systems

Definitions

11. If any person has incorrectly administered a medication to a student, this person must immediately contact emergency medical services, the campus principal, and the school nurse.

In accordance with state law, and for the purposes of these procedures, the following definitions will apply:

Anaphylaxis

"Anaphylaxis" is a sudden, severe, and potentially life-threatening allergic reaction that occurs when a person is exposed to an allergen.

Anaphylactic Reaction

An "anaphylactic reaction" is a serious allergic reaction that is rapid in onset and may cause death.

Unassigned epinephrine delivery system

An "unassigned epinephrine delivery system" is a disposable medical drug delivery device that contains a premeasured single dose of epinephrine that is intended to be used to treat anaphylaxis.

An "unassigned epinephrine delivery system" is an unassigned epinephrine delivery system prescribed by an authorized health-care provider in the name of the school issued with a non-patient-specific standing delegation order for the administration of an epinephrine unassigned epinephrine delivery

system, issued by a physician or person who has been delegated prescriptive authority under Occupations Code, Chapter 157.

Trained Individual

A "trained individual" or volunteer is a school employee or volunteer who has received required training and has signed the agreement to administer an unassigned epinephrine unassigned epinephrine delivery system.

Administration of Epinephrine

The District will follow the prescription medication administration regulations above for students who have a prescribed epinephrine unassigned epinephrine delivery system available on campus.

Certain students at risk of anaphylaxis reactions may possess and self-administer prescription anaphylaxis medication, including epinephrine unassigned epinephrine delivery systems, while on school property or at a school-related event or activity. Prior to self-possession or administration, a parent or guardian and a prescribing physician or health-care provider must provide written authorization.

Authorized and trained individuals may administer an unassigned epinephrine unassigned delivery system *on campus, at off-campus school events, and while in transit to and from a school event*. Authorized, trained individuals will administer epinephrine only when that individual reasonably believes that a person is experiencing an anaphylactic reaction.

The District will ensure that at least one authorized and trained individual is present on each campus during regular on-campus school hours and whenever school personnel are physically on site for school-sponsored activities.

After Emergency Administration to a Student

If an individual administers an unassigned epinephrine delivery system to a student, the school will promptly notify the student's parent, guardian, or emergency contact as soon as feasible during the emergency response to suspected anaphylaxis.

District Epinephrine Coordinator

The Superintendent has designated the following staff person as the District epinephrine coordinator:

Name: Stephanie Williams, RN

Position: District Nurse

Address: 110 East Garner St., Detroit, Texas 75436

Phone number: 903-674-6131 ext 7271

Email: swilliams@detroiteagles.net

Responsibilities

The District epinephrine coordinator will:

12. Oversee the acquisition or purchase of unassigned epinephrine delivery systems.
13. Coordinate the disposal of drugs in accordance with the U.S. Department of Health and Human Services drug disposal resources[4] and in accordance with Texas Health and Human Services (DSHS) bloodborne pathogens guidelines.[5]
14. Coordinate with each campus to ensure that the unassigned epinephrine delivery systems are checked monthly for expiration and usage and the findings are documented.
15. Schedule and coordinate the annual training.
16. Maintain a list of individuals authorized and trained in the District to administer unassigned epinephrine delivery systems.
17. Ensure that each campus has at least one trained individual (e.g., school personnel) or volunteer present for hours required by law or policy. [See (EXHIBIT) — D]
18. Maintain documentation that each authorized individual received the required training.
19. Disseminate applicable District policies and procedures regarding unassigned epinephrine delivery systems.
20. Document the number of and expiration dates for unassigned epinephrine delivery systems available at each location where administration is authorized by Board policy.

[4] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[5] Texas Health and Human Services (DSHS), bloodborne pathogens guidelines: https://www.dshs.texas.gov/bloodborne-pathogens

21. Train campus staff on the inventory process used to check unassigned epinephrine delivery systems monthly for expiration and replacement.
22. Provide guidance to campuses to ensure that unassigned epinephrine delivery systems are securely stored and easily accessible to authorized and trained individuals.
23. Arrange for replacement of unassigned epinephrine delivery systems due to use or expiration.
24. Make reports required by law. [See Reporting, below]
25. Maintain all reports and records in accordance with the District's record retention schedule regarding the administration, maintenance, and disposal of unassigned epinephrine delivery systems.
26. Maintain contact information for any health-care providers who provide the standing orders for epinephrine and consult with the physicians as needed.
27. Verify that, for each incident, local emergency medical services were promptly notified by the school when an individual is suspected of experiencing anaphylaxis and when an epinephrine delivery system was administered.
28. Verify that, for each incident, documentation is maintained regarding required notification of a parent, guardian, or emergency contact during or after emergency administration of an unassigned epinephrine delivery system to a student.
29. Coordinate an annual review of the District's procedures.

The school principal will identify specific individuals, which include employees to administer unassigned epinephrine delivery systems. Each individual must attend appropriate training. [See Training, below]

Notification

Before the start of each school year, the District will provide notice to parents of the District's policy to authorize and train individuals to administer an unassigned epinephrine delivery system to a person who may be experiencing anaphylaxis. The District will provide notice within 15 calendar days of any change to these provisions or discontinuation of this service.

Training

The District will annually train authorized individuals from each campus as required by law. The initial training will include hands-on training with an unassigned epinephrine delivery system trainer. Documentation that authorized individuals have received the required annual training is maintained at DISD Middle School/Nurse Office by the District epinephrine coordinator. [See FFAC(EXHIBIT) — D]

Campus Inventory and Storage

Each campus will have additional does available to use at the campus during regular on-campus school hours and whenever school personnel are physically on site for school-sponsored activities.

The supply of unassigned epinephrine delivery systems will be stored in the Nurse's office at Detroit Middle School.

Reporting

Within five business days after an individual has administered an unassigned epinephrine delivery system, the individual will meet with the District epinephrine coordinator to document needed information for the DSHS electronic submission form.

Within 10 business days of the administration of an unassigned epinephrine delivery system, the District epinephrine coordinator will notify the physician or other person who prescribed the unassigned epinephrine delivery system, and the commissioner of state health services and report the information required by law. The electronic submission of the *Required Reporting of Unassigned Administered Epinephrine Unassigned epinephrine delivery systems to DSHS*[6] meets the requirement of reporting to the commissioner of state health services and may be used for notifying the other individuals as required by law.

Disposal

Expired

Unassigned epinephrine delivery systems that have expired but have not been opened, administered, or used for any reason will be disposed of according to the U.S. Department of Health and

[6] Required Reporting of Unassigned Administered Epinephrine Auto-Injectors to DSHS: https://www.dshs.texas.gov/texas-school-health/required-reporting-forms/required-reporting-administered-epinephrine

Human Services drug disposal resources[7] and any District-approved procedures related to medication disposal.

Used

Unassigned epinephrine delivery systems that have been administered, opened, or used for any reason will be disposed according to guidelines in the U.S. Department of Health and Human Services drug disposal resources,[8] the Texas Health and Human Services (DSHS) bloodborne pathogens guidelines,[9] and any District-approved procedures related to infectious waste disposal. [See also DBB(LEGAL)]

Annual Review

Unassigned epinephrine delivery system procedures will be reviewed at least annually and after each administration of an unassigned epinephrine unassigned epinephrine delivery system.

District Coordinator for Respiratory Distress Medication

The Superintendent has designated the following staff person as the District coordinator for respiratory distress medication:

Name: Stephanie Williams, RN

Position: District Nurse

Address: 110 East Garner St, Detroit, Texas 75436

Phone number: 903-674-6131, ext 7271

Email: swilliams@detroiteagles.net

Responsibilities

The District coordinator for respiratory distress medication will:

30. Coordinate the disposal of drugs in accordance with the U.S. Department of Health and Human Services drug disposal

---

[7] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[8] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[9] Texas Health and Human Services (DSHS), bloodborne pathogens guidelines: https://www.dshs.texas.gov/bloodborne-pathogens

resources[10] and in accordance with Texas Health and Human Services (DSHS) bloodborne pathogens guidelines.[11]

31. Schedule and coordinate the annual training.
32. Maintain a list of individuals authorized and trained in the District to administer medication for respiratory distress.
33. Maintain agreements to administer medication of respiratory distress signed by each authorized and trained individual.
34. Ensure that each campus has at least one trained individual (e.g., school personnel) or volunteer present for hours required by law or policy.
35. Maintain documentation that each authorized individual received the required training.
36. Disseminate applicable District policies and procedures regarding medication for respiratory distress.
37. Document the number of and expiration dates for medication for respiratory distress available at each location where administration is authorized by Board policy.
38. Train campus staff on the inventory process used to check medication for respiratory distress monthly for expiration and replacement.
39. Provide guidance to campuses to ensure that medication for respiratory distress is securely stored and easily accessible to authorized and trained individuals.
40. Arrange for replacement of medication for respiratory distress due to use or expiration.
41. Make reports required by law. [See Reporting, below]
42. Maintain all reports and records in accordance with the District's record retention schedule regarding the administration, maintenance, and disposal of medication for respiratory distress.
43. Maintain contact information for any health-care providers who provide the standing orders for medications for

[10] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[11] Texas Health and Human Services (DSHS), bloodborne pathogens guidelines: https://www.dshs.texas.gov/bloodborne-pathogens

respiratory distress and consult with the physicians as needed.

44. Verify that, for each incident, documentation is maintained regarding required referral of the student and notification of the student's parent or guardian after administration of medication for respiratory distress to a student.

45. Coordinate an annual review of the District's procedures.

The school principal will identify specific individuals, which include employees, to administer medications for respiratory distress. Each individual must attend appropriate training. [See Training, below]

Notification

Before the start of each school year, the District will provide notice to parents of the District's policy to authorize and train individuals to administer medications for respiratory distress to a person who may be experiencing respiratory distress. The District will provide notice within 15 calendar days of any change to these provisions or discontinuation of this service. [See FFAC(EXHIBIT) — H and I]

Training

The District will annually train authorized individuals from each campus as required by law. Documentation that authorized individuals have received the required annual training is maintained at Nurse's Office, DISD Middle School by the District coordinator for respiratory distress medication. [See FFAC(EXHIBIT) — J]

Reporting

Within five business days after and individual has administered medication for respiratory distress, the individual will meet with the District coordinator for respiratory distress medication to document needed information for the DSHS electronic submission form.

Within 10 business days of the administration of medication for respiratory distress, the District coordinator for respiratory distress will notify the physician or other person who prescribed the medication for respiratory distress, and the commissioner of state health services and report the information required by law.

Disposal

Expired

Unassigned respiratory distress medications that have expired but have not been opened, administered, or used for any reason will

be disposed of according to the U.S. Department of Health and Human Services drug disposal resources[12] and any District-approved procedures related to medication disposal.

Used

Unassigned respiratory distress medications that have been opened, administered, or used for any reason will be disposed according to guidelines in the U.S. Department of Health and Human Services drug disposal resources,[13] the Texas Health and Human Services (DSHS) bloodborne pathogens guidelines,[14] and any District-approved procedures related to infectious waste disposal. [See also DBB(LEGAL)]

Annual Review

Procedures related to medications for respiratory distress will be reviewed at least annually and after each administration of a medication for respiratory distress.

Opioid Antagonists

Definitions

In accordance with state law, and for the purposes of these procedures, the following definitions will apply:

Opioid Antagonists

"Opioid antagonist" means any drug that binds to opioid receptors and blocks or otherwise inhibits the effects of opioids acting on those receptors.

Opioid-related drug overdose

"Opioid-related drug overdose" means a condition, evidenced by symptoms such as extreme physical illness, decreased level of consciousness, constriction of the pupils, respiratory depression, or coma, that a layperson would reasonably believe to be the result of the consumption or use of an opioid.

---

[12] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[13] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[14] Texas Health and Human Services (DSHS), bloodborne pathogens guidelines: https://www.dshs.texas.gov/bloodborne-pathogens

Physician

"Physician" means a person who holds a license to practice medicine in this state.

Trained Individual

A “trained individual” or volunteer is a school employee or volunteer who has received required training to administer an opioid antagonist.

Administration of Opioid Antagonist

For students in grades Head Start –12*,* the District will administer an opioid antagonist to a student that has symptoms of an opioid-related drug overdose such as extreme physical illness, decreased level of consciousness, constriction of the pupils, respiratory depression, or coma.

Each campus must have 2 doses opioid antagonists available at any given time.

Authorized, trained individuals will administer an opioid antagonist only when that individual reasonably believes a student is experiencing an opioid-related drug overdose.

The District will ensure that at least one authorized and trained individual is present on each campus during regular school hours.

After Emergency Administration to a Student

If an individual administers an opioid antagonist to a student, the school will notify the student’s parent, guardian, or emergency contact as soon as is feasible during the emergency response to the opioid-related drug overdose.

District Opioid Antagonist Coordinator

The Superintendent has designated the following staff person as the District opioid antagonist coordinator:

Name: Stephanie Williams, RN

Position: District Nurse

Address: 110 East Garner St, Detroit, Texas 75436

Phone number: 903-674-6131, ext 7271

Email: swilliams@detroiteagles.net

Responsibilities

The District opioid antagonist coordinator will:

1. Oversee the maintenance, administration, and disposal of an opioid antagonist.
2. Coordinate the disposal of drugs in accordance with the U.S. Department of Health and Human Services drug disposal resources[15] and in accordance with Texas Health and Human Services (DSHS) bloodborne pathogens guidelines.[16]
3. Coordinate with each campus to ensure that the opioid antagonists are checked monthly for expiration and usage and the findings are documented.
4. Schedule and coordinate the annual training.
5. Maintain a list of individuals authorized and trained in the District to administer opioid antagonists.
6. Ensure that each campus has at least one trained individual (e.g., school personnel) or volunteer present for hours required by law or policy.
7. Maintain documentation that each authorized individual received the required training.
8. Disseminate applicable District policies and procedures regarding opioid antagonists.
9. Document the number of and expiration dates for opioid antagonists available at each location where administration is authorized by Board policy.
10. Provide guidance to campuses to ensure that opioid antagonists are securely stored and easily accessible to authorized and trained individuals.
11. Arrange for replacement of opioid antagonists due to use or expiration.
12. Make reports required by law. [See Reporting, below]
13. Maintain all reports and records in accordance with the District's record retention schedule regarding the

[15] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[16] Texas Health and Human Services (DSHS), bloodborne pathogens guidelines: https://www.dshs.texas.gov/bloodborne-pathogens

administration, maintenance, and disposal of opioid antagonists.

14. Maintain contact information for any health-care providers who provide the standing orders for opioid antagonists and consult with the physicians as needed.

15. Verify that, for each incident, documentation is maintained regarding notification of a parent, guardian, or emergency contact during or after emergency administration of an opioid antagonist to a student.

16. Coordinate an annual review of the District's procedures.

The school principal will identify specific individuals, which include employees, to administer opioid antagonists. Each individual must attend appropriate training. [See Training, below]

Training

The District will annually train authorized individuals from each campus as required by law. Documentation that authorized individuals have received the required annual training is maintained at Nurse's Office, DISD Middle School by the District opioid antagonist coordinator. [See FFAC(EXHIBIT) — M]

Campus Inventory and Storage

Each campus will have 2 doses of opioid antagonists available to use at the campus during regular school hours.

The supply of opioid antagonists will be stored in the Nurse's Office, DISD Middle School.

Reporting

Within five business days after an individual has administered an opioid antagonist, the individual will meet with the District opioid antagonist coordinator to document needed information for the DSHS electronic submission form.

Within 10 business days of the administration of an opioid antagonist, the District opioid antagonist coordinator will notify the physician or other person who prescribed the opioid antagonist, and the commissioner of state health services and report the information required by law.

Disposal

Expired

Opioid antagonists that have expired but have not been opened, administered, or used for any reason will be disposed of according to the U.S. Department of Health and Human Services drug disposal resources[17] and any District-approved procedures related to medication disposal.

Used

Opioid antagonists that have been opened, administered, or used for any reason will be disposed according to guidelines in the U.S. Department of Health and Human Services drug disposal resources,[18] the Texas Health and Human Services (DSHS) bloodborne pathogens guidelines,[19] and any District-approved procedures related to infectious waste disposal. [See also DBB(LEGAL)]

Annual Review

Opioid antagonist procedures will be reviewed at least annually and after each administration of an opioid antagonist.

[17] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[18] U.S. Department of Health and Human Services, drug disposal resources: https://www.hhs.gov/opioids/prevention/safely-dispose-drugs/index.html
[19] Texas Health and Human Services (DSHS), bloodborne pathogens guidelines: https://www.dshs.texas.gov/bloodborne-pathogens