CATHOLIC DISTRICT SCHOOL BOARD OF EASTERN ONTARIO
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BOARD ADMINISTRATIVE PROCEDURE

ADMINISTRATIVE PROCEDURE

702 – Administration of Medication

DIRECTIONAL POLICY

700 – Healthy Schools and Workplaces

Title of Administrative Procedure:

Administration of Medication

Date Approved:

September 2026

Projected Review Date:

September 2031

Directional Policy Alignment:

This Administrative Procedure aligns with the Healthy Schools and Workplaces Directional Policy. The Board recognizes that the health and well-being of students and staff are foundational to their success. A healthy environment involves being respectful of one another's social, emotional, spiritual, and physical well-being. All members of the board, school, family, students, health care providers, and community partners have a collective responsibility to support creating healthy learning and work environments to keep students and staff safe.

Alignment with Multi-Year Strategic Plan:

The Administration of Medication Administrative Procedure supports the Board's Multi-Year Strategic Plan through its "to Nurture" tenant by creating a safe, supportive and healthy environment for all members of the CDSBEO community. The Board is committed to the safety and well-being of all students, staff and families and will ensure that all members of the CDSBEO community are aware of the directives outlined in this Administrative Procedure.

CDSBEO Strategic Plan

Purpose

The Catholic District School Board of Eastern Ontario is committed to providing medical and health support with respect and dignity to students who require it in order to attend school. It is the policy of the Catholic District School Board of Eastern Ontario to administer medication to students who require medical support in order for them to attend and participate in school.

Action Required

1) The Board recognizes that, in the event of an emergency administration of medication, when provided in good faith in response to a diabetes episode, anaphylactic episode (in accordance with Sabrina's Law, 2005 and CDSBEO's AP 704) or asthma episode (in accordance with Ryan's Law, 2015 and CDSBEO's AP 706), no action or other proceeding for damages shall be commenced for an act or omission done or omitted by a person in good faith, in the execution or intended execution of any duty or power under these Acts.
2) All employees are covered by the Board Liability Insurance when following the outlined procedures.
3) Employees may have legitimate reasons for refusing – in a non-life-threatening situation – to administer medication or provide health support services. If the appropriate staff training cannot be implemented, the principal shall consult with their Family of Schools Superintendent to ensure the safety and well-being of students.

Responsibilities

The Board of Trustees is responsible for:

- Ensuring alignment of this Administrative Procedure with the Healthy Schools & Workplaces Directional Policy.
- Reviewing this Administrative Procedure as part of its regular Policy and Procedures review cycle.

The Director of Education is responsible for:

- Designating resources for ensuring the implementation of and compliance with this Administrative Procedure.

Superintendents of Education are responsible for:

- Supporting principals and other employees for whom they have supervisory responsibility with the implementation of and compliance with the procedures and requirements under this Administrative Procedure.

Principals and Vice-Principals are responsible for:

- Providing leadership and support for staff in their knowledge, understanding and implementation of this Administrative Procedure.
- Ensuring the Medical Plan of Care is in place for students with a prevalent medical condition (Asthma, Anaphylaxis, Diabetes, and Epilepsy).
- Encouraging students who require short term medication to have the medication administered at home (e.g., cold medications, antibiotics), when possible. If a student does require short term prescription medication at school that a

parent/guardian pick up/drop off the medication in its original container at the school with written instructions from the parent(s)/guardian(s) are required. The procedures in this Policy are not required for students who are able to self-administer Protection of Life medication required for prevalent medical conditions (e.g., EpiPen®, neffy, inhalers). Students must carry these medications on their person.

- Ensuring that the parent(s)/guardian(s) provide a revised Medical Plan of Care and/or Administration of Medication form at the beginning of each school year or whenever there is a change in medication, health support, or emergency procedure. Parent(s)/guardian(s) are encouraged to share clearly articulated information/directions about medications from their physician or pharmacist.
- Ensuring:
    - That medication, a health support or emergency procedure are administered with staff supervision when required during school activities.
    - That the parent(s)/guardian(s) has the authorization forms signed by the physician and provides the school with the medication in its original container (e.g., updated annually or as medical needs change or prescription changes).
    - That it is appropriate for employees to provide the services (e.g., PPM 81, Special Education staff advice, etc.), and that training, if required, be provided.
    - That employees and/or alternates responsible for carrying out these procedures are clearly identified to all parties if the request is granted.
- Ensuring that the parent(s)/guardian(s) correctly completed the appropriate forms:
    - Authorization for Administration of Medication
    - Individual Medical Plans of Care outlining emergency response procedures for students with prevalent medical conditions.
        - Where applicable, the form will be signed by the physician, or a signed report from the physician will be attached. It is understood that a pre-authorized consent form is not required for the emergency application of an epinephrine auto-injector pen or nasal spray, epilepsy rescue medication or asthma medication. Every effort is to be made by the school staff to obtain a "Administration of Medication" form for each student who may require the administration of medication during school hours.
- Ensuring that the medications stored at school are:
    - Appropriately labelled (in the original container) with the student's name, medication name, amount required, time and frequency, expiration date, and include any special instructions regarding side effects or emergency procedures.
    - Securely and appropriately stored in central location(s) to avoid loss or tampering (e.g., locked box or locked refrigerator).

  - Available and accessible to students with Medical Plans of Care/Administration of Medication procedures (some medications must be carried by students, e.g., EpiPen®, neffy, inhaler).
  - Administered to the appropriate student and documented on the Student Medication Log with a second person to verify dose and delivery.
  - Returned to parent(s)/guardian(s) at the end of each school year or when the medication is changed, discontinued, or expired. This will be noted on the Student Medication Log.
- Ensuring that the completed Medical Plans of Care/Administration of Medication forms are held in a known location, and that all staff, including supply staff, are aware of the students, the procedures, and the central location.
- Maintaining a list of students requiring medication, health support services, and emergency procedures and establishing an annual review process.
- For students with PRN medication prescribed by a medical professional for the purpose of supporting incidents of significant dysregulation, or other conditions involving observation of a student's conduct or symptoms, the Principal will contact the parent(s)/guardian(s) each time to report observations by staff and seek their consent to administer the medication.
- Developing with staff and the parent(s)/guardian(s) appropriate student participation plans and emergency response procedures for school outings (e.g., parent(s)/guardian(s) supervision, storage, and accessibility of medication, educational assistant support, etc.).
- Ensuring that the parent(s)/guardian(s) is immediately notified if:
  - The emergency response procedures outlined in the Medical Plan of Care are enacted.
  - Any adverse reactions to medication or health procedure.
  - If a student refuses to comply with the procedure outlined.
    - If a resolution is not possible when contacting a parent(s)/guardian(s) or physician, the principal may determine if the procedure can be provided or if the student remains in attendance. This should be documented in the Medication Log and Medical Plan of Care.
- Ensuring that their Family of Schools Superintendent is informed of the events following enactment of any emergency response or other medical emergency.
- Ensuring that the Plan of Care is stored in the Ontario Student Record (OSR) and in a confidential and easily accessible binder kept in the main office.
- Ensuring that the Individual Student Record of Administered Medication is stored in the student OSR at the end of the school year. (Individual Student Record of Administered Medication are kept on file for the current school year and previous school year)
- Ensure that Special Services including the administration of medication are noted in the student's Aspen profile.

Staff are responsible for:

- Ensuring they are knowledgeable about the requirements and parameters outlined in this Administrative Procedure.
- Reviewing Medical Plans of Care for any student with whom they have direct contact and knowing where to access the Individual Medical Plans of Care for all students during a medical emergency.
- Providing occasional staff and other board personnel with access to Individual Medical Plans of Care of student for whom they will have direct contact with.
- When administering medication:
    - Examine the medication container to review the student's name, medication name, amount (e.g., milligrams), time and frequency, and any special instructions regarding emergency procedures or side-effects prior to each administration. Examine the medication log to ensure that the information recorded on it corresponds with that of the medical container. If there is a discrepancy, the parent(s)/guardian(s) should be contacted immediately.
    - Have a second staff member confirm the appropriate dosage and provide second authorization signature on the Medication log.
    - Take every precaution to safeguard the privacy of the student. This includes speaking with students individually, providing private locations for administration of medication and maintaining confidentiality when completing the Medication Log.
    - Observe the student to ensure that the medication is consumed, and document date on the Medication Log.
    - Dispose of syringes, needles, and equipment in a safe manner (place in labeled hard plastic containers and dispose with biohazardous waste).
- For students with PRN medication for the purpose of supporting incidents of significant dysregulation, or other conditions involving observation of a student's conduct or symptoms, staff will observe and document elements of escalation and report every occurrence to the Principal. Upon consent from the parent(s)/guardian(s) obtained from the Principal, staff will administer and document all administration of medication.
- Permitting a student to carry protection of life medications on their person with parent(s)/guardian(s) consent and as outlined in the student's Medical Plan of Care and authorization of Medication From and in alignment with this Administrative Procedure.
- If an employee has reason to believe that a student is experiencing an asthma exacerbation, administer asthma medication to the student for the treatment of the exacerbation, even if there is no pre-authorization to do so.

Parent(s)/guardian(s) or Adult Students are responsible for:

- Ensuring that the information provided to the school regarding the student is kept

up to date, including any medications that the student is taking.

- Informing school officials about any medical condition (or known inducers).
- Pre-authorizing the administration of medication in response to a medical emergency, provided that the school has up to date treatment medication and completed the Medical Plan of Care and Administration of Medication Form, and any applicable consent from the parent or guardian.
- Ensuring that written consent has been given for their child to carry their medication, if the parent(s)/guardian(s) deems it appropriate, and in consultation with a medical doctor or nurse practitioner.
- Providing the school and/or the child with sufficient quantities of (non-expired) medication and supplies in their original, clearly labeled containers, as directed by a medical doctor, and as outlined in the Medical Plan of Care.
- Ensuring all medications are delivered by an adult to the main office of the school and picked up by an adult at the end of the school year or when the medication is no longer required.
- Keep track of medication expiration dates and replace expired medication.
- Co-operating with school staff when requests are made for information related to storage of medication, administration of medication, and updated medical information.
- Communicating and collaborating with school staff about arrangements and considerations for out of school activities, co-curricular activities, and co-operative education placement, etc.

Students are responsible for:

- Depending on their cognitive, emotional, social, and physical stage of development, and their capacity for self-management, students are expected to actively support the development and implementation of their Medical Plan of Care. Students are expected to:
    - If possible, and when necessary, carry on their person or have accessible at all times protection of life medications and medical supplies supported by their Medical plan of Care.
    - Wear medical alert identification that they and/or their parent(s)/guardian(s) deem appropriate.
    - Communicate with their parent(s)/guardian(s) and school staff if they are facing challenges related to their medical condition(s) at school.
    - Participate in the development and review of the Medical Plan of Care to promote an understanding of the plan and develop their potential for self-advocacy and self-management, where possible.
    - Set goals for increased self-management, in conjunction with parent(s)/guardian(s) and health care professionals.

Progress Indicators

- CDSBEO staff administer medication, provide services, and respond to emergency medical conditions to support student safety, and to allow students to participate in school.

Definitions

Anaphylaxis: Anaphylaxis is a serious and possibly life-threatening allergic reaction that requires immediate recognition and intervention. Symptoms can vary from person to person.

Asthma: A chronic condition where the airways that comprise the lungs become swollen and fill with mucus in response to an asthma trigger. The symptoms (coughing, wheezing, chest tightness, and shortness of breath) are reversible but can be potentially life threatening if not promptly and adequately treated. There are many different types of triggers such as exercise, poor air quality, mold, dust, pollen, viral infections, animals, smoke, and cold air.

Diabetes: Diabetes is a chronic, metabolic disease characterized by elevated levels of blood glucose (or blood sugar).

Epilepsy: Epilepsy is a neurological condition that causes unprovoked, recurrent seizures. A seizure is a brief disruption in normal brain activity that interferes with brain function.

Medication: Medication refers to the medications that are prescribed by a healthcare provider and, by necessity, may be administered to a student, or taken by the student during school hours or school related activities.

Medical Plan of Care: Is a form that contains individualized information on a student with a prevalent medical condition. The Medical Plan of Care for a student with a prevalent medical condition should be co-created, reviewed, and/or updated by the parent(s)/guardian(s) in consultation with the principal or the principal's designate, designated staff (as appropriate), and the student (as appropriate), during the first thirty school days of every school year and, as appropriate, during the school year (e.g., when a student has been diagnosed with or changes to a prevalent medical condition). The student's health care provider may also sign this plan.

Training: Training may be provided by Board staff, health professionals, or, in some cases, parent(s)/guardian(s).

Related Documents

- Appendix A – Authorization for Administration of Medication Form
- Appendix B – Individual Student Record of Administered Medication

References

- Bill 3 – Sabrina's Law
- CDSBEO Directional Policy 700 – Healthy Schools & Workplaces
- Education Act – Duties of Principal
- Education Act – Duties of Teachers
- PPM 161: Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools, 2017
- PPM81: Provision of Health Support Services in School Settings
- Ryan's Law, 2015 – Ensuring Asthma Friendly Schools
- Patient Support & Helpful Resources | neffy®