

POLICY SERVICES

ADVISORY

Volume 35, Number 2

May 2023

Policy Advisory No. 744 Policy IGA — Curriculum Development

Policy Advisory No. 745 Policy IGD — Curriculum Adoption

Policy Advisory No. 746 Policy IJJ — Textbook/Supplementary Materials
Selection and Adoption

Policy Advisory No. 747 Policy JLCD — Medicines / Administering Medicines
to Students
Regulation JLCD-R — Medicines / Administering Medicines
to Students

NEW - Exhibit JLCD-EB — Medicines / Administering Medicines
to Students (Arizona Seizure Action Plan)

Summary

The following policy advisories are the result of laws passed by the Arizona Legislature (PA 747) and a response to open meeting law investigations conducted by the Arizona Attorney General (PA 744-46). Subscribers are urged to call policy services with questions and consult with their district legal counsel on implementation of policy.

Governing Boards may review and adopt these policy advisories consistent with the Policy Adoption process in Policy BGB—First Meeting – the proposal shall be presented for review; Second Meeting – the proposal shall be presented for discussion and action.

Policy Advisory Discussion

**Policy Advisory No. 744, 745, 746 Policy IGA — Curriculum Development
Policy IGD — Curriculum Adoption
Policy IJJ — Textbook/Supplementary
Materials Selection and Adoption**

Boards that authorize textbook review and selection committees are subject to open meeting law. A.R.S. §15-721(F)(2) and 15-722(B)(2). There have been multiple open meeting law complaints in 2021, 2022, and 2023 about curriculum adoption committees that were not posted and did not follow open meeting law.

Note: This material is written for informational purposes only, and not as legal advice. You may wish to consult an attorney for further explanation.

ASBA policy services recognizes that there are some groups of district professionals meeting to discuss curriculum that would not be a “board authorized committee” and therefore would not be subject to open meeting law. However, policy has always authorized boards to create curriculum committees and the clear reading of the statutes subject these types of committees to open meeting law.

Policy Advisory No. 747 Policy JLCD — Medicines / Administering Medicines to Students
Regulation JLCD-R— Medicines / Administering Medicines to Students
NEW Exhibit JLCD-EB— Medicines / Administering Medicines to Students

A.R.S. §15-160.02 derives from Seizure Safe Schools legislation (SB 1654-2022). The model legislation began in Kentucky in 2018 when one teen, Lyndsey Crunk, recognized a need to educate teachers and school professionals on the prevalence of people living with epilepsy and seizures. Arizona passed its model legislation in 2022 after it was introduced by the Epilepsy Foundation and later amended with help from ASBA’s Governmental Relations team.

Note: the purpose of this bill, as stated by its creators, was to educate school staff about epilepsy. The bill requires training and a dissemination of information. The training is not a requirement that any individual administer medication in any scenario. The requirements as required by law are instituted in model policy and regulation. If an individual is unable to proceed with their training during an emergency, they should call 911.

ASBA has included the model seizure management plan template as an exhibit- seizure management plans may be given to districts in other formats, the model is a suggestion of what may be included in a seizure management plan.

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If you have any questions, call Policy Services at (602) 254-1100. Ask for Nick Buzan, Director of Legal and Policy Services; Dr. Charlotte Patterson, Policy Analyst; Lynne Bondi, Policy Analyst; or Renae Watson, Policy Services Technician/Editor/Publisher. Our e-mail addresses are, respectively, [nbuzan@azsba.org], [cpatterson@azsba.org], [lbondi@azsba.org], and [rwatson@azsba.org]. You may also fax information to (602) 254-1177.

Note: This material is written for informational purposes only, and not as legal advice. You may wish to review the policy references and consult an attorney for further explanation.

**IGA ©
CURRICULUM DEVELOPMENT**

The need and value of a systematic, ongoing program of curriculum development and evaluation involving students, parents, teachers, and administrators are recognized. It is essential that the school system continually develop and modify its curriculum to meet changing needs. The Board authorizes the Superintendent to develop the curriculum for the school system and to organize committees to review the curriculum. Meetings of Board-authorized textbook selection committees shall comply with open meeting law requirements (A.R.S. 15-721(F) or 15-722(B)). All curriculum changes shall be approved by the Governing Board.

It shall be the responsibility of the Superintendent to develop proposals relating to curriculum modifications and additions that, in the opinion of the professional staff and consultants, are essential to the maintenance of a high-quality program of education from prekindergarten (PK) through grade twelve (12).

All certificated personnel have professional obligations to the school program beyond regular classroom duties, and these obligations will include work on curriculum committees.

Adopted: _____

LEGAL REF.:

A.R.S.
15-203
15-341
15-701
15-701.01
15-721
15-722
38-431
38-431.09

**IGD ©
CURRICULUM ADOPTION**

Board Approval

All new programs and courses of study will be subject to Board approval, as will elimination of programs and courses and extensive alteration in their content. Curricular proposals from the professional staff may be presented to the Superintendent, who will be responsible for making recommendations to the Board on such matters. Meetings of Board authorized textbook selection committees shall comply with open meeting law requirements. A.R.S. 15-721(F) or 15-722(B).

Prohibited Instruction

~~The Governing Board acknowledges the legislative affirmation that~~ Public school students should be taught to value each other as individuals and not be taught to resent or hate other races or classes of people.

No District school shall include in its program of instruction any courses or classes that:

- A. Promote the overthrow of the United States government.
- B. Promote resentment toward a race or class of people.
- C. Are designed primarily for students of a particular ethnic group.
- D. Advocate ethnic solidarity instead of treatment of students as individuals.

The above restrictions are not to be construed to restrict or prohibit:

- A. Courses or classes for Native American pupils that are required to comply with federal law.
- B. Grouping of students according to academic performance, including capability in the English language, that may result in a disparate impact by ethnicity.
- C. Courses or classes that include the history of any ethnic group and that are open to all students, unless the course or class is in violation of an above cited course or class restriction.
- D. Courses or classes that include the discussion of controversial aspects of history.
- E. Instruction about the Holocaust, any other instance of genocide, or the historical oppression of a particular group of people based on ethnicity, race, or class.

An alleged failure by the District to abide by the preceding conditions may subject the District to investigation by the State Board of Education (SBE) or the Superintendent of Public Instruction. Enforcement action may be instituted by the SBE or the Superintendent of Public Instruction as prescribed by A.R.S. 15-112.

Adopted: _____

LEGAL REF.:

A.R.S.

15-111

15-112

15-721

15-722

IJJ ©
TEXTBOOK / SUPPLEMENTARY
MATERIALS
SELECTION AND ADOPTION

The Board will approve and adopt all new textbooks and supplementary books. The Superintendent shall establish textbook selection procedures that shall provide for the appropriate involvement of staff members, students, and community members and follow the requirements of statute. These procedures may provide for the establishment of textbook selection committees. Recommendations from textbook selection committees will be forwarded to the Superintendent.

Public Review

Meetings of Board authorized textbook selection committees shall comply with open meeting law requirements. A.R.S. 15-721(F) or 15-722(B).

Textbooks and supplementary books for common schools recommended by textbook selection committees will be placed on display in the District office for a period of at least sixty (60) days prior to the meeting at which the Board will consider their adoption.

Textbooks for high schools recommended by textbook selection committees will be placed on display in the District office for a period of at least sixty (60) days prior to the meeting at which the Board will consider their adoption. Information related to high school textbooks, which are proposed for approval, shall be placed on the District website.

In recommending books, the committees will strive for continuity of textbooks throughout the different grades and use the same book series in all classes of the same grade.

"Textbook" means printed instructional materials or digital content, or both, and related printed or nonprinted instructional materials, that are written and published primarily for use in school instruction and that are required by a state educational agency or a local educational agency for use by pupils in the classroom, including materials that require the availability of electronic equipment in order to be used as a learning resource.

Objectives of Selection

It is the responsibility of the school textbook committees to:

- A. Recommend resources that will support and enrich the curriculum, taking into consideration the varied interests, abilities, learning styles, and maturity levels of students served.

B. Recommend resources that will stimulate growth in factual knowledge, critical analysis of differing sides of issues, literary appreciation, aesthetic values, and recognition of various societal values.

C. Place principle above personal opinion and reason above prejudice in the recommendation of resources of the highest quality in order to assure a comprehensive collection of resources appropriate for the complete education of all students.

The Superintendent will establish procedures for the purchase and distribution of all necessary textbooks, supplemental books, and other related instructional materials from the adopted list free of cost to students.

Removal of Textbooks/Supplementary Materials

Textbook selection committees may recommend to the Superintendent that certain previously adopted textbooks or supplementary materials be deleted from the Board-approved list. Textbooks and supplementary materials will not be deleted without the approval of the Board.

Disposal of Learning Materials

The Board authorizes the Superintendent to establish regulations for the disposal of surplus or outdated learning materials when it has been determined that the cost of selling such materials equals or exceeds estimated market value of the learning materials.

Adopted: _____

LEGAL REF.:

A.R.S.

15-203

15-342

15-721

15-722

15-726

CROSS REF.:

DN - School Properties Disposition

IJL - Library Materials Selection and Adoption

KEC - Public Concerns/Complaints about Instructional Resources

**JLCD ©
MEDICINES / ADMINISTERING
MEDICINES TO STUDENTS**

**Staff Administration of Medication
to Students – In General**

~~Under certain circumstances, w~~When it is necessary for a student to take medicine during school hours, the District will cooperate with the health care practitioner ~~family physician~~ and the parents if the following requirements are met:

- A. There must be a written order from the ~~physician~~ prescribing health care practitioner stating the name of the medicine, the dosage, and the time it is to be given.
- B. There must be written permission from the parent, or written authorization from the student if eighteen (18) years old, to allow the school or the student to administer the medicine. ~~Appropriate forms are available from the school office. See JLCD-EA.~~
- C. The medicine must come to the school office in the prescription container or, if it is over-the-counter medication, in the original container with all warnings and directions intact.

~~In the case of a minor student, administration of medication shall only occur on the written request or authorization of a parent or legal guardian, except for an emergency administration pursuant to A.R.S. 15-157 (epinephrine) or A.R.S. 15-158 (Inhalers) or A.R.S. 15-341, subsection A, paragraph 43, (naloxone hydrochloride/any other opioid antagonist).~~

~~School district, charter schools and employees of school districts and charter schools are immune from civil liability for the consequences of the good faith adoption and implementation of policies and procedures pursuant to the statute.~~

~~The Governing Board recognizes that the prescribed annual training is optional during any fiscal year in which a school does not stock epinephrine auto-injectors at the school during that fiscal year.~~

~~A school district or charter school may accept monetary donations for or apply for grants for the purchase of epinephrine auto-injectors or may participate in third-party programs to obtain epinephrine auto-injectors at fair market, free or reduced prices.~~

Exceptions:

**Staff Administration of Medication by
Students – Limited Circumstances**

Students are entitled to possess and self-administer medications under the following limited circumstances:

<i>Note:</i> This material is written for informational purposes only, and not as legal advice. You may wish to consult an attorney for further explanation.
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A. Emergency Epinephrine – Students who have been diagnosed with anaphylaxis may carry and self-administer emergency medications including epinephrine auto-injectors. The student is entitled to possess and self-administer this medication if the student's name is on the prescription label, on the medication container or device, and annual written documentation from the student's parent is provided that authorizes possession and self-administration. The student shall notify the school office as soon as practicable following the use of the medication.

B. Handheld Inhalers – ~~Students may possess and self-administer prescription medication~~ For breathing disorders in handheld inhaler devices if prescribed by a health care professional. The pupil's student's name must be on the prescription label, on the medication container, or on the handheld inhaler device and annual written documentation from the pupil's student's parent or guardian is must be provided to the school health office that authorizes possession and self-administration.

C. Diabetes Management – Students with diabetes who have a diabetes medical management plan provided by the student's parent ~~or guardian~~, signed by a licensed health professional or nurse practitioner as specified by A.R.S. 15-344.01, may carry appropriate medications and monitoring equipment and self-administer the medication. Specific requirements of this policy are listed in Regulation JLCD-R.

~~District employees may volunteer to be a student's diabetes care assistant, subject to approval by the student's parent or guardian, in an emergency situation as described in 15-344.01. The Superintendent may develop regulations for implementing this provision.~~

~~The District reserves the right, in accordance with procedures established by the Superintendent, to circumscribe or disallow the use or administration of any medication on school premises if the threat of abuse or misuse of the medicine may pose a risk of harm to a member or members of the student population.~~

Emergency Administration of Medicines by Trained Employees

Auto-Injectable Epinephrine

If the Governing Board elects to stock auto-injectable epinephrine, the Governing Board directs the Superintendent to prescribe and enforce regulations and procedures for the emergency administration of auto-injectable epinephrine by a trained employee of the School District pursuant to section A.R.S. 15-157 and R-7-2-809.

If auto-injectable epinephrine is in stock, the Superintendent shall designate at least two (2) school personnel for each school site who shall be required to receive annual training in the proper administration of auto-injectable epinephrine pursuant to R-7-2-809. The Superintendent shall maintain and make available upon request a list of those school personnel authorized and trained to administer auto-injectable epinephrine.

Inhalers

A trained school employee, or trained nurse under contract, may administer, or assist in the administration of, an inhaler to a pupil or an adult whom the individual believes in good faith to be exhibiting symptoms of respiratory distress while at school or a school-sponsored activity.

Naloxone Hydrochloride (NARCAN)

The Governing Board directs the Superintendent to prescribe and enforce regulations and procedures for the emergency administration of naloxone hydrochloride, or any other opioid antagonist approved by the United States Food and Drug Administration, by an employee of a school district pursuant to Section 36-2267, ~~Administration of opioid antagonist; exemption from civil liability; definition, which, in part states the following:~~

Seizure Management Plans

The Superintendent shall create procedures to administer seizure management plans for students diagnosed with a seizure disorder. The procedures shall comply with A.R.S. 15-160.02. The District shall:

- A. Verify and accept student seizure management plans developed by student's parents and physicians or nurse practitioners.
- B. Assign a nurse, employed or under contract, to review the plan. If no nurse is available, the Superintendent shall designate an employee to be responsible for reviewing seizure management and treatment plans.
- C. Confirm that nurses, and non-nurse staff required by statute, are trained as according to law.
- D. Require at least one (1) school official, in addition to the nurse, to meet the training requirements listed in 15-160.02(H).
- E. Seizure management plans shall be submitted to the school health office or District office for review; a template for health plans can be found in Exhibit JLCD-EB.

Required Trainings

Training on Anaphylactic Shock

If the Governing Board elects to stock auto-injectable epinephrine, the Superintendent shall require all school site personnel to receive an annual training on the recognition of anaphylactic shock symptoms and procedures to follow when anaphylactic shock occurs.

Training on Recognition of Symptoms of Respiratory Distress and Administration of Inhalers

If the Governing Board elects to administer inhalers, the Superintendent must designate at least two (2) personnel at each school site who shall be trained in the recognition of respiratory distress symptoms, the procedures to follow when respiratory distress occurs, and the administration of inhalers, as directed on the prescription protocol. R-7-2-810. The Superintendent must maintain and make available upon request a list of school personnel authorized to administer inhalers. The Superintendent will review and implement all the regulatory items listed in R-7-2-810, if applicable, as set forth in Regulation JLCD-R.

Training on Seizure Management Plans

The Superintendent will require that nurses, non-nurse staff listed in A.R.S.15-160.02, and at least one additional employee, be trained in the awareness of seizure disorders and/or the ability to administer or assist with the self-administration, where applicable, as implemented by the State Board of Education. Specific training requirements listed in JLCD-R.

Termination of Medication Administration Policy

The District reserves the right, in accordance with procedures established by the Superintendent, to circumscribe or disallow the use or administration of any medication on school premises if the threat of abuse or misuse of the medicine may pose a risk of harm to a member or members of the student population.

~~A. A person may administer an opioid antagonist that is prescribed or dispensed pursuant to section 32-1979 or 36-2266 in accordance with the protocol specified by the physician, nurse practitioner, pharmacist or other health professional to a person who is experiencing an opioid-related overdose.~~

~~B. A person who in good faith and without compensation administers an opioid antagonist to a person who is experiencing an opioid-related overdose is not liable for any civil or other damages as the result of any act or omission by the person rendering the care or as the result of any act or failure to act to arrange for further medical treatment or care for the person experiencing the overdose, unless the person while rendering the care acts with gross negligence, willful misconduct or intentional wrongdoing.~~

~~C. "Person" includes an employee of a school district or charter school who is acting in the person's official capacity.~~

~~This policy and any related policies or amendments to such policies shall be forwarded to the District liability insurance carrier for review.~~

Adopted: _____

LEGAL REF.:

A.R.S.

15-157

15-158

15-160.02

15-203

15-341

15-344

15-344.01

32-1601

32-1901

R-7-2-809

R-7-2-810

JLCD-R ©

REGULATION

**MEDICINES / ADMINISTERING
MEDICINES TO STUDENTS**

(Medication Procedures)

Prescription Drugs

For occasions when it is necessary for a student to receive a prescription drug during the school day, the following procedure has been established to ensure the protection of the school and the student and to assure compliance with existing rules and regulations:

Administration by school personnel:

- A. The medication must be prescribed by a physician.
- B. The parent or guardian must provide written permission to administer the medicine to the student. Appropriate forms are available from the school office.
- C. The medication must come to the school office in the prescription container as put up by the pharmacist. Written directions from the physician or pharmacist must state the name of the patient, the name of the medicine, the dosage, and the time it is to be given.
- D. An administrator may designate a school employee to administer the medication.
- E. Any medication administration services specified in the child's diabetes medical management plan shall be provided.
- F. Two (2) or more school employees, subject to final approval by the student's parent or guardian, may volunteer to serve as diabetes care assistants. Voluntary diabetes care assistants are allowed to administer insulin, assist the pupil with self-administration of insulin, administer glucagon in an emergency situation to a pupil or perform any combination of these actions if all of the following conditions exist:
 - 1. A school nurse or another health professional who is licensed pursuant to statute or a nurse practitioner who is licensed pursuant to statute is not immediately available to attend to the pupil at the time of the emergency.

2. If the voluntary diabetes care assistant is authorized to administer glucagon, the parent or guardian must provide to the school an unexpired glucagon kit prescribed for the student by an appropriately licensed health care professional or nurse practitioner.
 3. The volunteer diabetes care assistant has provided to the school a written statement signed by an appropriately licensed health professional that the voluntary diabetes care assistant has received proper training in the administration of glucagon, including the training specified in A.R.S. 15-344.01.
 4. If the voluntary diabetes care assistant is authorized to administer insulin, the parent or guardian of the pupil has provided insulin and all equipment and supplies that are necessary for insulin administration by voluntary diabetes care assistants.
 5. The training provided by an appropriately licensed health professional must include all of the following:
 - a. An overview of all types of diabetes.
 - b. The symptoms and treatment of hyperglycemia and hypoglycemia.
 - c. Techniques for determining the proper dose of insulin in a specific situation based on instructions provided in the orders submitted by the pupil's physician.
 - d. Techniques for recognizing the symptoms that require the administration of glucagon.
 - e. Techniques on administering glucagon.
 6. A District employee shall not be subject to any penalty or disciplinary action for refusing to serve as a voluntary diabetes care assistant.
 7. The District, employees of the District, and properly licensed volunteer health professionals and nurse practitioners are immune from civil liability for the consequences of the good faith adoption and implementation of policies and procedures pursuant to District policy and this regulation.
- G. Each administration of prescription drugs must be documented, making a record of the student having received the medication.
- H. Drugs must be kept in their original containers in a locked medicine cabinet.

Self-administration:

- A. When the physician feels it is necessary for the student to carry and self-administer the medication, the physician shall provide written recommendations, to be attached to the signed parent permission form except in the case of medication for diagnosed anaphylaxis and breathing disorders requiring handheld inhaler devices. In these cases the student's name on the prescription label is sufficient for the physician's recommendation.
- B. The student's diabetes medical management plan provided by the parent or guardian shall be signed by the appropriately licensed health professional or nurse practitioner and shall state that the student is capable of self-monitoring blood glucose and shall list the medications, monitoring equipment, and nutritional needs that are medically appropriate for the pupil to self-administer and that have been prescribed or authorized for that student. The student must be able to practice proper safety precautions for the handling and disposal of the equipment and medications that the student is authorized to use under these provisions. The pupil's diabetes medical management plan shall specify a method to dispose of equipment and medications in a manner agreed on by the parent or guardian and the school.
- C. The parent or guardian must provide written permission for the student to self-administer and carry the medication. Appropriate forms are available from the school office.
- D. The medication must come in the prescription container as put up by the pharmacist.

Over-the-Counter Medication

When it is necessary for a student to receive a medicine that does not require a prescription order but is sold, offered, promoted, and advertised to the general public, the following procedure has been established to ensure the protection of the school and the student:

Administration by school personnel:

- A. Written permission must be provided by the parent or guardian for the administration of specific over-the-counter drugs.
- B. Any over-the-counter drug or medicine sent by the parent to be administered to a student must come to the school office in the original manufacturer's packaging with all directions, dosages, compound contents, and proportions clearly marked.
- C. An administrator may designate a school employee to administer a specific over-the-counter drug.

D. Each instance of administration of an over-the-counter drug must be documented in the daily log.

E. Over-the-counter drugs must be kept in their original containers in a locked medicine cabinet.

Self-administration:

A. Written permission must be provided by the parent or guardian for the administration of specific over-the-counter drugs by the student.

B. Over-the-counter drugs or medicine sent by the parent to be administered by the student must be kept by the student in the original manufacturer's packaging, with all directions, dosages, compound contents, and proportions clearly marked.

C. *Necessity* for self-administration of an over-the-counter drug or medicine shall be determined by the student's physician and must be verified by a signed physician's statement attached to the parent or guardian permission form, indicating the specific drug or medicine.

Protection of Students

Use or administration of medication on school premises may be disallowed or strictly limited if it is determined by the Superintendent, in consultation with medical personnel, that a threat of abuse or misuse of the medicine may pose a risk of harm to a member of the student population.

The student shall take extraordinary precautions to keep secure any medication or drug, and under no circumstances shall make available, provide, or give the item to another person. The student shall immediately report the loss or theft of any medication brought onto school campus. Violation of this regulation may subject the student to disciplinary action.

Inhalers

Administration by school personnel:

School personnel administering inhalers will do the following:

A. Determine if symptoms indicate possible respiratory distress or emergency and determine if the use of an inhaler will properly address the respiratory distress or emergency.

B. Administer the correct dose of inhaler medication, as directed by the prescription protocol, regardless of whether the individual who is believed to be experiencing respiratory distress has a prescription for an inhaler and spacer or holding chamber or has been previously diagnosed with a condition requiring an inhaler.

- C. Restrict physical activity, encourage slow breaths, and allow the individual to rest.
- D. Assure that trained personnel stay with the subject who has been administered inhaler medication until it is determined whether the medication alleviates symptoms.
- E. If applicable, instruct office staff to notify the school nurse if the inhaler is administered by a trained but non-licensed person.
- F. Instruct school staff to notify the parent or guardian.
- G. Call 911 if severe respiratory distress continues. Advise that inhaler medication was administered and stay with the person until emergency medical responders arrive.
- H. If the individual shows improvement, keep the individual under supervision until breathing returns to normal, with no more chest tightness or shortness of breath, and the individual can walk and talk easily.
- I. Allow a student to return to class if breathing has returned to normal and all symptoms have resolved.
- J. Notify a parent or guardian once the inhaler has been administered and the student has returned to class.
- K. Document the incident detailing who administered the inhaler, the approximate time of the incident, notifications made to the school administration, emergency responders, and parents/guardians.
- L. Retain the incident data on file at the school pursuant to the general records retention schedule regarding health records for school districts and charter schools established by the Arizona State Library, Archives and Public Records.
- M. Order replacement inhalers, spacers and holding chambers as needed.

Seizure Management Plans

The School District will verify and accept student seizure management plans as follows:

- A. Before or at the beginning of the school year, at enrollment, or as soon as practicable following diagnosis of the student's seizure disorder.
- B. The school will annually request up-to-date management plans from parents or guardians.

The District will not accept seizure management plans unless the plan includes the following:

- A. An outline of procedures recommended by the physician or registered nurse practitioner responsible for the student's seizure treatment plan.
- B. An outline of other health care services available at school that the student may receive to help manage the student's seizure disorder at school.
- C. A signature by the student's parent or guardian AND the physician or registered nurse practitioner responsible for the student's seizure treatment.

Seizure management plans must be provided to the school health office.

Individuals that Must be Trained

The following individuals must receive statutorily required training approved by the State Board of Education and available here: <https://azsbe.az.gov/resources/seizure-training>.

Nurses, under contract or employed by the school:

If they receive a seizure management and treatment plan, they must complete an online course of instruction for school nurses regarding managing students with seizure disorders.

Nurses and at least one (1) other school employee:

Training to administer or assist with the self-administration of both 1) as seizure rescue medication or a medication prescribed to treat seizure disorder symptoms; and 2), a manual dose of prescribed electrical stimulation using a vagus nerve stimulator magnet.

Principals, guidance counselors, teachers, bus drivers or classroom aides whose duties include regular contact with students who have submitted a seizure management and treatment plan:

An online course of instruction for school personnel regarding awareness of students with seizure disorders.

JLCD-EB ©

EXHIBIT

**MEDICINES / ADMINISTERING
MEDICINES TO STUDENTS**

ARIZONA SEIZURE ACTION PLAN

To view the District's Seizure Action Plan form, click here.

Arizona Seizure Action Plan

Student's Name: _____ Date of Birth: _____ Allergies: _____
 Emergency Contact: _____ Best Phone Number: _____

Seizure Information

Seizure Type	Length	Frequency	Description
Seizure triggers or warnings			
Student's response to seizure			
Care after seizure			

Parent complete →

Provider completes →

Green Zone (Less than 2 minutes):

- Stay CALM and track duration
- Keep SAFE - Protect head, do not restrain
- Turn on SIDE if not awake (do not place anything in mouth)
- TIME seizure length
- Swipe VNS magnet x 1 if present
- Contact family about seizure
- May return to class per parent approval

Yellow Zone (2 to ____ minutes):

- Stay with student. Call for assistance
- Prepare rescue treatments

Red Zone (Greater than ____ minutes):

- Give rescue medication (Below)
- Call 911 if seizure does not end 5 minutes after rescue medication is given

Rescue medications:

- For **prolonged** seizure give:
 - Diazepam ____ mg rectally
 - Clonazepam ODT ____ mg between cheek/gums
 - Midazolam/diazepam ____ mg in the nose
 - Other: _____
- For **cluster** of ____ seizures in ____ minute give:
 - Diazepam ____ mg rectally
 - Clonazepam ODT ____ mg between cheek/gum
 - Midazolam/diazepam ____ mg in the nose
 - Other: _____

(Potential adverse effects include sedation, confusion, respiratory depression)

Medical emergencies (Call 911):

- Difficulty breathing after seizure
- Serious injury or seizure in water
- Seizure does not end 5 minutes after rescue medication is administered

Other: _____

Always take seizure action plan and emergency medication for school activities, sports, and field trips. Close adult supervision when swimming or climbing.

Health Care Provider Signature	Printed Name	Office Phone	Date
Parent/Guardian Signature	Student Signature (when applicable)	Date	

The following documents are “clean” versions of the JLCD documents from Policy Advisory 747.

Policy Advisory No. 747 Policy JLCD — Medicines / Administering Medicines
to Students

Regulation JLCD-R — Medicines / Administering Medicines
to Students

NEW - Regulation JLCD-EB — Medicines / Administering Medicines
to Students (Arizona Seizure Action Plan)

**JLCD ©
MEDICINES / ADMINISTERING
MEDICINES TO STUDENTS**

**Staff Administration of Medication
to Students – In General**

When it is necessary for a student to take medicine during school hours, the District will cooperate with the health care practitioner and the parents if the following requirements are met:

- A. There must be a written order from the prescribing health care practitioner stating the name of the medicine, the dosage, and the time it is to be given.
- B. There must be written permission from the parent, or written authorization from the student if eighteen (18) years old, to allow the school or the student to administer the medicine. See JLCD-EA.
- C. The medicine must come to the school office in the prescription container or, if it is over-the-counter medication, in the original container with all warnings and directions intact.

**Staff Administration of Medication by
Students – Limited Circumstances**

Students are entitled to possess and self-administer medications under the following limited circumstances:

- A. ***Emergency Epinephrine*** – Students who have been diagnosed with anaphylaxis may carry and self-administer emergency medications including epinephrine auto-injectors. The student is entitled to possess and self-administer this medication if the student's name is on the prescription label, on the medication container or device, and annual written documentation from the student's parent is provided that authorizes possession and self-administration. The student shall notify the school office as soon as practicable following the use of the medication.
- B. ***Handheld Inhalers*** – Students may possess and self-administer prescription medication for breathing disorders in handheld inhaler devices if prescribed by a health care professional. The student's name must be on the prescription label, on the medication container, or on the handheld inhaler device and annual written documentation from the student's parent must be provided to the school health office that authorizes possession and self-administration.
- C. ***Diabetes Management*** – Students with diabetes who have a diabetes medical management plan provided by the student's parent, signed by a licensed health professional or nurse practitioner as specified by A.R.S. 15-344.01, may carry appropriate medications and monitoring equipment and self-administer the medication. Specific requirements of this policy are listed in Regulation JLCD-R.

Emergency Administration of Medicines by Trained Employees

Auto-Injectable Epinephrine

If the Governing Board elects to stock auto-injectable epinephrine, the Governing Board directs the Superintendent to prescribe and enforce regulations and procedures for the emergency administration of auto-injectable epinephrine by a trained employee of the School District pursuant to section A.R.S. 15-157 and R-7-2-809.

If auto-injectable epinephrine is in stock, the Superintendent shall designate at least two (2) school personnel for each school site who shall be required to receive annual training in the proper administration of auto-injectable epinephrine pursuant to R-7-2-809. The Superintendent shall maintain and make available upon request a list of those school personnel authorized and trained to administer auto-injectable epinephrine.

Inhalers

A trained school employee, or trained nurse under contract, may administer, or assist in the administration of, an inhaler to a pupil or an adult whom the individual believes in good faith to be exhibiting symptoms of respiratory distress while at school or a school-sponsored activity.

Naloxone Hydrochloride (NARCAN)

The Governing Board directs the Superintendent to prescribe and enforce regulations and procedures for the emergency administration of naloxone hydrochloride, or any other opioid antagonist approved by the United States Food and Drug Administration, by an employee of a school district pursuant to Section 36-2267.

Seizure Management Plans

The Superintendent shall create procedures to administer seizure management plans for students diagnosed with a seizure disorder. The procedures shall comply with A.R.S. 15-160.02. The District shall:

- A. Verify and accept student seizure management plans developed by student's parents and physicians or nurse practitioners.
- B. Assign a nurse, employed or under contract, to review the plan. If no nurse is available, the Superintendent shall designate an employee to be responsible for reviewing seizure management and treatment plans.
- C. Confirm that nurses, and non-nurse staff required by statute, are trained as according to law.
- D. Require at least one (1) school official, in addition to the nurse, to meet the training requirements listed in 15-160.02(H).
- E. Seizure management plans shall be submitted to the school health office or District office for review; a template for health plans can be found in Exhibit JLCD-EB.

Required Trainings

Training on Anaphylactic Shock

If the Governing Board elects to stock auto-injectable epinephrine, the Superintendent shall require all school site personnel to receive an annual training on the recognition of anaphylactic shock symptoms and procedures to follow when anaphylactic shock occurs.

Training on Recognition of Symptoms of Respiratory Distress and Administration of Inhalers

If the Governing Board elects to administer inhalers, the Superintendent must designate at least two (2) personnel at each school site who shall be trained in the recognition of respiratory distress symptoms, the procedures to follow when respiratory distress occurs, and the administration of inhalers, as directed on the prescription protocol. R-7-2-810. The Superintendent must maintain and make available upon request a list of school personnel authorized to administer inhalers. The Superintendent will review and implement all the regulatory items listed in R-7-2-810, if applicable, as set forth in Regulation JLCD-R.

Training on Seizure Management Plans

The Superintendent will require that nurses, non-nurse staff listed in A.R.S.15-160.02, and at least one additional employee, be trained in the awareness of seizure disorders and/or the ability to administer or assist with the self-administration, where applicable, as implemented by the State Board of Education. Specific training requirements listed in JLCD-R.

Termination of Medication Administration Policy

The District reserves the right, in accordance with procedures established by the Superintendent, to circumscribe or disallow the use or administration of any medication on school premises if the threat of abuse or misuse of the medicine may pose a risk of harm to a member or members of the student population.

Adopted: _____

LEGAL REF.:

A.R.S.

15-157

15-158

15-160.02

15-203

15-341

15-344

15-344.01

32-1601

32-1901

R-7-2-809

R-7-2-810

Note: This material is written for informational purposes only, and not as legal advice. You may wish to consult an attorney for further explanation.

JLCD-R ©

REGULATION

**MEDICINES / ADMINISTERING
MEDICINES TO STUDENTS**

(Medication Procedures)

Prescription Drugs

For occasions when it is necessary for a student to receive a prescription drug during the school day, the following procedure has been established to ensure the protection of the school and the student and to assure compliance with existing rules and regulations:

Administration by school personnel:

- A. The medication must be prescribed by a physician.
- B. The parent or guardian must provide written permission to administer the medicine to the student. Appropriate forms are available from the school office.
- C. The medication must come to the school office in the prescription container as put up by the pharmacist. Written directions from the physician or pharmacist must state the name of the patient, the name of the medicine, the dosage, and the time it is to be given.
- D. An administrator may designate a school employee to administer the medication.
- E. Any medication administration services specified in the child's diabetes medical management plan shall be provided.
- F. Two (2) or more school employees, subject to final approval by the student's parent or guardian, may volunteer to serve as diabetes care assistants. Voluntary diabetes care assistants are allowed to administer insulin, assist the pupil with self-administration of insulin, administer glucagon in an emergency situation to a pupil or perform any combination of these actions if all of the following conditions exist:
 - 1. A school nurse or another health professional who is licensed pursuant to statute or a nurse practitioner who is licensed pursuant to statute is not immediately available to attend to the pupil at the time of the emergency.
 - 2. If the voluntary diabetes care assistant is authorized to administer glucagon, the parent or guardian must provide to the school an unexpired glucagon kit prescribed for the student by an appropriately licensed health care professional or nurse practitioner.

3. The volunteer diabetes care assistant has provided to the school a written statement signed by an appropriately licensed health professional that the voluntary diabetes care assistant has received proper training in the administration of glucagon, including the training specified in A.R.S. 15-344.01.

4. If the voluntary diabetes care assistant is authorized to administer insulin, the parent or guardian of the pupil has provided insulin and all equipment and supplies that are necessary for insulin administration by voluntary diabetes care assistants.

5. The training provided by an appropriately licensed health professional must include all of the following:

a. An overview of all types of diabetes.

b. The symptoms and treatment of hyperglycemia and hypoglycemia.

c. Techniques for determining the proper dose of insulin in a specific situation based on instructions provided in the orders submitted by the pupil's physician.

d. Techniques for recognizing the symptoms that require the administration of glucagon.

e. Techniques on administering glucagon.

6. A District employee shall not be subject to any penalty or disciplinary action for refusing to serve as a voluntary diabetes care assistant.

7. The District, employees of the District, and properly licensed volunteer health professionals and nurse practitioners are immune from civil liability for the consequences of the good faith adoption and implementation of policies and procedures pursuant to District policy and this regulation.

G. Each administration of prescription drugs must be documented, making a record of the student having received the medication.

H. Drugs must be kept in their original containers in a locked medicine cabinet.

Self-administration:

A. When the physician feels it is necessary for the student to carry and self-administer the medication, the physician shall provide written recommendations, to be attached to the signed parent permission form except in the case of medication for diagnosed anaphylaxis and breathing disorders requiring handheld inhaler devices. In these cases the student's name on the prescription label is sufficient for the physician's recommendation.

B. The student's diabetes medical management plan provided by the parent or guardian shall be signed by the appropriately licensed health professional or nurse practitioner and shall state that the student is capable of self-monitoring blood glucose and shall list the medications, monitoring equipment, and nutritional needs that are medically appropriate for the pupil to self-administer and that have been prescribed or authorized for that student. The student must be able to practice proper safety precautions for the handling and disposal of the equipment and medications that the student is authorized to use under these provisions. The pupil's diabetes medical management plan shall specify a method to dispose of equipment and medications in a manner agreed on by the parent or guardian and the school.

C. The parent or guardian must provide written permission for the student to self-administer and carry the medication. Appropriate forms are available from the school office.

D. The medication must come in the prescription container as put up by the pharmacist.

Over-the-Counter Medication

When it is necessary for a student to receive a medicine that does not require a prescription order but is sold, offered, promoted, and advertised to the general public, the following procedure has been established to ensure the protection of the school and the student:

Administration by school personnel:

A. Written permission must be provided by the parent or guardian for the administration of specific over-the-counter drugs.

B. Any over-the-counter drug or medicine sent by the parent to be administered to a student must come to the school office in the original manufacturer's packaging with all directions, dosages, compound contents, and proportions clearly marked.

C. An administrator may designate a school employee to administer a specific over-the-counter drug.

D. Each instance of administration of an over-the-counter drug must be documented in the daily log.

E. Over-the-counter drugs must be kept in their original containers in a locked medicine cabinet.

Self-administration:

A. Written permission must be provided by the parent or guardian for the administration of specific over-the-counter drugs by the student.

B. Over-the-counter drugs or medicine sent by the parent to be administered by the student must be kept by the student in the original manufacturer's packaging, with all directions, dosages, compound contents, and proportions clearly marked.

C. *Necessity* for self-administration of an over-the-counter drug or medicine shall be determined by the student's physician and must be verified by a signed physician's statement attached to the parent or guardian permission form, indicating the specific drug or medicine.

Protection of Students

Use or administration of medication on school premises may be disallowed or strictly limited if it is determined by the Superintendent, in consultation with medical personnel, that a threat of abuse or misuse of the medicine may pose a risk of harm to a member of the student population.

The student shall take extraordinary precautions to keep secure any medication or drug, and under no circumstances shall make available, provide, or give the item to another person. The student shall immediately report the loss or theft of any medication brought onto school campus. Violation of this regulation may subject the student to disciplinary action.

Inhalers

Administration by school personnel:

School personnel administering inhalers will do the following:

A. Determine if symptoms indicate possible respiratory distress or emergency and determine if the use of an inhaler will properly address the respiratory distress or emergency.

B. Administer the correct dose of inhaler medication, as directed by the prescription protocol, regardless of whether the individual who is believed to be experiencing respiratory distress has a prescription for an inhaler and spacer or holding chamber or has been previously diagnosed with a condition requiring an inhaler.

C. Restrict physical activity, encourage slow breaths, and allow the individual to rest.

D. Assure that trained personnel stay with the subject who has been administered inhaler medication until it is determined whether the medication alleviates symptoms.

E. If applicable, instruct office staff to notify the school nurse if the inhaler is administered by a trained but non-licensed person.

F. Instruct school staff to notify the parent or guardian.

G. Call 911 if severe respiratory distress continues. Advise that inhaler medication was administered and stay with the person until emergency medical responders arrive.

H. If the individual shows improvement, keep the individual under supervision until breathing returns to normal, with no more chest tightness or shortness of breath, and the individual can walk and talk easily.

I. Allow a student to return to class if breathing has returned to normal and all symptoms have resolved.

J. Notify a parent or guardian once the inhaler has been administered and the student has returned to class.

K. Document the incident detailing who administered the inhaler, the approximate time of the incident, notifications made to the school administration, emergency responders, and parents/guardians.

L. Retain the incident data on file at the school pursuant to the general records retention schedule regarding health records for school districts and charter schools established by the Arizona State Library, Archives and Public Records.

M. Order replacement inhalers, spacers and holding chambers as needed.

Seizure Management Plans

The School District will verify and accept student seizure management plans as follows:

A. Before or at the beginning of the school year, at enrollment, or as soon as practicable following diagnosis of the student's seizure disorder.

B. The school will annually request up-to-date management plans from parents or guardians.

The District will not accept seizure management plans unless the plan includes the following:

A. An outline of procedures recommended by the physician or registered nurse practitioner responsible for the student's seizure treatment plan.

B. An outline of other health care services available at school that the student may receive to help manage the student's seizure disorder at school.

C. A signature by the student's parent or guardian *AND* the physician or registered nurse practitioner responsible for the student's seizure treatment.

Seizure management plans must be provided to the school health office.

Individuals that Must be Trained

The following individuals must receive statutorily required training approved by the State Board of Education and available here: <https://azsbe.az.gov/resources/seizure-training>.

Nurses, under contract or employed by the school:

If they receive a seizure management and treatment plan, they must complete an online course of instruction for school nurses regarding managing students with seizure disorders.

Nurses and at least one (1) other school employee:

Training to administer or assist with the self-administration of both 1) as seizure rescue medication or a medication prescribed to treat seizure disorder symptoms; and 2), a manual dose of prescribed electrical stimulation using a vagus nerve stimulator magnet.

Principals, guidance counselors, teachers, bus drivers or classroom aides whose duties include regular contact with students who have submitted a seizure management and treatment plan:

An online course of instruction for school personnel regarding awareness of students with seizure disorders.

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EXHIBIT

**MEDICINES / ADMINISTERING
MEDICINES TO STUDENTS
ARIZONA SEIZURE ACTION PLAN**

To view the District's Seizure Action Plan form, [click here](#).