



South Carolina
Department of Education

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Frequently Asked Questions about Students Self-Medicating and Self-Monitoring

**Based on the Requirements of Section 59-63-80
of the South Carolina Code of Laws**

**Issued by the
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Overview

Many students attending school have chronic health conditions for which special health care services are needed during the school day and at school-sponsored functions. Students with special health care needs require an individual assessment and plan of care to ensure that their unique needs are identified and addressed. Better management and control of health conditions are the keys to success for these students, both now in their school endeavors and in the future so that they can lead happier, more productive lives. As students with chronic health conditions grow and mature the responsibility for making health decisions shifts from parents and caretakers to the students themselves. Care for students with chronic health conditions should thus include teaching and encouraging the practice of self-care skills.

Many health care procedures and services can be successfully provided to students during the school day and can thus allow those students with chronic health conditions to remain at school, where they can further their education in the least restrictive environment. School nurses are often able to work with parents/guardians, health care practitioners, school administrators—and, of course, the students themselves, as appropriate—to develop individual health care plans (IHPs) for meeting special health care needs. IHPs outline specific actions that will be taken to ensure that each student's health needs are met in a consistent manner during the school day and at school-sponsored functions.

On May 26, 2005, Chapter 63 of Title 59 of the South Carolina Code of Laws was amended to include Section 59-63-80, "Development of policies governing IHPs or students with special health care needs; definitions; written statements." The following mandates were set forth:

- Each school district must adopt a policy requiring that IHPs be developed for students with special health care needs. This policy must provide for the authorization of a student to self-monitor and self-administer medications as prescribed by the student's health care practitioner unless there is sufficient evidence that unsupervised self-monitoring or self-medicating would seriously jeopardize the safety of the student or others.
- The South Carolina Department of Education (SCDE) must develop guidelines for required components of a written student IHP that must be developed with input from and with the approval of (a) the health care practitioner who prescribed the medication for the student; (b) the student's parent or legal guardian; (c) the student, if appropriate; and (d) the school nurse or other designated school staff member. If a student qualifies for a federal 504 medical accommodations plan, that process must meet the requirements for the state-required IHP. The parent/guardian and the student, if appropriate, are required to authorize the school to share the student's IHP with school staff who have a legitimate need for the information. (S.C. Code Ann. § 59-63-80(D))

- All medication authorized to be carried by the student must be maintained in a container appropriately labeled by the pharmacist who filled the prescription. (S.C. Code Ann. § 59-63-80(E))
- A student's permission to self-monitor or self-administer medication may be revoked if the student endangers him- or herself or others through the misuse of the monitoring device or medication. The permission for self-monitoring or self-administration of medication is effective for the school year in which it is granted and must be renewed each school year upon the parent's/guardian's fulfilling the requirements of the law. (S.C. Code Ann. § 59-63-80(F)–(G))
- A parent/guardian must sign a statement acknowledging that the school district and its employees and agents are not liable for an injury arising from a student's self-monitoring or self-administration of medication and that the parent/guardian will indemnify and hold harmless the district and its employees and agents against a claim arising from a student's self-monitoring or self-administration of medication. (S.C. Code Ann. § 59-63-80(H))
- The SCDE must develop a notice that school districts must send at the beginning of the school year to all parents/guardians informing them of available services and rights pursuant to Section 504 of the Rehabilitation Act of 1973, the Individuals with Disabilities Education Act, and medical homebound regulations. (S.C. Code Ann. § 59-63-90)

The intent of this document is to provide school districts with answers to some of the questions that have frequently arisen with regard to students who desire to self-medicate and/or self-monitor their health status during the school day. Information related to IHPs is provided in a separate document. If you have questions regarding the contents of this document, please contact Cathy Young-Jones at cyjones@ed.sc.gov.

Frequently Asked Questions

What do the terms "self-medicate" and "self-monitor" mean?

In the context of Section 59-63-80 of the S.C. Code of Laws, "self-monitoring" refers to a student's ability to independently screen and evaluate his or her own health status using medical devices prescribed by his or her health care practitioner for making judgments regarding treatments, procedures, or medication needed for health maintenance. "Self-medication" refers to a student's ability to make independent judgments regarding when his or her medications should be taken and the ability to administer the correct medication dose to him- or herself. The terms "self-medication" and "self-administration of medication" are used interchangeably in this document.

Does the law require that school districts allow all students to self-monitor or self-medicate?

Section 59-63-80 makes self-monitoring and/or self-medicating an option for students (a) who meet the requirements of their school district's policy and (b) whose parents/legal guardians want them to self-monitor or self-medicate. Section 59-63-80 does *not* require school districts to allow all students to self-monitor and/or self-medicate but does require school districts to allow self-monitoring and/or self-medication unless such actions would seriously jeopardize the safety of the student or others. School districts must decide what situations would pose serious jeopardy to a particular student or to others in the school setting.

The law states that each school district's policy must provide for the authorization of a student to self-medicate and/or self-monitor as prescribed by the student's health care provider unless there is sufficient evidence that unsupervised self-monitoring or self-medicating would seriously jeopardize the safety of the student or others. School districts, in their policies, should specify the process they will use to decide whether requests for self-monitoring and/or self-medicating will be granted. The SCDE recommends that school districts make decisions regarding self-monitoring and self-medicating on an individual basis through a team process similar to what is used in determining Section 504 accommodations.

In making decisions regarding self-monitoring and self-medicating, the school team should consider the recommendation of the student's health care practitioner, the student's maturity level, the competency of the student for self-monitoring and/or self-medicating, the outcome for the student if self-monitoring and/or self-medicating is not allowed, the school environment, and the type of medication or equipment involved (e.g., risk of addiction/overdose/abuse, effects of the medication if taken by another student, type of packaging, storage requirements, disposal procedures for biohazardous waste).

What criteria does the law require in order for students to self-monitor or self-medicate?

According to Section 59-63-80, the following must be met in order for a student to be permitted to self-monitor and/or self-medicate:

- (a) determination by the school that the student's self-monitoring and/or self-medicating will not seriously jeopardize the safety of the student or others;
- (b) a written statement from the student's health care practitioner who prescribed the medication or monitoring device verifying that the student has a medical condition and that the student has been instructed and demonstrates competency in self-monitoring and/or self-administration of his/her medication;
- (c) written authorization from the student's parent/legal guardian;
- (d) a written IHP developed with input from and the approval of the student's health care practitioner who prescribed the medication, the parent/legal guardian, the student (if appropriate), and the school nurse or other designated school staff member;
- (e) authorization from the parent for the school to share the student's IHP with school staff who have a legitimate need for knowledge of the information;
- (f) maintenance of the medication in a container appropriately labeled by the pharmacist who filled the prescription; and
- (g) a signed statement from the parent/legal guardian acknowledging that the school district and its employees and agents are not liable for an injury arising from a student's self-monitoring or self-administering medications and that the parent or guardian shall indemnify and hold harmless the district and its employees and agents against a claim arising from a student's self-monitoring or self-administration of medications.

Sample authorization forms and a student agreement form are available online at <http://www.ed.sc.gov/agency/Innovation-and-Support/Health-and-Nutrition/Healthy-Schools/MeetingSpecialHealth.html>.

What knowledge and skills should a student exhibit to indicate readiness for self-medicating?

As a part of the school district's determination that the student's self-monitoring and/or self-medicating will not seriously jeopardize the safety of the student or that of others, the district should assess the student's knowledge of his or her medication as well as his or her competency for self-monitoring. The student's knowledge of the school district's policy should also be assessed. An article in the October 2005 issue the *Journal of School Nursing*, "Assessing the Capability of School-Age Children with Asthma to Safely Self-Carry an Inhaler," stresses that the particular student must have the developmental maturity, cognitive abilities, and problem-solving skills needed to handle the responsibility of self-medicating.

Specifically, the student should know what the name of the medication is, what condition/problem it is used for (i.e., its "indication"), what amount of it he or she should be taking/using, how often it should be taken during the school day, what its side effects are, and what he or she should do if the medication is not effective after a certain period of time. In addition, the child must be disciplined enough to remember to bring the medication to school every day, keep the medication with him or her at all times, and not share the medication with others. And, of course, the child must be able to tell time and must possess the dexterity necessary for him or her to self-administer the medication.

Should students be allowed to self-medicate with a medication that is a controlled substance?

Section 59-63-80 does not specify which medications may or may not be self-administered by students. Controlled substances include medications that have the potential for abuse and are dispensed by pharmacists under the guidelines of the 1970 Comprehensive Drug Abuse Prevention and Control Act. The Act is designed to control the distribution and use of all depressant and stimulant drugs and other drugs of abuse or potential abuse as may be designated by the Drug Enforcement Administration of the Department of Justice. Controlled substances in the school setting are traditionally kept in locked cabinets with limited access, and all controlled substances (e.g., pills, suppositories, syrups) should be accounted for at least weekly to ensure that nothing is missing.

Of those students who responded to the 2007 South Carolina Youth Risk Behavior Survey, 17.8 percent indicated that they have used medications such as Ritalin, Adderall, or Xanax without a doctor's prescription. Given the potential for addiction and abuse and the data suggesting significant misuse of controlled substances among students, the SCDE feels that self-medication of controlled substances could seriously jeopardize the safety of the student and others. The SCDE therefore recommends that schools continue to maintain and administer controlled substances under the supervision of a licensed school nurse.

Should students be allowed to self-medicate with medications that have not been prescribed for the student by a health care practitioner?

Section 59-63-80(B)(1)(b) requires that students who are permitted to self-medicate have on file in the office of the school nurse or school administrator a written statement from the student's health care practitioner who prescribed the medication verifying that the student has a medical condition and has been instructed and demonstrates competency in the self-administration of his or her medications. Section 59-63-80(E) requires that all medication authorized for self-administration be maintained by the student in a container appropriately labeled by the pharmacist who filled the prescription. Medications that have not been prescribed by a student's health care practitioner do not meet the requirements outlined in Section 59-63-80 for self-medication.

How often must a student's permission to self-monitor and/or self-medicate be updated?

The permission for self-monitoring or self-medicating is effective for the school year in which it is granted and must be renewed each school year thereafter, upon the fulfillment of all requirements (S.C. Code Ann. § 59-63-80(G)). The parent authorization and the statement from the student's health care practitioner must also be updated and resubmitted each school year.

Can a student's permission to self-monitor or self-medicate be revoked?

A student's permission to self-monitor or self-medicate may be revoked if the student endangers him- or herself or others through misuse of the monitoring device or the medication (S.C. Code Ann. § 59-63-80(F)). The school district may want to consider having the student and the student's parent/legal guardian sign a copy of the school district's rules related to self-monitoring and/or self-medicating.

Does the law specify requirements that must be included in the school district's policy?

Section 59-63-80(B) provides direction for specific information that must be included in school districts' policies but does not prohibit school districts from adding further requirements. The following items related to self-monitoring and/or self-medicating are required by South Carolina law:

- The eligible student's parent/legal guardian must provide the school with
 - (a) written authorization for the student to self-monitor and/or self-administer medication and
 - (b) a written statement from the student's health care practitioner who prescribed the medication verifying that the student has a medical condition and has been instructed and demonstrated competency in self-monitoring or self-administration of medications, or both.
- The school district must authorize the eligible student to possess medication on his or her person and to administer the medication
 - (a) in the classroom and in any area of the school or school grounds,
 - (b) at a school-sponsored activity,
 - (c) in transit to or from school and school-sponsored activities, and
 - (d) during before-school or after-school activities on school-operated property.

Where must the authorization forms and statements be stored?

Section 59-63-80 also requires that authorizations from the parent/legal guardian and health care practitioner be kept on file in the office of the school nurse or school administrator (S.C. Code Ann. § 59-63-80(C)). The SCDE recommends that forms and statements related to self-medication and self-monitoring be maintained in the student's individual health record.

What process should be followed if the school and the parents/legal guardians disagree on whether a student can self-monitor or self-medicate during the school day or at school-sponsored functions?

Sections 59-63-80 and 59-63-90 do not address a mediation process. School districts should utilize existing district procedures to address differences of opinion.