

## CLARK COUNTY SCHOOL DISTRICT REGULATION 5150

### HEALTH AND WELFARE: STUDENTS

R-5150

This regulation provides guidance in the management and administration of health services in the Clark County School District (District). It is in compliance with the uniform guidelines set forth in the District's policies and procedures for managing student health and safety. These policies and procedures are in accordance with the requirements of the Nevada Administrative Code (NAC), Nevada Revised Statutes (NRS), and the Nevada State Board of Nursing (NSBN).

#### I. Non-Serious Accidents and Illnesses

The school is responsible for the day-to-day management of student injuries and illnesses. Well-stocked, first aid emergency response kits must be readily available to all staff. Universal precautions are to be followed when handling blood and body fluids.

- A. The school must follow the First Aid/Emergency Guidelines for School Personnel (PUB-648) if a student is not seriously ill or injured.
- B. The school must keep records regarding student health status and emergency phone numbers current at all times.
- C. The school is not to send a student home without school personnel first establishing the availability of adequate supervision in the home to maintain student safety.
- D. School personnel should not transport sick or injured students.  
Parents/Guardians are responsible for the transport and welfare of their students.
- E. The school nurse will provide continuing supervision and instruction to designated school personnel regarding first aid and emergency care.
- F. The school must contact the school nurse and/or the Health Services Department in accordance with PUB-648 guidelines.
- G. Designated, trained school health personnel must document all health office events in the student's electronic medical record (EMR). If the student's EMR is not available, downtime paper forms are to be utilized until the student's EMR is available. Information from downtime forms must be entered into the student's EMR as soon as possible.

#### II. Serious Accidents and Illnesses

- A. In the event of a serious accident or illness requiring immediate medical care, the school must contact Emergency Medical Services (EMS). The school must follow PUB-648. The site administrator must be notified that EMS has been called. Administrative permission to call EMS is not required.
- B. School personnel must call the school nurse and/or the Health Services Department after contacting EMS.
- C. School personnel must notify the parent/guardian that EMS has been contacted.
- D. School personnel must make all efforts to locate and notify the parent/guardian. Efforts must continue until the parent/guardian has been reached.
- E. School personnel must provide printed copies of demographic data and health information to EMS personnel. School personnel should check the student for a medical alert identification tag prior to EMS arrival.
- F. In the event that EMS transports the student, and in the absence of a parent/guardian, a responsible school employee must accompany the student to the hospital (either by following in separate vehicle or by riding in the EMS vehicle) and remain with the student until the parent/guardian or delegate arrives or until responsibility for student welfare has been assumed by an agency, such as a hospital or protective service.
- G. School personnel are not permitted to sign the EMS Release of Medical Assistance form. School personnel must inform the parent/guardian that a refusal and/or transfer of care may only be signed by the parent/guardian in person at the District site.
- H. Serious student injuries or accidents are to be reported to the Risk Management Department and fully documented in the student's EMR.
- I. Emergency telephone numbers for commonly called departments/agencies are to be posted near each health office telephone.
- J. In an emergency, the procedures in this section must be followed, including situations involving students whose parents/guardians object to medical care. This may include religious objection and do not resuscitate (DNR) requests.

### III. Medication During School Hours

The following provisions apply to both prescription and non-prescription medication.

- A. If appropriate, parents/guardians should make every effort to provide medications at home to avoid the necessity of medicating students during school hours.

- B. With the permission of a parent/guardian, students in Grades 6 through 12 may self-medicate except for controlled substances. The list of controlled substances will be consistent with the current listing provided by the Nevada State Board of Pharmacy. All controlled substances must be kept in a secured, locked location at all times. The controlled substance list shall be maintained in the health office. Students in Grades 6 through 12 may possess medication on District property. Medication must be properly labeled at all times. Students must be able to provide, upon request, written evidence that their parents/guardians have authorized self-medication. If the medication requires a prescription, students must also provide the appropriate medical documentation authorizing their use of prescription medication.
1. The student's medication must be kept in the labeled container, which includes the first and last name (name) of the student to take the medication; the name, dosage, route, and time or frequency of the medication; the name of the licensed prescribing practitioner; and the instructions for administration. Under no circumstances may a student provide medication to any other student.
  2. All students who do not have written parent/guardian permission to self-medicate or who are taking controlled substances must follow the requirements listed below.
  3. Students in Pre-Kindergarten through Grade 5 may not self-administer medication with the exception of emergency medication outlined in Section IV.
- C. When medication is required to be administered during the school day, trained District personnel will assist students to take their medication.
1. No District employee may assist students to take medication that has not been prescribed or ordered by a licensed prescribing practitioner. This prohibition applies to prescription and over-the-counter medications.
  2. Any parent/guardian requesting that District personnel assist their student with medication must provide to the school health office a signed Parent/Guardian Request for Medication Assistance form (CCF-643). For prescription medications, the pharmacy label represents the licensed prescribing practitioner's order. For over-the-counter medication, a copy of the prescription or order from a licensed prescribing practitioner is required. This must include the first and last name (name) of the student to take the medication; the name, dosage, route, and time or frequency of the medication; the name of licensed prescribing practitioner; and the instructions for administration.

- D. The site administrator must designate at least two District personnel to assist as health office backups in the absence of the school health assistant who will provide care, including assisting students to take their medication. All District personnel designated to assist students with health care needs and/or medication must be trained yearly by the school nurse to perform this activity in a safe and effective manner consistent with NSBN regulations.
- E. Medications must be stored in a locked location. Exception: A student's prescribed epinephrine shall be stored in the health office in a secure location which will remain unlocked during the regular school day. The medication shall be kept at all times in a labeled container, which includes the name of the student to take the medication; the name, dosage, route, and time or frequency of the medication; the name of the licensed prescribing practitioner; and the instructions for administration.
- F. Students requiring care for diabetes and/or insulin administration must have a current signed order/treatment plan by a licensed prescribing practitioner, parent/guardian written permission with acceptance of the licensed prescribing practitioner order, and an emergency protocol during the school day. The parent/guardian is required to provide medication, supplies, and equipment necessary for the student's care.
- G. If the student's condition requires that medication be immediately available at all times, the student may personally maintain possession of the medication. The student's health record must contain a signed, licensed prescribing practitioner's statement reflecting this need and that the student is capable of self-administration of the medication while at school. The medication will be kept at all times in a labeled container, which includes the name of the student to receive the medication; the name, dosage, route, and time or frequency of the medication; the name of the licensed prescribing practitioner; and the instructions for administration. The school is not liable for the loss or misuse of such medication. Under no circumstances may a student provide medication to any other student.
- H. In the event the parent/guardian has not completed the CCF-643 form, and if the parent/guardian determines that it is imperative that their student receive prescribed medication, trained District personnel will assist the student with the medication upon written or verbal request of the parent/guardian for a period not to exceed two days. Exception: Over-the-counter medications will not be given without a prescription or order from a licensed prescribing practitioner.
- I. A separate CCF-643 form is required for each medication.
- J. Any change from the current medication requires a new CCF-643 form signed by the parent/guardian and a new prescription or order from the licensed prescribing practitioner.

#### IV. Emergency Medication

- A. Self-Administered emergency medications for asthma, anaphylaxis, or diabetes is permissible under the following guidelines as stated in NRS 392.425.
1. The parent/guardian must submit a written request that the student is permitted to carry and self-administer their medication.
  2. The licensed prescribing practitioner must provide a signed, written statement/order/treatment plan pursuant to which the student will manage their asthma, anaphylaxis, or diabetes if the student experiences an asthmatic attack, anaphylactic shock, or diabetic episode while at school. The licensed practitioner order or pharmacy label on the medication bottle is required to include the licensed prescribing practitioner name; name of the student to receive the medication; name of the medication; and the dosage, route, and time or frequency of the medication.
  3. A signed statement from the parent/guardian indicating that the parent/guardian:
    - a. Grants permission for the student to self-administer medication while the student is on the grounds of a public school.
    - b. Acknowledges receipt of, and agrees to, District protocols.
    - c. Affirms the protocols have been explained to the student who will self-administer the medication and the student has agreed to comply with the protocols.
    - d. Acknowledges having explained to the student who will self-administer the medication the proper procedures for the handling and disposal of needles, medical devices, and other medical waste.
  4. The parent/guardian acknowledges in writing that under Nevada law no additional District duties are created and that the District, its agents, schools, and employees are immune from liability for injury to the student as a result of any self-administration of the medication or failure of the student to self-administer the medication.
  5. The procedures for self-administration of medication may be revoked by the District if the student fails to comply with health and safety protocols.
- B. Pursuant to Section IV (A) of District Regulation 5150, administration of emergency medication by a trained school staff member is authorized if the student exhibits signs/symptoms of anaphylaxis and is unable to self-administer

the medication. The District assumes no liability for any failure to properly recognize the signs/symptoms or any decision not to administer the medication.

- C. Stock epinephrine and naloxone are available at all school sites in accordance with NRS 386.870 and NRS 453C.040.
1. In addition to epinephrine prescribed for a specific student, each school must maintain at least two doses of auto-injectable epinephrine at the school for use with regard to any student who the school nurse or trained school health personnel reasonably believes is experiencing anaphylaxis on school premises. Each school must maintain doses of naloxone to use with regard to any person in which a trained school personnel reasonably believes is experiencing possible overdose to opioids during the school day. If a dose is used or expires, additional doses shall be obtained from the Health Services Department.
  2. Epinephrine and naloxone, not specific to any particular student and/or adult, shall be stored in a designated, secure, unlocked location, clearly marked for easy access by the school nurse or trained school health personnel during regular school hours.
  3. Only the school nurse or trained school health personnel may administer epinephrine and naloxone.
  4. A public school, school district, or employee of a school district is not liable for any error or omission concerning the acquisition, possession, provision, or administration of auto-injectable epinephrine or an opioid antagonist maintained at a public school pursuant to this section not resulting from gross negligence or reckless, willful, or wanton conduct of the school, school district, member, or employee as applicable, if auto-injectable epinephrine or an opioid antagonist is provided or administered during the rendering of emergency care or assistance during an emergency.
- D. Proper disposal of medications, sharp items, inhaler canisters, cartridges, and liquids must be followed.
1. All school health offices must have a sharps container, which is accessible for student use. When not in use, the sharps container must be stored in a secured or locked location.
  2. Disposal of sharp items and medications must be performed in accordance with procedures developed by the Health Services Department, manufacturer's recommendations, the Food and Drug Administration (FDA), the Occupational Safety and Health Administration (OSHA), the Nevada State Board of Health, and the Nevada State Board of Pharmacy.

A. Health and safety accommodations may be needed for student attendance.

1. Any request for an accommodation that the school nurse or District health administrator suspects may compromise the student's health or safety should be discussed with a licensed health care provider and clarified to determine safe attendance at school. An authorization for release of confidential information must be completed.
2. In order to assist students who need health and safety accommodations in the school setting, the following may be required:
  - a. Site administrator to consult with school nurse regarding issues of health and safety concerns and student attendance including, but not limited to, mobility and access needs.
  - b. School nurse assessment and facilitation.
  - c. Applicable relevant school staff, parent/guardian, and school nurse collaboration regarding the need for health/safety accommodations and/or additional information for safe attendance.
  - d. Licensed health care provider statement of health/safety accommodations, as needed.

B. Safeguards for Students Requiring a Health Procedure at School

Any qualified, trained District employee is authorized to assist students with special health care needs or perform specific health procedures to enable students to attend school. Health procedures may include, but are not limited to, tracheostomy management, gastrostomy feedings, nebulizer treatments, blood glucose monitoring, diabetes care, urinary catheterization, seizure management, and epinephrine administration.

1. Parents/Guardians should make every effort to perform health care procedures outside of school hours to minimize loss of instructional time.
2. In order to maintain the safety of a student whose medical condition requires District personnel to perform or assist with a health procedure during school hours, the following are required:
  - a. A signed medical order/written treatment plan, updated annually, provided by a licensed health care provider responsible for current medical management of the student, including the licensed prescribing practitioner's name and signature; name of the student; procedure;

medication/dosage, if needed; route; and time or frequency of procedure must be provided by the parent/guardian for the student.

- b. A signed statement from the parent/guardian indicating that the parent/guardian grants permission and accepts District protocol prior to procedure administration. The parent/guardian must sign a new form for any change to a licensed practitioner's order for a medical procedure performed at school.
  - c. Related equipment and supplies needed to perform the health procedure are to be provided by the parent/guardian. The District is not responsible for routine cleaning, maintenance, or repair of equipment. The District is not required to purchase medical equipment for an individual student.
  - d. School nurse facilitation and coordination of health procedures, including training and supervision of personnel, must be in compliance with NSBN regulations and advisory opinion and Health Services Department procedures.
3. In order to maintain the safety of a student with a medical condition who independently performs a health procedure during school hours, the following may be required:
- a. Parent/Guardian/Student request for independent procedure.
  - b. School nurse will conduct an assessment of the student's ability to be independent.
  - c. Licensed health care provider statement of independence, as deemed appropriate by school nurse, based on Health Services Department procedures.
4. All supplies and equipment needed for health procedures must be stored in a locked location. This includes supplies and equipment that pose a potential exposure risk, such as needles, lancets, or other sharp items.

#### VI. Contagious or Infectious Disease

- A. In accordance with NRS 441A.190, through the chief nurse, the District will communicate and collaborate with the Southern Nevada Health District in order to obtain guidance regarding the control of communicable and infectious diseases within schools including, but not limited to, reportable diseases, contact tracing, epidemic and/or pandemic issues, and bloodborne pathogens.
- B. The principal, director, site administrator, or other person in charge of a school who knows of or suspects the presence of a communicable and/or infectious



disease within the school must notify designated District administrators in accordance with the District Communicable Disease Communication and Disinfection Protocol.

- C. To prevent the spread of communicable and infectious diseases, a parent/guardian or person having custody of a student who has a communicable or infectious disease shall not knowingly permit the student to attend school if the Board of School Trustees by regulation or procedure has determined that the communicable or infectious disease requires exclusion from school.

## VII. Injuries to the Head/Concussion Protocols

- A. NRS 392.452 requires the District to adopt a policy concerning the prevention and treatment of injuries to the head of a student, including concussions.
- B. Parents/Guardians of students engaging in competitive sports will be given the policy and the parent/guardian and student are to sign a form acknowledging the risks of head injury prior to participating.
- C. In accordance with NRS 392.452, the District shall provide the parent/guardian of a student who has sustained or is suspected of having sustained an injury to the head with notice and a written or electronic copy of the policy regarding injuries to the head. This policy can be found on the District's website.
- D. Students who have sustained or are suspected of sustaining an injury to the head (e.g., a bump, blow, or jolt to the head or hit to the body that causes the head and brain to move rapidly back and forth) during the instructional day (on campus), during athletic activities, or in any event outside of the school setting that is communicated to the health office, will be monitored for signs/symptoms of a concussion. Return to Learn (also referred to as returning to course work) assessment will be followed in collaboration with the concussion management team.
- E. The concussion management team coordinates the student's concussion management plan to help the student Return to Learn. This team will collaborate to create a concussion management plan.
- F. Return to Play (Nevada Interscholastic Activities Association-sanctioned sports only) will occur when the student no longer exhibits any signs/symptoms of the injury to the head, no longer requires accommodations at school, and is ready to return to physical or athletic activities under the direction of the athletic trainer.
- G. The District will comply with the training requirements set forth in NRS 392.452 regarding injuries to the head.

Legal Reference:	AGO No. 270
NRS Chapter:	441A. Communicable Diseases and 392.452
Cross Reference:	Regulation 5114, Student Dismissal (Voluntary and Involuntary)
Review Responsibility:	Student Services Division
Adopted:	[5140: 7/12/62]
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