



WEST VIRGINIA SECRETARY OF STATE

MAC WARNER

ADMINISTRATIVE LAW DIVISION

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Office of West Virginia
Secretary Of State

NOTICE OF PUBLIC COMMENT PERIOD

AGENCY: Education TITLE-SERIES: 126-025A

RULE TYPE: Legislative Exempt Amendment to Existing Rule: Yes Repeal of existing rule: No

RULE NAME: Standards for Basic and Specialized Health Care Procedures (2422.7)

CITE STATUTORY AUTHORITY: W. Va. Code §§29A-3B-1, et seq.; W. Va. Board of Education v. Hechler, 180 W. Va. 451, 376 S.E.2d 839 (1988); and, W. Va. Bd. of Educ. V. Bd. of Educ., 239 W. Va. 705, 806 S.E. 2d 136 (2017)

COMMENTS LIMITED TO:

Written

DATE OF PUBLIC HEARING:

LOCATION OF PUBLIC HEARING:

DATE WRITTEN COMMENT PERIOD ENDS: 04/12/2021 4:00 PM

COMMENTS MAY BE MAILED OR EMAILED TO:

NAME: Carol Ward, Coordinator

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1900 Kanawha Blvd., E, Charleston, WV 25305

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PLEASE INDICATE IF THIS FILING INCLUDES:

RELEVANT FEDERAL STATUTES OR REGULATIONS: No

(IF YES, PLEASE UPLOAD IN THE SUPPORTING DOCUMENTS FIELD)

INCORPORATED BY REFERENCE: No

(IF YES, PLEASE UPLOAD IN THE SUPPORTING DOCUMENTS FIELD)

PROVIDE A BRIEF SUMMARY OF THE CONTENT OF THE RULE:

Policy 2422.7 sets forth the standards for the West Virginia certified school nurse to assess student health needs and decide who is best skilled to respond to them.

SUMMARIZE IN A CLEAR AND CONCISE MANNER CONTENTS OF CHANGES IN THE RULE AND A STATEMENT OF CIRCUMSTANCES REQUIRING THE RULE:

The proposed revisions to Policy 2422.7 provide clarification and guidance to West Virginia certified school nurses who provide the care and/or delegate school-aged students care.

SUMMARIZE IN A CLEAR AND CONCISE MANNER THE OVERALL ECONOMIC IMPACT OF THE PROPOSED RULE:

A. ECONOMIC IMPACT ON REVENUES OF STATE GOVERNMENT:

No costs or revenue will be impacted by the proposed amendment of W. Va. 126CSR25A, Policy 2422.7.

B. ECONOMIC IMPACT ON SPECIAL REVENUE ACCOUNTS:

There will be no economic impact on special revenue accounts as a result of the proposed amendment of W. Va. 126CSR25A, Policy 2422.7.

C. ECONOMIC IMPACT OF THE RULE ON THE STATE OR ITS RESIDENTS:

There will be no economic impact to the state or its residents as a result of the proposed amendment of W. Va. 126CSR25A, Policy 2422.7

D. FISCAL NOTE DETAIL:

Effect of Proposal	Fiscal Year		
	2021 Increase/Decrease (use "-")	2022 Increase/Decrease (use "-")	Fiscal Year (Upon Full Implementation)
1. Estimated Total Cost	0	0	0
Personal Services	0	0	0
Current Expenses	0	0	0
Repairs and Alterations	0	0	0
Assets	0	0	0
Other	0	0	0
2. Estimated Total Revenues	0	0	0

E. EXPLANATION OF ABOVE ESTIMATES (INCLUDING LONG-RANGE EFFECT):

No costs, revenue, or economic impact to the state or its residents will result from the proposed amendment of W. Va. 126CSR25A, Policy 2422.7.

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENT IS TRUE AND CORRECT.

Yes

Michele L Blatt -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.

Policy 2422.7, Standards for Basic and Specialized Health Care Procedures
Executive Summary

West Virginia Department of Education
Office of Federal Programs and Support/Student Support and Well-being

Policy Cycle: 30 day Comment Period Adoption of Policy

Policy Process: Revision Repeal and Replace New

Introduction: Proposed revisions to Policy 2422.7, Standards for Basic and Specialized Health Care Procedures, clarify school nursing language and refine justifications.

Background: Policy 2422.7 sets forth the standards to follow for students with health care needs. The WVDE has worked with a geographically diverse group of stakeholders to revise this policy.

Proposed Changes

The stakeholder group made changes to the policy to include clarifications, formatting, and grammar/punctuation consistency.

- **126-25A-3.3. Definitions: Cardiopulmonary Resuscitation (CPR)** – Clarified a requirement for a valid CPR card.
- **126-25A-3.8. Definitions: Intervention Guide** – Changed Intervention Guide to Emergency Action Plan to align with new school nursing language.
- **126-25A- 4.1.a.4.A. Training and Certification for Designated School Personnel** – Clarified for the certified school nurse when training and CPR for school personnel may be unnecessary.
- **126-25A-6. Health Care Plan and Intervention Guide** – Changed Intervention Guide to Emergency Action Plan to align with new school nursing language.
- **126-25A-6.5 Intervention Guide** – Changed Intervention Guide to Emergency Action Plan to align with new school nursing language.
- **126-25A-12.1.c Emergency Medication** – Clarified new emergency seizure medication.

Impact: The proposed revisions to Policy 2422.7 provide clarification and guidance to West Virginia certified school nurses who provide the care and/or delegate school-aged students' care.

Action: WVDE recommends Policy 2422.7 be placed on public comment.

- Release for 30-day public comment
 Approve by WVBE with effective date of ___/___/20__.

**Policy 2422.7, Standards for Basic and Specialized Health Care Procedures
List of Stakeholders**

West Virginia Department of Education

External Stakeholders

- Wendy Barker, Certified School Nurse, Cabell County
- Jenny Friel, Certified School Nurse, Pocahontas County
- Angie Foster, Certified School Nurse, Raleigh County
- Linda Parsons, Certified School Nurse, Kanawha County
- Tiffany Heinzman, Certified School Nurse, Wetzel County
- Jan Smitley, Certified School Nurse, Pleasants County
- Diana Simmons, Certified School Nurse, Taylor County
- Cheryl Tillman, Certified School Nurse, Mineral County

Internal Stakeholders

- David Lee, Director, Student Support and Well-being Services
- Susan Beck, Director, Special Education Services
- Kelley Johnson, Coordinator, Student Support and Well-being Services
- Ashley Torres, Coordinator, Career Technical Education Services

126CSR25A

TITLE 126
LEGISLATIVE RULE
BOARD OF EDUCATION

SERIES 25A
STANDARDS FOR BASIC AND SPECIALIZED HEALTH CARE PROCEDURES (2422.7)

§126-25A-1. General.

1.1. Scope. -- This legislative rule establishes standards for certified school registered nurse (RN) to assess student health needs and ~~to~~ decide who is best skilled to respond to them.

1.2. Authority. -- W. Va. Constitution, Article XII, §2, W. Va. Code §§18-2-5, 18-5-22, ~~18-2K-1, 18-5-22a, 18-5-22b, 18-5-22c(a)-(j), 18-5-22d, 18-2K-1, 30-7-1, et seq. and 30-7A-1, et seq.~~

1.3. Filing Date. -- ~~October 12, 2017.~~

1.4. Effective Date. -- ~~November 13, 2017.~~ July 1, 2021.

1.5. Repeal of Former Rule. -- This rule ~~repeals and replaces~~ amends W. Va. 126CSR25A, ~~West Virginia Board of Education (WVBE) Policy 2422.7, Standards for Basic and Specialized Health Care Procedures, (Policy 2422.7) filed August 14, 2015~~ October 12, 2017, and effective ~~September 14, 2015~~ November 13, 2017, and ~~repeals W. Va. 126CSR27, WVBE Policy 2422.8, Medication Administration (Policy 2422.8), filed September 8, 2016, and effective October 11, 2016.~~

§126-25A-2. Purpose.

2.1. Good health is essential to student learning. This policy establishes the standards that ~~must be followed in providing for~~ follow students with health care needs, including medication administration for students in the West Virginia public education system. In addition to the standards ~~set forth~~ outlined in this policy, county boards of education (county board) must comply with the Basic and Specialized Health Care Procedure Manual for West Virginia Public Schools ~~which is~~ designed for use by certified school RNs in West Virginia to assure the safe, consistent provision of health care guided by the laws and practice standards for West Virginia nurses as referenced in W. Va. Code §30-7-1, et seq. and §30-7A-1, et seq. and by the West Virginia Board of Examiners for Registered Professional Nurses and the West Virginia State Board of Examiners for Licensed Practical Nurses. This policy shall not impact the operating procedures of School-Based Health Centers. It is not the intent of this policy to interfere with existing policies and procedures of health care providers managing School-Based Health Centers. County boards of education shall develop or amend policies to meet or exceed the standards ~~set forth~~ outlined in W. Va. Code and this policy.

§126-25A-3. Definitions.

3.1. Administrator's' designees, ~~are~~ School personnel as defined in W. Va. Code §18-5-22 ~~and this policy (excluding the certified school registered nurse (RN) or contracted provider of nursing services) who is~~ are designated by the building administrators, ~~is~~ are trained to administer non-prescribed over-the-counter (OTC) medication, and agrees to administer non-prescribed OTC medications when county policy allows such practice.

3.2. Basic Health Care Procedures, ~~are p~~rocedures performed by school personnel to ensure ~~that health and safety needs of students are met.~~ and meet students' health and safety needs.

3.3. Cardiopulmonary Resuscitation (CPR), ~~certification is possession of aA current~~ valid certificate from an approved training program requiring a return demonstration to an instructor for adult, child, and/or infant CPR, e.g., American Heart Association/American Red Cross.

3.4. Certified School Registered Nurse (RN), ~~is a registered professional nurse, who is l~~icensed by the West Virginia Board of Examiners for Registered Professional Nurses (W. Va. Code §30-7-1, et seq.), who has completed a West Virginia Department of Education (WVDE) approved program as defined in the W. Va. 126CSR114, ~~WVBE~~ Policy 5100, Approval of Educator Preparation Programs, and meets the requirements for certification contained in W. Va. 126CSR136, ~~WVBE~~ Policy 5202, Minimum Requirements for the Licensure of Professional/Paraprofessional Personnel and Advanced Salary Classifications (Policy 5202). ~~The certified school nurse RN must be employed by~~ The county board of education or the county health department must employ the certified school registered nurse RN as specified in W. Va. Code §18-5-22.

3.5 Contracted ~~Licensed~~ Health Care Provider, ~~is defined as a l~~icensed health care provider who ~~is providing~~ provides health care services under contract with county boards of education. Health care services may be contracted after the ratio of one nurse for every 1,500 students, kindergarten through seventh grade, is provided to county schools.

3.6. Contracted School Registered Nurse (RN), ~~is an e~~mployee of a public health department providing services under a contract with a county board of education to provide services considered equivalent to those required in W. Va. Code §18-5-22.

3.7. Designated ~~q~~Qualified ~~p~~ersonnel, ~~is an e~~mployee or contracted provider who agrees to administer prescribed medications, ~~is~~ authorized by the administrator/principal, ~~successfully~~ completes training by the certified school nurse RN, ~~as defined in Policy 2422.7~~ and is qualified for the delegation of the administration of prescribed medications by the certified school nurse RN. Designated qualified personnel must also meet the specifications in W. Va. Code §18-5-22(d), and (e), which includes delegation of specialized health care procedures and medications to ~~teachers, aides, and medication~~ only to teachers and secretaries (medication only).

3.8. Emergency Action Plan. Written plan of action for health care interventions based on the assessment of the certified school RN and/or health care provider intended to be implemented by school personnel to ensure the safety and welfare of students requiring health care in the school setting.

3.9. First Aid, ~~is a t~~training course in the emergency treatment ~~that is~~ administered to an injured or sick person before professional medical care is available. ~~This training will be coordinated by the~~ The certified school RN will coordinate this training.

3.10. Health Assessment, ~~is the p~~rocess by which the certified school RN obtains student health data. This assessment is comprehensive, systematic, and continuous to allow the certified school ~~nurse~~ RN to make a nursing diagnosis and plan for interventions with the student, family, school staff, and licensed prescriber when necessary.

~~3.10~~ 3.11. Health Care Plan. ~~is the w~~Written document developed by the certified school RN, which includes a nursing diagnosis, is individualized to the student's health needs, and consists of specific goals and interventions delineating the school nursing actions, delegated procedures, and student's role in self-care.

~~3.11. Intervention Guide is a written plan of action for health care interventions based on the assessment of the certified school nurse RN and/or health care provider intended to be implemented by school personnel to ensure the safety and welfare of students requiring health care in the school setting.~~

3.12. Licensed Health Care Provider. ~~is a m~~Medical doctor or doctor of osteopathy, podiatrist, registered nurse, practical nurse, registered nurse practitioner, physician assistant, dentist, optometrist, pharmacist, or respiratory care professional licensed under W. Va. Code §30~~Chapter 30 of the Code of West Virginia.~~

3.13. Licensed Practical Nurse (LPN). ~~is a p~~Person who has met all the requirements for licensure as a practical nurse and who engages in practical nursing under the direction of a Registered Professional Nurse as defined in W. Va. Code §30-7A-1, et seq. The LPN ~~who is~~ employed in a public school shall function under the supervision, assignment, and/or delegation of the certified school ~~nurse RN~~ to perform nursing services (W. Va. Code §18A-4-8).

3.14. Licensed Prescriber. ~~is a l~~Licensed health care provider with ~~the~~ authority to prescribe medication and health care procedures.

3.15. Medication Authorization Form. ~~is a f~~Form, inclusive of an order for prescribed medication, completed and signed by a licensed prescriber with a parent/guardian signature of permission ~~in order~~ to authorize medication administration to said parent's/guardian's child. The form must include the following: student name; date; allergies; medication name, dosage, time, and route; intended effect of medication; other medication(s) taken by the student; licensed prescriber and parent/guardian signature.

3.16. Non-prescribed Medication. ~~is m~~Medication and food supplements ~~that have been~~ approved by the Food and Drug Administration and may be ~~obtained~~ obtained OTC without a prescription from a licensed prescriber.

3.17. Prescribed Medication. ~~is m~~Medication with a written order signed by a licensed prescriber.

3.18. Performance Check~~l~~ist. ~~is a t~~Tool used by the certified school RN ~~in determining~~ to safely determine that designated school personnel meets ~~the~~ minimum standards required to ~~safely~~ perform necessary basic and/or specialized health care procedures.

3.19. Qualified. ~~is the a~~Ability to demonstrate competence and skills in the use of equipment and performance of techniques and procedures necessary to provide basic and/or specialized health care services for individuals with health needs and to demonstrate current knowledge of community emergency medical resources.

3.20. Related Services. ~~are t~~Transportation and such developmental, corrective, and other

supportive services as are required to assist an eligible exceptional student to benefit from education as defined in W. Va. 126CSR16, ~~WVBE Policy 2419~~, Regulations for the Education of Students with Exceptionalities, ~~(Policy 2419)~~. The term includes, but is not limited to, audiology, speech and language pathology, psychological services, physical and/or occupational therapy, counseling/social services, school health services, early identification and assessment, medical services for diagnostic or evaluation purposes, and parent training.

3.21. Retained. ~~is a p~~Proper demonstration and/or instruction, as deemed necessary by the certified school RN.

3.22. School-Based Health Centers. ~~are c~~Clinics located in schools that: 1) are sponsored and operated by community-based health care organizations; 2) provide primary health care services (including but not limited to diagnosis and treatment of acute illness, management of chronic illness, physical exams, immunizations, and other preventive services) to students ~~who are~~ enrolled in the health center; and 3) follow state and federal laws, policies, procedures, and professional standards for the provision of medical care.

3.23. School Health Manager. ~~is a c~~Certified school RN who reviews and interprets medical data related to student health problems and coordinates all school health services.

3.24. School Personnel. ~~as referred to in this policy and the Basic and Specialized Health Care Procedure Manual, includes a~~Any school employee, as defined in W. Va. Code §18-5-22, ~~that who~~ is not a licensed health care provider but has been designated, trained, and deemed competent by a certified school RN and approved by a school administrator to provide basic and/or specialized health care procedure(s) ~~to students in for~~ West Virginia public schools. students. School personnel includes administrators, teachers, aides, and secretaries as defined in W. Va. Code §§18-1-1, 18A-4-8, and 18-5-22.

3.25. School-Related Events. ~~are a~~ Any curricular or co-curricular activity, as defined by W. Va. 126CSR42, ~~WVBE Policy 2510~~, Assuring the Quality of Education: Regulations for Education Programs, that is conducted outside of the school environment and/or instructional day. Examples of curricular and co-curricular activities include the following: band and choral presentations, theater productions, science or social studies fairs, mathematics field days, career/technical student organizations' activities, or other activities that provide in-depth exploration or understanding of the content standards and objectives appropriate for ~~the~~ students' grade levels.

3.26. Self-administration. ~~is the a~~Administration of medication by the student under the approval, assessment, and supervision of the certified school RN with a licensed prescriber order and parent/guardian permission. The self-administration of prescribed medication may also include medication taken by a student in an emergency or an acute situation (e.g., rescue inhaler, epinephrine, diabetic medication, etc.).

3.27. Specialized Health Care Procedures. ~~are p~~Procedures ordered by the student's licensed prescriber(s) requiring medical and/or health-related training for the individual who performs the procedures.

3.28. Stock ~~m~~Medications. ~~are m~~Medication purchased by the school system under the authorization of a licensed prescriber with medical standing protocols and procedures for administration

to students, staff, and other persons as allowable by code and policies, such as opioid antagonist and epinephrine.

3.29. Supervision of Designated School Personnel. ~~is~~ Periodic on-site review and documentation by the certified school RN verifying the competency of that individual in performing basic and/or specialized health care procedures and maintaining appropriate records.

3.30 ~~29~~.a. Direct Supervision. ~~is~~ Providing availability for consultation and/or referral for appropriate assistance.

3.31 ~~29~~.b. Indirect Supervision. ~~is defined as a~~ Certified school RN being available to the qualified, designated school personnel either in person or through electronic means to provide necessary instruction, consultation, and/or referral for appropriate assistance.

3.32 ~~1~~. Tele-health. ~~is the u~~ Use of electronic information and telecommunications technologies to provide professional health care.

3.33 ~~2~~. Training. ~~is i~~ Instruction and demonstration provided to designated school personnel ~~in preparation~~ to be qualified for the performance of basic and/or specialized health care procedures.

§126-25A-4. Training and Certification for Designated School Personnel.

4.1. Training Program. School personnel, who provide basic and/or specialized health care procedures for students with special health needs, shall undergo training ~~or~~ and demonstrate competency in the performance of required training ~~that are set forth~~ outlined in ~~S~~ section 4.1. In addition, applicable basic and/or specialized training will be required for all school personnel performing health care procedures.

4.1.a. Required ~~€~~ T ~~training~~. All personnel defined in ~~S~~ section 3.24 ~~of this policy~~ must be trained in:

4.1.a.1. ~~H~~ h ~~handling~~ and disposal of body fluids;

4.1.a.2. ~~B~~ b ~~basic~~ first aid;

4.1.a.3. CPR; and,

4.1.a.4. ~~€~~ c ~~onfidentiality~~.

4.1.a.4.A. School personnel performing basic health care procedures may be exempt from the required training of first aid and CPR, if deemed unnecessary by the certified nurse RN, e.g., medication administration for a one-time school-related event/field trip.

4.1.b. Basic ~~€~~ T ~~training~~. Individualized training in the performance of any one or more basic health care procedures as applicable to employee job assignment.

4.1.c. Specialized ~~€~~ T ~~training~~. Individualized training in the performance of any one or more specialized health care procedures as applicable to employee job assignment.

126CSR25A

4.2. ~~A certified nurse RN. Training and retraining must be provided~~ provide and/or ~~coordinated by a certified school nurse RN.~~ coordinate training and retraining.

4.3. ~~An assessment of the performance of each procedure shall be completed by the certified school nurse RN.~~ The certified nurse RN shall complete an assessment of the performance of each procedure. This assessment shall include ~~the completion of~~ completing a critical skills performance checklist ~~and shall be conducted in relation to,~~ concerning changes in student health care needs, licensed prescriber's orders, and medical/health technology.

4.4. ~~The category of supervision required (direct or indirect) in each situation shall be determined by the certified school nurse RN.~~ The certified school RN shall determine the category of direct or indirect supervision required in each situation.

4.5. ~~Training shall be provided through~~ Simulation or use of training models shall be the preferred methods of training. ~~Initial practice of~~ The procedure's initial practice shall be simulated or ~~done~~ performed on models rather than ~~the~~ students, whenever possible.

4.6. School personnel shall be retrained, every two years, on the performance of all basic and/or specialized health care procedures ~~that are~~ currently prescribed and being performed by the personnel.

4.7. School personnel will ~~be certified for completion~~ complete of required training prior to performing any and applicable basic and/or specialized health care procedures.

4.7.a. Required training certification must assure:

4.7.a.1. ~~Completion~~ of required training program stipulated for all employees as defined in ~~Section 4.1;~~ and

4.7.a.2. ~~Demonstrated competency~~ in the required training to be performed in ~~Section 4.1.a.~~

4.7.b. Basic and specialized certification must assure:

4.7.b.1. ~~Completion~~ of required training program stipulated for all employees defined in ~~Section 4.1;~~

4.7.b.2. ~~Completion~~ of training in all basic and/or specialized health care procedures to be performed; and

4.7.b.3. ~~Demonstrated competency~~ based on a performance checklist.

4.8. The Basic and Specialized Health Care Procedure Manual for West Virginia Public Schools must be used ~~for teaching and training~~ to teach and train basic and specialized health care procedures. The training may be provided by:

4.8.a. ~~Certified~~ school RNs;

4.8.b. ~~Vocational schools~~ career technical centers;

4.8.c. ~~Independent~~ faculty approved by a certified nurse RN;

4.8.d. ~~S~~schools of nursing;

4.8.e. ~~P~~ublic health department;

4.8.f. ~~L~~icensed health care provider;

4.8.g. ~~C~~ontracted school RN; ~~and or~~

4.8.h. ~~C~~ontracted licensed health care provider.

§126-25A-5. System for School Admission and Care.

5.1. For students needing specialized health care procedures, the certified school RN shall assess the student, review the licensed prescriber's order, and assure implementation of needed health and safety procedures. This assessment shall be completed ~~prior to~~ before initial school attendance and following any absence during which a health condition may have changed, necessitating reevaluation.

5.2. The licensed prescriber's orders are kept on file in the student's permanent educational record. These orders are valid for a maximum of one school year, unless changed by the licensed prescriber.

5.3. Certified school RNs shall utilize the most current "West Virginia Board of Examiners for Registered Professional Nurses Guidelines for Determining Acts that May be Delegated or Assigned by Licensed Nurses April 2015, and any revisions thereof, as the mechanism for determining assignment and/or delegation of any aspect of basic and/or specialized health care.

5.4. Certified school RNs shall validate and document student knowledge and skills related to ~~self-administration of prescribed medication.~~ prescribed medication self-administration.

§126-25A-6. Health Care Plan and ~~Intervention Guide~~ Emergency Action Plan.

6.1. ~~A health care plan is required for~~ All students receiving specialized health care procedure(s) during the school day and school-related events shall require a health care plan.

6.2. ~~The health care plan must be prepared by~~ The certified school RN shall prepare the health care plan based on assessment of the student and/or a written order by a licensed prescriber. The health care plan may be shared with other school personnel for legitimate educational reasons as indicated in The Family Education Rights and Privacy Act (FERPA) (20 U.S.C. §1232g; 34 CFR Part 99) such as, but not limited to, Individualized Education Program (IEP) Team, Section 504 of the Rehabilitation Act of 1973 (Section 504) Team, ~~and~~ Student Assistance Team meetings, classroom teachers providing oversight and care to the student, and Medicaid billing, etc.

6.3. The health care plan shall guide the certified school ~~nurse~~ RN's care of the student. The certified school RN will develop and revise the health care plan using best practices such as North American Nursing Diagnosis Association International nursing diagnosis. The health care plan will be reviewed and revised on an annual basis or as necessary, with any change in the student's condition or provider's

order.

6.4. The plan ~~should contain~~ shall include:

- 6.4.a. ~~N~~ursing assessment;
- 6.4.b. ~~N~~ursing diagnosis;
- 6.4.c. ~~G~~oals and expected outcomes;
- 6.4.d. ~~I~~nterventions; and
- 6.4.e. ~~E~~valuation.

6.5. ~~An intervention guide~~ Emergency action plans may be ~~used~~ included at the discretion of the certified school RN to guide designated school personnel, classroom teachers, and school bus drivers operators ~~in the provision of~~ providing emergency care and/or specialized health care procedures ~~of~~ for students.

§126-25A-7. Quality Assurance.

7.1. ~~The Basic and Specialized Health Care Procedure Manual for West Virginia Public Schools shall be utilized as the minimum standard for safe practice in consultation with the Commissioner of the Bureau for Public Health as outlined in W. Va. Code §18-5-22c(j).~~ In consultation with the Commissioner of the Bureau for Public Health as outlined in W. Va. Code §18-5-2 (c) and (j), the Basic and Specialized Health Care Procedure Manual for West Virginia Public Schools shall be utilized as the minimum standard for safe practice.

7.1.a. As medical practices change and new technology ~~is developed,~~ develop, other valid nursing resources may be used to ensure the standard of practice and safety of student care. The resources may include such resources as ~~but not be limited to,~~ the Lippincott Manual of Nursing Practice by Williams and Wilkins, and Managing the School Age Child with a Chronic Health Condition Chronic Health Needs in Child Care and Schools by ~~Larson~~ the American Academy of Pediatrics.

7.2. ~~A needs assessment conducted by county certified school RNs within each school district/county will be the basis for revision of the Basic and Specialized Health Care Procedure Manual for West Virginia Public Schools.~~ The Basic and Specialized Health Care Procedure Manual for West Virginia Public Schools ~~will~~ shall be reviewed and revised on a biennial basis or as deemed necessary by the West Virginia Council of School Nurses based on the needs assessments conducted by certified school ~~nurse~~ RNs.

7.3. The Council of School Nurses shall meet at least bi-annually, or more frequently as deemed necessary, by the Chair of the Council in consultation with the WVDE, for review of certification and training program(s) regarding school personnel designated to perform basic and/or specialized health care procedures.

7.4. The certified school RN shall participate in continuing education programs, which provide:

- 7.4.a. ~~T~~training related to new specialized health care procedures; and

7.4.b. ~~S~~taff development applicable to effective school health practice.

7.5. The certified school RN must develop a monitoring system with appropriate time frames to ensure safety and effective monitoring of the assignment and delegation of all basic and/or specialized health care procedures.

7.6. The certified school RN may utilize tele-health to provide school nursing services and consultation for all students, including those with specialized health care needs. Each county should develop procedures/protocols to provide a framework for the use of tele-health to ensure safety and delivery of quality care as permissible with the assistance of modern technology. The decision to utilize tele-health is at the discretion of the certified school RN based on nursing assessment, student needs, accessibility of equipment and services, etc., in collaboration with school administration to support the student and assistive technology during the tele-health session.

§126-25A-8. School Health Records.

8.1. Confidentiality and release of student health information and records shall be protected and maintained as outlined in W. Va. 126CSR94, ~~WVBE~~ Policy 4350, Procedures for Collection, Maintenance and Disclosure of Student Data and FERPA.

8.2. An individual record will be maintained for each student needing a specialized health care procedure. It will include the date and time the procedure was performed, any notes on events and/or interactions, ~~and signature of person~~ the person's signature performing/supervising the procedure.

8.3. Certified school RNs and LPNs must use standardized nursing terminology when recording nursing notes to establish ~~documentation of care standards.~~ documentation.

8.4. Student health records are educational records under FERPA guidelines.

~~8.4.a. While medical information~~ Health records is are considered highly confidential and ~~must be access to it is~~ decided among county and school teams inclusive of the school RN.

~~8.4.b. on specific s~~ Storage of health records to must ensure confidentiality and access as allowable by FERPA including legitimate educational reasons ~~inclusive of~~ required by the Student Assistance Team (SAT), Section 504, IEP, student's classroom teacher, school bus driver operator, etc. and others as determined by the county and school teams.

~~8.4.c. The s~~ Student health educational records must be maintained two years from completion of the student's education.

~~8.4.d. Records to verify the implementation of federally funded programs and services such as, but not limited to, IDEA, Section 504, etc. and to demonstrate compliance with program requirements must be maintained for five years after the activity is completed. The final educational record must include the student health record to be in compliance with the appropriate FERPA guidelines regulations.~~

§126-25A-9. Staffing Requirements.

9.1. Certified school RNs must be employed ~~in sufficient numbers~~ to ensure adequate provision of services to students with complex health care needs. ~~Registered nurses RNs~~ have the authority and the ability to teach and ~~to~~ supervise other persons ~~in rendering~~ to render selected health services and/or procedures. (W. Va. Code §18-5-22.)

9.2. The certified school RN must have a current license as a registered professional nurse in the State of West Virginia (W. Va. Code §30-7-1, et seq.). The school ~~nurse RN~~ must be certified as a school ~~nurse RN~~, as ~~set forth~~ outlined in Policy 5202. The certified school RN must be employed by the county board ~~of education~~ or the county health department (W. Va. Code §18-5-22) which contracts to provide equivalent services to county boards of education. Performance of professional nursing service means both independent nursing functions and health-related services which require specialized knowledge, judgment, and skills as governed by the West Virginia Nurse Practice Act (W. Va. Code §30-7-1, et seq.) and the National Association of School Nurses, Inc., “Scope and Standards of Professional School Nursing Practice.”

9.3. ~~Medical contacts, referrals, and interpretations of medical data shall be managed by the certified school nurse RN. The certified school RN manages medical contacts, referrals, and interpretations of medical data.~~ The certified school RN manages medical contacts, referrals, and interpretations of medical data. The certified school RN serves as the manager for health-related problems and decisions. In the role of manager, the certified school RN is responsible for ~~standards of~~ certified school RN practice standards ~~in relation to~~ concerning health appraisal and health care planning.

9.4. School personnel, with the approval of the principal and the county board ~~of education~~, may elect or in some cases be required to provide approved specialized health care procedures, and such procedures shall be delegated by the certified school RN as deemed appropriate. The certified school RN shall provide for training, retraining, and supervision, and, upon completion, certify the satisfactory level of competence before school personnel performs basic and/or specialized health care procedures. ~~A qualified~~ Qualified designated school personnel may be deemed not qualified in the performance of delegated basic and/or specialized health care procedures based on the ongoing monitoring and supervision by the certified school RN.

9.5. The LPN must be currently licensed in the State of West Virginia (W. Va. Code §30-7A-1, et seq.) and must function under the supervision of the registered professional nurse or licensed physician. W. Va. Code §18A-4-8 defines licensed practical nurse as a nurse licensed by the West Virginia State Board of Examiners for ~~LPN Licensed Practical Nurses~~ who is employed to work in a public school under the supervision of a certified school RN. The ~~licensed practical nurse LPN~~ shall not function as a certified school ~~nurse RN~~ or as a school ~~nurse RN~~. The LPN completes a 12-month career and technical or community college program, obtains a diploma, and holds a valid West Virginia LPN licensure; ~~whereas~~ whereas ~~a~~ a certified school ~~nurse RN~~ has completed four to six years of college education, holds ~~at a~~ a minimum of a Bachelor’s degree in nursing, certification in school nursing, and ~~a~~ a valid West Virginia RN licensure.

9.5.a. LPN working under ~~the supervision of the school nurse RN’s supervision~~ shall practice under assigned and/or delegated nursing duties from the certified school RN. County policy may include, but not be limited to, the following:

9.5.a.1. ~~N~~nursing competencies;

9.5.a.2. ~~I~~ itinerant status due to the continuous changes in student health care affecting the staffing of county health care providers;

9.5.a.3. ~~A~~ ability to receive written, verbal, telephone, faxed, electronic, and/or emailed orders for student care from a licensed health care provider/prescriber with communication to the certified school RN responsible for the overall care of the student; ~~and~~

9.5.a.4. ~~C~~ontribution to the nursing assessment by collecting, reporting, and recording objective and subjective data, including health screenings, in an accurate and timely manner to the certified school ~~nurse RN~~; and

9.5.a.5. ~~A~~ ability to provide student and staff education related to health promotion, disease prevention, and chronic diseases.

9.6. A licensed prescriber and/or professional nurse may be held liable for delegating professional responsibilities to individuals not qualified to perform them.

§126-25A-10. Administration of Medication.

10.1. Certified school RNs and LPNs are bound by standards of practice by the West Virginia RN and LPN boards when administering medication.

10.1.a. Medication administration by RNs, LPNs, and trained, designated school personnel must take place shall occur in a clean and quiet environment where privacy ~~may be established~~ is assured and ~~interruptions are~~ with minimal interruptions.

10.1.ab. The initial dose of any medication should be administered at home, ~~excepting for~~ excepting emergency medications, ~~and~~ unless otherwise directed by the licensed prescriber and/or a court order.

10.1.bc. Parents/guardians shall provide completed and signed medication authorization form(s) ~~(to be designed provided by each the county board), which~~ indicating the student's name; date; allergies; medication name; dosage, time, and route; intended effect of medication; other medication(s) taken by the student; licensed prescriber; and parent/guardian signature. Parents/guardians shall also replenish long-term and emergency prescribed medication as needed and retrieve unused or expired medicine from school personnel no later than 30 days after the authorization to give the medication expires or on the last day of school.

10.1.ed. All medication prescribed by a physician shall be in the originally labeled container from the pharmacy stating, which includes the following: the student's name ~~(OTCs should have the student's name affixed to the original manufacturer's bottle);~~ name of the medication; reason(s) for the medication (if to be given only for specific symptoms); dosage; time; route; reconstitution directions if applicable; and the date the prescription and/or medication expires.

10.1.e. All OTCs falling under the school principal's supervision shall be in the original manufacturer's container with the student's name and dosage instructions affixed to the container. The school principal may designate school personnel as defined in this policy to be trained to administer OTCs. The designated school personnel should undergo OTC retraining every two years. The WVDE provides online training for OTC administration.

10.1.f. A county board may choose to develop a medication policy allowing the administration of OTC medications with the parent's/guardian's consent.

~~10.1.dg. If emergency medication or medication authorization form is not provided to the school, the safety and welfare of the student is placed at risk. The student should not attend school until both the medication and medication authorization form are provided to school personnel with a review and delegation from the certified school nurse RN. Designated school personnel shall receive and review the emergency medication and medication authorization form and obtain authorization from the certified school RN to administer the medication. The student shall not attend school until both the administration form and medication are received to prevent risking the safety and welfare of the student. The Student Assistance Team (SAT), Section 504, or IEP team must regard shall consider the lack of emergency lifesaving medication(s) as child neglect.~~

~~10.1.eh. The certified school nurse RN is to be contacted immediately when a prescribed medication's appearance or dosage is questioned. The certified school nurse RN shall take the appropriate steps to assure ensure the medication is safe to administer.~~

~~10.2.fj. The certified school nurse RN is to be contacted immediately when a student's health condition suggests that it may not be appropriate to administer the medication.~~

~~10.1.gj. When a student's medical condition requires a change in the medication dosage or schedule, the parent/guardian must shall provide a new written medication authorization form from a licensed prescriber, and container, if applicable. This must be given The parent/guardian shall give medication changes to designated personnel within an appropriate timeframe.~~

~~10.1.hk. Schools may use only those stock medications as permitted by W. Va. Code §18-5-22(c) (epinephrine) and §18-5-22(d) (opioid antagonist) if the county board of education adopts a policy in accordance with under Sections 12.2 through 12.14. Schools are required to follow the county board of education policy and may voluntarily adopt W. Va. Code §18-5-22(c) (stock epinephrine) as outlined in Section 12.2 and W. Va. Code §18-5-22(d) (stock opioid antagonist) as outlined in Section 12.10. County boards of education will shall follow the procedures and protocols for school health and school nursing, as set forth outlined in W. Va. Code and WVBE rules policies.~~

~~10.1.il. Schools should develop a mechanism to assure the inclusion of ensure all students, especially those with specialized health care needs, to participate in school-related field trips. This includes mechanism should include advance notification to the certified school RN and/or the county's school health services director to ensure out-of-state field trip destinations allow reciprocity and delegation of certain health care procedures by their state board of nursing laws and practice acts since the certified school RNs is are licensed to practice nursing only in West Virginia. County boards of education may consider allowances and reimbursement to certified school RNs and LPNs to hold a compact nursing license, which allows allowing nursing practice in multiple states to support classroom field trips.~~

~~10.1.j. Certified school RNs and LPNs are bound by standards of practice by the West Virginia RN and LPN boards, including the ability to administer medications, including OTC, with a medical order, only by a licensed prescriber. A county board of education may choose to develop medication policies~~

~~allowing OTC medications in the original medication bottle with a parent's consent to fall under the supervision of the school principal instead of being prescribed under the certified school RN. The school principal may designate school personnel as defined in this policy to be trained to administer OTCs. The designated school personnel should undergo OTC retraining every two years. The WVDE provides online training for OTC administration.~~

10.2. Medication administration ~~incidents~~ error include, but are not limited to, any deviation from the instructions provided by the licensed health care provider. The certified school RN and administrator/principal shall be contacted immediately in the event of a medication administration ~~incident~~ error. In the event of a medication administration error ~~the certified school RN or administrator/principal shall do the following:~~

10.2.a. ~~Contact the physician, and parent/guardian, and if necessary, emergency medical services;~~

10.2.b. ~~Implement~~ notify the certified school RN or administrator recommendation and/or licensed prescriber order in response to a medication ~~incident~~ administration error;

10.2.c. ~~Document~~ all circumstances, orders received, actions taken, and student's status; and

10.2.d. ~~Submit~~ a written report to the administrator and county superintendent at the time of the ~~incident~~ medication administration error. The report should include the ~~name of the student's~~ name; the parent/guardian name and phone number; a specific statement of the medication incident; who was the person notified; and what the remedial actions were taken

10.3. Self-administration of medication ~~shall be~~ is permitted ~~in accordance with~~ under W. Va. Code §§18-5-22a, 18-5-22b, and 18-2K-1, et seq. ~~after~~ when all of the following conditions are met:

10.3.a. A written medication authorization form is received from the parent/guardian and licensed prescriber ~~for~~ permitting self-administration of medication;

~~10.3.b. A written statement is received from a licensed prescriber, which contains the student name, purpose, appropriate usage, dosage, time or times at which, or the special circumstances under which the medication is to be administered.~~

10.3.~~b~~. The student has demonstrated the ability and understanding to self-administer medication by passing an assessment by the certified school RN evaluating the student's ~~technique of~~ self-administration technique and level of understanding ~~of the appropriate use of the medication~~;

10.3.~~c~~. The parent/guardian has acknowledged in writing that they have read and ~~understand~~ understood a notice provided by the county board ~~of education~~ stating that the county board, school, ~~county board~~, and its employees and agents are exempt from any liability, except for willful and wanton conduct, ~~as a result of~~ resulting in any injury arising from the self-administration of medication;

10.3.~~d~~. The permission to self-administer medication shall be ~~effective~~ sufficient for the school year ~~for which it is~~ during which it is granted, ~~and~~ All documents related to the self-administration of medication shall become part of the student's health record.

10.3.~~fe~~. The permission to self-administer medication may be revoked if the certified school RN finds that the student's technique and/or understanding of ~~the use of the~~ medication's use is not appropriate or is being willfully disregarded.

§126-25A-11. Medication Storage, Inventory, Access, and Disposal.

11.1. Each school shall designate space in the building to store student medication at the correct temperature, in a secure, locked, clean cabinet or refrigerator, as required. Schools shall maintain epinephrine auto-injectors in a secure, unlocked location ~~which is accessible to only certified school RNs, health care providers, and authorized nonmedical personnel and not by students.~~ Special considerations may include transportation of medications on ~~the school buses~~ with provisions specified for (storage of medication, safety, and the return of medication to school especially with epinephrine and stock medications, etc.)

11.2. All medication shall be entered on a medication inventory and routinely monitored for expiration and disposal.

11.3. Access to medications shall be under the ~~authority of the school principal~~ school principal's authority in conjunction with the certified school RN assigned to that school.

11.4. An appropriate supply of long-term and emergency prescribed medication may be maintained at the school in amounts not to exceed school dosages within each calendar month.

11.5. School personnel shall dispose of unused or expired medicine unclaimed by the parent/guardian no later than 30 days after the parent/guardian medication authorization expires or on the last day of school, whichever comes first.

11.6. Medication disposal shall be done in a manner in which no ~~other~~ individual has access to any unused portion. Two individuals ~~will shall~~ witness the ~~disposal of the medication's disposal~~ and the two individuals shall procedure must be documented document the procedure on the appropriate form related to the specific student.

§126-25A-12. Emergency Medication.

12.1. The West Virginia Registered Nurses ~~Board~~ and W. Va. Code allow's for the delegation of ~~certain~~ specific prescribed emergency medication. There are emergency medications that can only be administered by licensed nurses, such as, but not limited to, intranasal midazolam, and intravenous clotting factor. The following emergency medications have been approved for school ~~nurse~~ RNs to determine the ability to delegate, train, and continuously supervise school personnel to administer when a diagnosis and order are in place and the school ~~nurse~~ RN or LPN is not available to provide such care:

12.1.a. ~~G~~glucagon;

12.1.b. ~~E~~pinephrine;

~~12.1.c. Rectal diazepam (i.e. Valium) can only be delegated to unlicensed school personnel if ordered by the student's physician and the certified school RN provides the final determination to allow delegation;~~

~~12.1.d. Albuterol or other emergency asthma medication; and~~

~~12.1.e. Opioid antagonist; and~~

12.1.e. certain seizure medication can only be delegated to unlicensed school personnel if ordered by the student's physician and the certified school RN provides the final determination to allow delegation;

12.2. A public, private, parochial, or denominational school located within this state may possess and maintain at the school a supply of epinephrine auto_injectors for use in emergency medical care or treatment for an anaphylactic reaction. Each county board of education may also develop an optional ~~policy for~~ stock epinephrine policy during secondary activity/extracurricular events outside of the school day. A prior diagnosis for a student or school ~~personnel~~ employee requiring the use of epinephrine auto_injectors is not necessary to permit the school to stock epinephrine auto_injectors.

12.3. Epinephrine auto-injectors shall be maintained by the school in a secured, unlocked location, which is only accessible by certified school RNs, health care providers, and authorized nonmedical personnel, and not by students.

12.4. An allopathic physician licensed to practice pursuant to the provisions of W. Va. Code §30-3-1 or an osteopathic physician licensed to practice pursuant to the provisions of W. Va. Code §30-14-1 ~~of this code~~ may prescribe within the course of ~~his or her~~ the physician's professional practice standing orders and protocols for use when necessary by a school ~~which that~~ wishes to maintain epinephrine auto-injector pursuant to the provisions of this section.

12.5. Certified school RNs are authorized to administer an epinephrine auto_injector to a student or school ~~personnel~~ employee during regular school hours or at a school function when the certified school RN medically believes the individual is experiencing an anaphylactic reaction. A certified school RN may also use the school supply of epinephrine auto_injectors that meet the requirements of a prescription on file with the school for a student or school personnel.

~~12.6. Designated qualified school personnel and at county/local discretion, school transportation employees (including bus drivers), who have been trained in the administration of an epinephrine auto-injector by the certified school RN and who have been designated and authorized by the school to administer the epinephrine auto_injector to a student or school personnel during regular school related events when the school personnel reasonably believes, based upon their training, that the individual is experiencing an anaphylactic reaction may administer epinephrine. Designated qualified school personnel may also use the school supply of epinephrine auto_injectors for a student or school personnel authorized to self administer that meet the requirements of a prescription on file with the school. Transportation employees, including bus operators, are not eligible to receive the additional pay provided in W. Va. Code §18-5-22(e).~~ Designated qualified school personnel and, at the county board's discretion, school transportation employees may administer epinephrine when they reasonably believe, based upon their training, that an individual is experiencing an anaphylactic reaction. These employees must have been trained in the administration of an epinephrine auto-injector by the certified school RN

and have been designated and authorized to administer the epinephrine auto-injector to a student or school employee during regular school-related events.

12.6.a. Designated qualified school personnel may also use the school supply of epinephrine auto-injectors for a student or school employee authorized to self-administer that meet the requirements of a prescription on file with the school. Transportation employees, including school bus operators, are not eligible to receive the additional pay provided in W. Va. Code §18-5-22(e).

12.7. The parent/guardian of a student ~~who was~~ administered a school-maintained epinephrine auto-injection ~~shall~~ should be provided with a comprehensive notification immediately. The comprehensive notification should include the date and the approximate time the incident occurred, symptoms observed, who administered the injection, the rationale for administering the injection, the response to the epinephrine administration, the dose of epinephrine administered, the current location of the student, and any other necessary elements to make the students' parent/guardian fully aware of the circumstances surrounding the administration of the injection and the student's subsequent health status.

12.8. A certified school RN or designated qualified school person who administers an epinephrine auto-injection to a student or ~~to a school personnel~~ as provided in this policy and in W. Va. Code §18-5-22(c) is immune from liability for any civil action arising out of ~~an~~ any act or omission resulting from the administration of the epinephrine auto-injection unless the act or omission was the result of the certified school RN or trained and authorized nonmedical school personnel's gross negligence or willful misconduct.

12.9. The county board ~~of education will~~ shall provide training on anaphylaxis and allergy awareness for food service workers and others in the school system, ~~if easily available locally.~~

12.10. W. Va. Code §18-5-22(d) allows county boards ~~of education~~ the option to adopt stock opioid antagonist policies under a standing order by a licensed prescriber with specific protocols for administration by certified school RNs and other licensed ~~RNs and LPNs~~ nurses working in the school ~~(RN and LPN)~~. County boards ~~of education~~ must follow the protocols/standards for dosage set forth by the West Virginia Department of ~~Human health and Health~~ human Resources ~~(WVDHHR)~~. ~~Nonmedical school personnel as defined in W. Va. Code §18-5-22 who have been trained and deemed competent by the certified school RN in the administration of an opioid antagonist and who have been designated and authorized by the certified school RN to administer the opioid antagonist are authorized to administer an opioid antagonist to a student, school personnel, or to a person during regular school hours, at a school function, at an event on school property when the authorized and designated nonmedical school personnel reasonably believes, based upon their training, that the individual is experiencing an adverse opioid event.~~ The certified school RN shall train the designated school personnel for administration of an opioid antagonist, deem competent, and authorize them to administer an opioid antagonist. The opioid antagonist may be given to a student, school personnel, or any person on school property during regular school hours. Administration of the opioid antagonist may be given when the authorized personnel believes, based upon their training, that the individual is experiencing an adverse opioid event.

12.11. All licensed prescribers who prescribe an opioid antagonist to a school or county shall provide educational materials and training to the certified school RN, other licensed nurses, and school

~~personnel~~ employees working in the ~~school on~~ opiate-related overdose prevention and treatment programs, as well as materials on administering the prescribed opioid antagonist.

12.12. Any certified school RN, other licensed nurses, and designated and trained school personnel who administers an opioid antagonist as provided in this policy and ~~in~~ W. Va. Code §18-5-22(d) is immune from liability for any civil action arising out of ~~an~~ any act or omission resulting from the administration of the opioid antagonist unless the act or omission ~~was the result of the~~ resulted from the school nurse RN or trained and authorized nonmedical school personnel's gross negligence or willful misconduct.

12.13. Prior notice to the parents of a student of the administration of the opioid antagonist is not required. Immediately following the administration of the opioid antagonist, the school shall provide notice to the parent of a student who received the opioid antagonist. Any certified school RN, other licensed nurse, and designated school personnel working in the school who administers an opioid antagonist to a person whom he or she believes to be suffering from an opioid-related overdose is required to seek additional medical treatment at a medical facility for that person immediately following the administration of the opioid antagonist to avoid further complications ~~as a result of~~ resulting from a suspected opioid-related overdose. ~~A comprehensive Ample notice is required to~~ A comprehensive Ample notice is required to the parents of a student who was administered a school maintained opioid antagonist, ~~is required and~~ The notice shall include who administered the opioid antagonist, the rationale for administering the antagonist, the approximate time of the administration of the opioid antagonist, and any other necessary elements to make the student's parent/guardian fully aware of the circumstances surrounding the administration of the antagonist.

12.14. All public schools are must ~~required to~~ report each incident resulting in ~~the administration~~ administering of epinephrine injections and ~~administration of~~ administering opioid antagonist in their county. Public schools must report other ~~Other~~ medication ~~incidents~~ administration errors (e.g., wrong dose, incorrect medication administered, other medication administration errors) ~~shall also be reported~~. The ~~incidents~~ medication administration errors will be reported to the West Virginia Poison Center by calling 1-800-222-1222 after emergency medical services have transported the student or staff member to acute care. The notification should include the name of the student, the student's age and gender, date and the approximate time the incident occurred, symptoms observed, who administered the injection, the name of the school the student attends, a contact telephone number, the rationale for administering the injection, the response to the epinephrine administration or opioid antagonist, the dose of epinephrine or opioid antagonist administered, and any other necessary elements to provide a complete report for the individual situation. The West Virginia Poison Center will provide the data upon request to the public schools, ~~local county boards of education~~, and annually to the State Superintendent of Schools. The State Superintendent of Schools shall prepare an annual report to ~~be presented~~ present to the West Virginia Legislature's Joint Committee on Government and Finance as set forth in W. Va. Code §4-3 ~~article three, chapter four of Code~~, by December 31 of each year.

§126-25A-13. Student Rights.

13.1. Students are entitled to the assignment of qualified personnel.

13.2. ~~Students are afforded~~ FERPA affords students the right to privacy, dignity, respect, and courtesy, ~~in accordance with FERPA.~~

§126-25A-14. Penalties.

14.1. Failure of any school personnel to comply with ~~the above rules~~ this policy will result in personnel disciplinary actions based on state and ~~local~~ county board of education policies.

§126-25A-15. Administrative Due Process.

15.1. Families dissatisfied with any part of the management and/or delivery of school health services during the curricular ~~day~~ or co-curricular day and school-related events should:

15.1.a. ~~S~~schedule a meeting with the certified school RN and school principal or designee; and/or

15.1.b. ~~F~~follow due process procedures as outlined in Policy 2419, Section 504, and/or W. Va. 126CSR188, ~~WVBE~~ Policy 7211, Conflict Resolution Process for Citizens.

~~**§126-25A-16. Incorporation and Reference.**~~

~~16.1. Any reference in all WVBE policies to Policy 2422.8 should now be to apply with the same force and effect by virtue of its incorporation into this policy.~~

~~**§126-25A-17. Severability.**~~

~~17.1. If any provision of this ~~rule~~ policy or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of this ~~rule~~ policy.~~

**W. Va. 126CSR25A, Policy 2422.7, Standards for Basic and Specialized Health Care Procedures
Comment Response Form**

Comment Period Ends: April 12, 2021

NOTICE: *Comments, as submitted, shall be filed with the West Virginia Secretary of State's Office and open for public inspection and copying for a period of not less than five years.*

The following form is provided to assist those who choose to comment on Policy 2422.7, Standards for Basic and Specialized Health Care Procedures. Additional sheets may be attached, if necessary.

Name: _____ Organization: _____

Title: _____

City: _____ State: _____

Please check the box below that best describes your role.

- | | | |
|---|--|---|
| <input type="checkbox"/> Superintendent | <input type="checkbox"/> Higher Educator | <input type="checkbox"/> Parent/Family |
| <input type="checkbox"/> Principal | <input type="checkbox"/> Teacher | <input type="checkbox"/> Community Member |
| <input type="checkbox"/> Professional Support Staff | <input type="checkbox"/> Service Personnel | <input type="checkbox"/> Other |

COMMENTS/SUGGESTIONS
§126-25A-1. General.
§126-25A-2. Purpose.
§126-25A-3. Definitions.
§126-25A-4. Training and Certification for Designated School Personnel.
§126-25A-5. System for School Admission and Care.
§126-25A-6. Health Care Plan and Emergency Action Plan.
§126-25A-7. Quality Assurance
§126-25A-8. School Health Records.

**W. Va. 126CSR25A, Policy 2422.7, Standards for Basic and Specialized Health Care Procedures
Comment Response Form**

§126-25A-9. Staffing Requirements.
§126-25A-10. Administration of Medication.
§126-25A-11. Medication Storage, Inventory, Access, and Disposal.
§126-25A-12. Emergency Medication.
§126-25A-13. Student Rights.
§126-25A-14. Penalties.
§126-25A-15. Administrative Due Process.
§126-25A-16. Severability.

Please direct all comments to:

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