

Last Minute Memorandum

To: STATE BOARD MEMBERS

Date: February 5, 2003

From: Sue Stickel, Deputy Superintendent
Curriculum and Instruction Branch

Re: ITEM # 27

Subject TITLE 5 REGULATIONS ON ADMINISTRATION OF MEDICATION TO
PUPILS AT PUBLIC SCHOOLS

Since the proposed Medication Administration Regulations were released for public comment on November 14, 2002, staff in the Department of Education and in the State Board of Education office have attempted to address some of the concerns that have been expressed by members of the public.

Attached are three documents that reflect suggested revisions to the proposed regulations and a summary of written public comments received as of 3:00 p.m., February 4, 2003:

Attachment A, "Overview of Proposed Revisions"—A summary of suggested changes to the current version of the proposed regulations.

Attachment B, "Draft—Proposed Amendments"—Proposed regulations with recommended new text (underlined and capitalized) and deletions (strikeout).

Attachment C, "Summary of Written Comments Received"—An overview of comments received as of February 4, 2003, 3:00 P.M.

SBE Item #27, February 2003
Medication Regulations
Overview of Proposed Revisions

Page/Line (from version dated February 4, 2003)	Selected Substantive Changes
Page 2, lines 19-20	Expands the number of individuals who may provide training for designated school personnel; adds parental consent requirement.
Page 3, lines 19-23	Adds the definition of “duly qualified supervisor of health.”
Page 4, lines 14-23	Specifies additional information to be provided by health care provider, including whether medication may be administered by someone who is not legally licensed to do so.
Page 4, lines 25-26	Specifies additional information to be provided by health care provider, specifically, information on medication’s side effects, including any that may impact student behavior or learning abilities.
Page 6, lines 8-19	Clarifies which designated school personnel may administer specified medications.
Page 7, lines 9-14	Describes conditions under which parents may designate school site employee to administer medication to his/her child at school, contingent on administrator’s approval and LEA-adopted policy.
Page 8, lines 21-22	Exempts self-administered medication from delivery/storage requirements to allow students immediate access if needed.
Page 8, line 27 and Page 9, lines 2-3	Clarifies that medication is to be delivered to school by a parent/guardian or designee.
Page 10, lines 7-15	Deletes wording that created confusion over whether the regulations applied to students with special needs.
Page 10, lines 17-23	Clarifies that this article does not apply to the use of non-prescribed emergency epinephrine auto-injectors by LEA employees and how potential discrepancies related to the use of epinephrine auto-injectors will be resolved.

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Title 5. EDUCATION

Division 1. State Department of Education

Chapter 2. Pupils

Subchapter 3. Health and Safety of Pupils

Add Article 4.1. to read:

Article 4.1. Administration of Medication to Pupils at School

§ 600. Definitions.

For the purposes of this article, the following definitions hereinafter apply:

(a) “Regular school day” means the time during which the pupil receives instruction or otherwise participates in activities under the school’s or local education agency’s auspices and in which other pupils have the opportunity to participate, including but not limited to, field trips, extracurricular and cocurricular activities, before- or after-school programs, camps or other activities that typically involve at least one overnight stay away from home.

(b) “Medication” is any substance that: (1) is dispensed in the United States by prescription only; or (2) does not require dispensing by a licensed pharmacist, in which case the authorized health care provider’s written statement must clearly identify the name of the medication in such a way as to distinguish that medication from any similar medications with which it may be confused and specifying the strength of the principal active ingredient(s). Such medication that does not require dispensing may include, but is not limited to, over-the-counter remedies, nutritional supplements, and herbal remedies.

(c) “Prescription” means a written direction for the administration of medication to a pupil that is signed by the pupil’s authorized health care provider.

(d) “Authorized health care provider” means a person who possesses an active, current California medical license and who prescribes medications as permitted by California law and within his/her scope of practice for administration to pupils. Authorized health care providers ~~only include~~ **INCLUDE ONLY:**

- (1) Physicians and osteopaths;
- (2) Dentists;
- (3) Podiatrists;

Note: Proposed additions are DOUBLE UNDERLINED AND CAPITALIZED and proposed deletions are ~~double struck through~~.

(4) Optometrists;

(5) Nurse practitioners and nurse midwives who have been assigned furnishing numbers by the Board of Registered Nursing, and function under standardized procedures as defined by Business and Professions Code section 2725; and

(6) Physician assistants who have been assigned furnishing numbers, and function under a physician’s supervision and written protocols.

(e) “School nurse” is a currently licensed registered nurse who is credentialed pursuant to Education Code section 44877.

(f) “Designated school personnel” means an individual or more than one individual employed by the local education agency and meeting all of the following criteria:

(1) Consented to render assistance to the pupil in accordance with the authorized health care provider’s written statement;

(2) Received approval of the schoolsite administrator to provide the assistance; and either

(3) Where possible, is a school nurse or another individual employed by the local education agency who holds a current professional license authorizing the rendering of assistance to a pupil who is required to take medication; or

(4) Where not a school nurse or other license holder as specified in paragraph (3):

(A) Received training in the rendering of assistance to the pupil by the pupil’s ~~physician~~ **AUTHORIZED HEALTH CARE PROVIDER; BY A DULY QUALIFIED SUPERVISOR OF HEALTH WITH PARENT/GUARDIAN CONSENT;** or by a trainer mutually agreed upon by the schoolsite administrator, the parent/guardian, and the pupil’s authorized health care provider as being capable of providing the training. If deemed necessary by the individual performing the training, the training may also include instruction from another party, e.g. training to perform cardiopulmonary resuscitation (CPR), whom the trainer determines to be qualified. The training is typically to include the appropriate administration, handling, and storage of the medication; and

(B) Is supervised as deemed necessary by the individual who performs the training pursuant to paragraph (4)(A). Supervision may include, but is not limited to, direct observation or periodic communication by telephone or other electronic means.

(g) “Schoolsite administrator” means the school’s principal or his or her designee.

(h) “Parent/guardian” means the parent or guardian who has legal custody of the pupil.

(i) “Authorized health care provider’s written statement” means the written statement specified in Sections 601(a) and 602.

(j) “Parent/guardian consent” means the written statement specified in Sections 601(b) and 603.

(k) “Medication log” is a form developed by the local education agency for the documentation of medication administration during school. The medication log shall include, but not be limited to, the following information:

(1) Pupil’s name;

(2) Name of medication to be administered;

(3) Dose of medication;

(4) Method of medication administration;

(5) Time the medication is to be administered during the regular school day;

(6) Date of medication authorization;

(7) Authorizing health care provider’s name and contact information; and

(8) A space for daily recording of medication administration, which includes the date medication is administered, time of administration, amount administered, and initials of the designated school personnel administering the medication.

(l) “DULY QUALIFIED SUPERVISOR OF HEALTH” MEANS AN EMPLOYEE OR CONTRACT EMPLOYEE OF THE LOCAL EDUCATION AGENCY (IF ANY) WHO IS EITHER A PHYSICIAN AND SURGEON OR A SCHOOL NURSE, AND WHO IS RECOGNIZED BY THE LOCAL EDUCATION AGENCY AS SERVING IN THE CAPACITY OF DULY QUALIFIED SUPERVISOR OF HEALTH.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Sections 2746.1, 2836.1, 4040 and 4174, Business and Professions Code; Section 49423, Education Code; SECTIONS 44873 AND 44877, EDUCATION CODE.

§ 601. Requirements for Prescription Medication Administration.

A pupil may receive medication during the regular school day when all of the following conditions are met:

(a) A written statement from the pupil’s authorized health care provider, as described in

Section 602, has been received by the schoolsite administrator.

(b) A written statement of consent from the pupil’s parent/guardian, as described in Section 603, has been received by the schoolsite administrator.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

§ 602. Written Statement of Authorized Health Care Provider.

(a) The written statement from the pupil’s authorized health care provider shall include all of the following:

(1) Pupil's name and date of birth;

(2) Name of the medication, as defined in Section 600(b), to be administered and reason for administration;

(3) Dose of the medication;

(4) Method of medication administration, including whether the medication:

(i) ~~Requires intravenous~~ administration BY INJECTION, or

(ii) HAS THE POTENTIAL FOR IMMEDIATE SEVERE ADVERSE REACTION THAT WOULD REQUIRE a nursing assessment or dosage adjustment prior to administration;

(5) IF THE MEDICATION IS OF THE TYPE DESCRIBED IN SUBPARAGRAPH (i) OR (ii) OF PARAGRAPH (4), WHETHER THE MEDICATION MAY BE ADMINISTERED BY DESIGNATED SCHOOL PERSONNEL WHO ARE NOT SCHOOL NURSES OR INDIVIDUALS WHO OTHERWISE HOLD A CURRENT PROFESSIONAL LICENSE AUTHORIZING THE RENDERING OF ASSISTANCE TO PUPILS WHO ARE REQUIRED TO TAKE MEDICATION.

~~(5)~~ (6) Time the medication is to be administered during the regular school day;

~~(6)~~ (7) Possible ~~s~~Side effects OF WHICH THE SCHOOL NURSE OR DESIGNATED SCHOOL PERSONNEL SHOULD BE AWARE, including ~~side effects~~ THOSE that may impact student learning or behavior;

~~(7)~~ (8) For medication prescribed on an as needed basis, the symptoms that make administration necessary and the allowable frequency of administration;

~~(8)~~ (9) For medication that is to be self-administered by the pupil, a statement that, in the

opinion of the authorized health care provider, the pupil is competent to safely self-administer the medication as directed by the authorized health care provider;

~~(9)~~ (10) Name, address, telephone number, and signature of the authorized health care provider; and

~~(10)~~ (11) If the authorized health care provider is a nurse practitioner, nurse midwife, or physician assistant, the written statement shall also include the authorized health care provider's furnishing number and name of supervising physician.

(b) The pupil's parent/guardian is responsible for obtaining and providing the school with the authorized health care provider's written statement as described in subdivision (a).

(c) A new written statement must be provided annually and whenever there is a change in medication, dosage, method or time of administration, or authorized health care provider prescribing the medication.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

§ 603. Parent/Guardian Consent.

(a) Before medication may be administered to a pupil during the regular school day by designated school personnel, the pupil's parent/guardian must provide the local education agency, through the schoolsite, a written statement of consent to the administration of medication as described in the authorized health care provider's written statement. When necessary, reasonable accommodations are to be provided to a parent/guardian who has insufficient English language proficiency to produce a written statement or who has a disability that makes it difficult to produce a written statement.

(b) The statement of consent by the parent/guardian must include approval of communication between the schoolsite administrator or his or her designee and the authorized health care provider with regard to the authorized health care provider's written statement.

(c) Statements of consent required, or forms developed by local education agencies to obtain a parent/guardian consent under subsection (a), shall be specifically limited to authorization for communication by the authorized health care provider of information that is directly related to the authorized health care provider's written statement for administration of medication.

(d) A new written consent must be provided annually or any time when there is a new written

statement from the authorized health care provider.

(e) The parent/guardian may terminate the consent to administer medication during the regular school day. A written statement of termination must be submitted to the schoolsite administrator.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

§ 604. Persons Authorized To Administer Medication at School.

~~(a) Medication may be administered during the regular school day by designated school personnel, including administration by subcutaneous injection. If the designated school personnel are individuals other than school nurses or persons who hold a current professional license authorizing the rendering of assistance to a pupil who is required to take medication, they may not administer medications which the written statement described in Section 602 specifies are to be administered intravenously, or has the potential for immediate severe adverse reactions that would require a nursing assessment or dosage adjustment prior to administration.~~

CONSISTENT WITH THE AUTHORIZED HEALTH CARE PROVIDER'S WRITTEN STATEMENT AS DESCRIBED IN SECTION 602 AND, IF APPLICABLE, SUBJECT TO TRAINING PURSUANT TO PARAGRAPH (4) OF SUBDIVISION (f) OF SECTION 600, DESIGNATED SCHOOL PERSONNEL MAY ADMINISTER MEDICATION DURING THE REGULAR SCHOOL DAY. When an Individualized Education Program, prepared in accordance with applicable provisions of the federal Individuals with Disabilities Education Act and Part 30 (commencing with Section 56000) of the Education Code, or a Section 504 Accommodation Plan, prepared in accordance with applicable provisions of the federal Rehabilitation Act of 1973, provides for the administration of medication to a pupil, those provisions shall be implemented, and nothing in this article shall be interpreted as interfering with the implementation of those provisions.

(b) The pupil's parent/guardian or his/her designee may, but shall not be required to, administer medication to the pupil during the regular school day. A parent/guardian who ~~opts~~ CHOOSES to administer medication TO HIS/HER CHILD during the regular school day may do so only under the following conditions:

(1) The parent/guardian administers the medication, or the parent/guardian designates an

individual to administer the medication to his/her pupil during the regular school day, as long as there is no legal reason that would otherwise exclude such individual from being on a school campus or accompanying pupils on an activity as specified in Section 600(a), and the parent/guardian provides a written statement to the schoolsite administrator that identifies the individual who will be administering the medication to the pupil; and

(2) All medications administered during the regular school day by the pupil's parent/guardian or designee are administered in accordance with local education agency policies and procedures for safety and privacy as provided to the pupil's parent/guardian by the school.

(3) IF THE INDIVIDUAL THE PARENT/GUARDIAN DESIRES TO DESIGNATE IS AN EMPLOYEE OF THE LOCAL EDUCATION AGENCY, THEN THE DESIGNATION SHALL BE SUBJECT TO APPROVAL BY THE SCHOOLSITE ADMINISTRATOR PRIOR TO BECOMING EFFECTIVE. THE LOCAL EDUCATION AGENCY SHALL ADOPT POLICY ON ITS EMPLOYEES SERVING AS PARENT/GUARDIAN DESIGNEES IN ORDER TO GUIDE THE SCHOOLSITE ADMINISTRATOR'S DECISIONS.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, AND PART 30 (COMMENCING WITH SECTION 56000), Education Code.

§ 605. Pupil Self-Administration of Medications in School.

(a) Pupils may self-administer medications during the regular school day, pursuant to the authorized health care provider's written statement, and with the consent of the pupil's parent/guardian. Pupils with chronic health conditions such as, including but not limited to, asthma, diabetes, or severe allergies, may have the necessary medication in their possession and may self-administer such medication during the regular school day. The parents/guardians of the pupils must agree that the pupils will self-administer the medication pursuant to the authorized health care provider's written statement. The school shall provide the parents/guardians of pupils who self-administer medication with any local education agency policies and procedures for safety, appropriate administration, and privacy, and the parents/guardians of the pupils must agree that the pupils will self-administer the medication in accordance with such policies and procedures.

(b) The local education agency shall develop policies and procedures for determining when a schoolsite administrator may determine that a pupil who requires medications should not be

allowed to self-administer medication, in order to preserve the health and safety of the pupil who requires medications and for all pupils and staff at the school.

(c) The local education agency must ensure, at a minimum, all of the following, regarding pupil self-administration of medication:

(1) The school has received the authorized health care provider’s written statement, and the parent/guardian consent for the pupil to self-administer ~~the~~ HIS/HER medications during the regular school day;

(2) The designated school personnel will confer with the parent/guardian to determine the level of supervision and monitoring needed by the pupil;

(3) The designated school personnel discusses issues in an age appropriate manner with the pupil self-administering his/her medication to identify individual needs for school accommodations;

(4) The pupil is provided an appropriate level of privacy based on his/her individual needs; and

(5) The designated school personnel will be available to provide assistance to the pupil as necessary.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

§ 606. Delivery and Storage of Medication at School.

The local education agency must ensure, at a minimum, all of the following, regarding the delivery and storage of medication (EXCEPT MEDICATION THAT IS SELF-ADMINISTERED) during the regular school day:

(a) Parents/guardians are informed that:

(1) Medications that are dispensed by prescription only must BE filled by a pharmacist licensed in a ~~S~~state of the United States of America;

(2) Medications must be delivered to the schoolsite administrator or the designated school personnel BY THE PARENT/GUARDIAN OR HIS/HER DESIGNEE in the container labeled by a licensed pharmacist and in a manner that is consistent with the authorized health care provider’s written statement, with a separate labeled container for each medication; and

(2) Medications that do not require dispensing by a pharmacist, but that are prescribed by the

authorized health care provider must be delivered to the schoolsite administrator or the designated school personnel in the original container **BY THE PARENT/GUARDIAN OR HIS/HER DESIGNEE.**

(b) Medications are stored in a manner that is secure and maintains their effectiveness.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

§ 607. Documentation of Medication Administration in School.

The local education agency must ensure, at a minimum, all of the following, regarding documentation of medication administration (EXCEPT FOR SELF-ADMINISTRATION) in school:

(a) Pupil confidentiality IS APPROPRIATELY MAINTAINED;

(b) An individual medication log as defined in Section 600(k) is maintained for each pupil, for each medication administered; and

(c) The date and time of each administration of medication is recorded in the pupil's medication log and signed by the designated school personnel administering the medication.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

§ 608. Errors in Medication Administration in School.

Any material or significant deviation from the authorized health care provider's written statement, such as the administration of the wrong medication or the failure to administer medication, must be reported as quickly as possible upon discovery to the schoolsite administrator or his or her designee and to the parent/guardian. If it is determined to be necessary, the schoolsite administrator or his or her designee will notify the authorized health care provider.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

§ 609. Disposal of Unused, Discontinued and Outdated Medication at School.

The local education agency must ensure, at a minimum, that:

(a) Discontinued, and outdated medication are returned immediately and directly to the parent/guardian or his/her designee;

(b) At the end of the school year, all unused medications are returned to the parent/guardian or his/her designee; and

(c) Medications not claimed are disposed of in accordance with applicable state and local laws.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

~~**§ 610. Medication Provided Pursuant to an Individualized Education Program or Section 504 Plan.**~~

~~This article does not apply to the providing of medication to a pupil pursuant to an Individualized Education Program prepared in accordance with applicable provisions of the federal Individuals with Disabilities Education Act and Part 30 (commencing with Section 56000) of the Education Code, or a Section 504 Accommodation Plan, prepared in accordance with applicable provisions of the federal Rehabilitation Act of 1973.~~

~~NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, and Part 30 (commencing with 56000), Education Code.~~

§ 61610. Emergency Epinephrine Auto-Injectors.

This article does not apply to the use of NON-PRESCRIBED emergency epinephrine auto-injectors by employees of a local educational agency which is governed by the specific provisions set forth in Education Code section 49414. TO THE EXTENT THAT ANY DISCREPANCY ARISES IN SPECIFIC CIRCUMSTANCES BETWEEN THIS ARTICLE AND THE PROVISIONS OF EDUCATION CODE SECTION 49414 REGARDING THE USE OF EMERGENCY EPINEPHRINE AUTO-INJECTORS, THE PROVISIONS OF EDUCATION CODE SECTION 49414 SHALL PREVAIL.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Sections 49414 and 49423, Education Code.

§ 612611. Applicability of this Article.

This article applies to a school district only to the extent that Education Code section 49423 creates an obligation on the part of a local education agency to provide assistance to a pupil who is required to take, during the regular school day, medication prescribed for him or her by an authorized health care provider. Beyond that, this article is exemplary.

NOTE: Authority cited: Section 49423.6, Education Code. Reference: Section 49423, Education Code.

SBE February 2003, Item 27
Medication Regulations
Summary of Written Comments Received

As of February 4, 2003, 3:00 P.M., we received 30 e-mails and four letters in response to the proposed medication regulations. A variety of concerns have been raised, some of the more frequent being:

- Fifteen people expressed support for the amendments submitted by the California School Nurses Organization;
- Ten people expressed the view that administration of medication and all medical decisions must be the responsibility a licensed school nurse;
- Eight people expressed the view that only a school nurse has the appropriate qualifications to train personnel to administer;
- Four people expressed the view that the proposed regulations should also pertain to special education students; and
- Four people expressed concern over proposed regulations governing students' self-administration of medication.

A summary of other substantive comments (by section number) follows.

600. Definitions.

The regulations should include a definition of "parent/guardian" that will address foster children, ensuring them a method of receiving medication at school.

The regulations should include a definition of "duly qualified supervisor of health," as defined in the *Education Code*, and a definition of "emergency medication."

The regulations should specify that a "duly qualified supervisor of health" may train and supervise unlicensed designated employees and that supervision shall include all the variations of supervision listed in the section.

The regulations should require the training and supervision of unlicensed staff to be documented and specify that the training include appropriate medication administration, handling and storage.

The regulations should require that unlicensed designated employees have current CPR certification if they are responsible for administering emergency medication.

601. Requirements for Prescription Medication Administration.

The regulations should require that pupils *will* receive medication when specified conditions are met.

602. Written Statement of Authorized Health Care Provider.

The regulations' requirement that a physician include the reason for the medication in the written statement may jeopardize constitutional rights of children and should be, at a minimum, required only on a case-by-case basis with parental consent.

Comments Received as of February 4, 2003, 3:00 P.M.

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The regulations should not require physicians to list every possible side effect of any medication. This is unrealistic, and it is unlikely that physicians will comply with this requirement.

The regulations should require that school nurses and anyone administering medication be made aware of potential side effects.

The regulations should require that the physician's statement include whether a student is competent to "take responsibility for carrying" medication, not just for self-administration.

The regulations should require that the physician's statement include whether the method of medication administration is by injection.

The regulations should state that prior to the first administration of a new medication or when there has been a medication change, that a duly qualified supervisor of health reviews the medication order.

The regulations as written appear to exceed the authority granted by *Education Code* sections 49423 and 49423.6.

603. Parent/Guardian Consent.

The regulations should require the school nurse to notify the physician if the parent/guardian rescinds the medication administration orders given to the school.

The regulations should state that LEAs cannot require parent/guardian to waive any rights, hold the district harmless, or agree to a particular placement as a condition of having the LEA assist the pupil with medication administration.

The regulations should require that written consent be obtained "each school year" rather than "annually," which would require tracking all through the school year for expirations.

604. Persons Authorized to Administer Medication at School.

The regulations should state that medication shall be administered by licensed or trained individuals and except for emergency medication, not allow unlicensed designated staff to administer medication that is given by injection.

The regulations *should* apply to students with Section 504 accommodation plans, but not to those with Individualized Education Plans.

The regulations should state that the parent designee cannot be an employee of the school district.

605. Pupil Self-Administration of Medications in Schools.

The regulations should not put restrictions on students self-administering medications. Students allowed to self-administer should not need to be evaluated for level of supervision required.

Comments Received as of February 4, 2003, 3:00 P.M.

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The regulations should recognize that some drugs have a "street value" and/or may be cause allergic reactions and be careful not to overlook other potential dangers of students carrying and self-administering these types of drugs.

The regulations should state that the school nurse has responsibility for determining when a student should be allowed to self-administer medication.

The regulations should limit self-administered medication to "emergency" medication as defined.

The regulations should state that the parent, physician, and/or school nurse must be consulted if the privilege of self-administration is going to be denied by the site administrator and that the decision to not allow the pupil to self-administer must be related to unsafe behavior related to medication use or administration.

606. Delivery and Storage of Medication at School

The regulations should take into account that many uninsured students can only afford to have prescriptions filled in Mexico. The regulations could require school districts to insist that a U.S. doctor sign a written acknowledgement that the student is using a foreign-dispensed medication and that this is ok with the doctor.

The regulations should specify how controlled substances are handled, including: requiring the school to obtain a list of controlled substances; requiring counting and recording of controlled substances upon arrival at school and each time they are administered; and reporting of any discrepancies.

The regulations should specify where medication must be stored and require that stored medication be kept locked to protect it from unauthorized individuals.

The regulations should require that a parent/guardian deliver medication to school.

608. Errors in Medication Administration in School

The regulations should state that mistakes in medication administration must be reported to the school administrator *and* school nurse.

610. Medication Provided Pursuant to an Individualized Education Program or Section 504 Plan.

The regulations should delete this section and replace it with more inclusive language, as it appears to exclude pupils with special needs.

612. Applicability of this Article

The regulations should delete this section since other amendments would make the administration of medication a requirement.

General Comments

- Two comments were received expressing general support for the regulations.
- One comment was received expressing general opposition for the regulations.