

Laws and Best Practices Regarding Inhaler Self-Carry

Ann O. Nichols MSN, RN, NCSN State School Health Nurse Consultant explain the components of the law and best practice standards that influence the decision-making process for students who self-carry

- Overview and components of the North Carolina 'Self-Carry' statute

- Self-Carry: what it is, and what it is not
- Importance of student skill assessment

'Self-Carry' Statute

- § 115C-375.2. Possession and self-administration of asthma medication by students with asthma or students subject to anaphylactic reactions, or both.
- Session law passed in 2005
- Local boards of education shall <u>adopt a policy</u> authorizing a student with asthma or a student subject to anaphylactic reactions, or both, to possess and selfadminister asthma medication on school property during the school day, at school-sponsored activities, or while in transit to or from school or schoolsponsored events.

Overview and components of the North

Carolina 'Self-Carry' statute

'Self-Carry' Statute

- Parameters
 - Parental authorization/release of liability
 - Health care practitioner statement,
 - authorization, order
 - School Nurse, or designee, assessment of student skill
- · Viewed as 'permission' when parameters are met

Self-Carry: what it is, and what it is not

Self-Carry: What it is not

- · Self-Carry statutes are not ...
 - a <u>requirement</u> that students automatically receive 'permission' to manage the related medications;
 - the same as having emergency medications in close proximity to the student;
 - subsitutions for required board policy and associated procedures;
 - substitutions for the presence of a supporting individual Emergency Action Plan.

Self-Carry: What it is

| Year | 2014-2015 | | | 2015-2016 | | |
|-----------------------------|-----------|--------|--------|-----------|--------|--------|
| Grade | K-5 | 6-8 | 9-12 | K-5 | 6-8 | 9-12 |
| # with care at school | 49,534 | 22,891 | 20,681 | 48,952 | 19,320 | 18,538 |
| % Self- carry* | 7.5% | 3% | 3.4% | 12.9% | 2.6% | 2.9% |

* In early years of legislation 20-22% total reported as self-carry

Importance of Student Skill

assessment

Validation of Student Ability Prior to Self-Carry (Commonly completed by School Nurse): Maturity and Skill

- The request is reviewed by the school nurse.
- The student is provided with health counseling to include review of health condition, medications, triggers, precautions.
- Assessment of student's knowledge and developmental ability to be independent with medication. Should include role play of selfadministration and when and how to obtain help when needed.

Self-carry: what it is

Upon confirmation of student maturity and skill for self-carry:

1. Review of school medication policy/procedures, disciplinary actions for sharing medication or failure to safeguard it.

2. Assure the student understands and signs a self-medication agreement.

3. Instruct the student's teacher(s), as appropriate, on the student's condition and authorization to self-carry and self-administer. This instruction may include cautions on usage and dosage of the medication

The student assessed as not ready

- Parents may not understand the independent nature of true self-carry.
- The desire to have the inhaler near-by can be accommodated without self-carry.
- Review areas of knowledge and maturity needed by student.
- Help the student and family work towards these over time.

What are self-carry challenges in your location?

References

http://www.ncga.state.nc.us/EnactedLegislation /Statutes/PDF/BySection/Chapter 115C/GS 115 C-375.2.pdf

North Carolina School Health Program Manual, Sixth Edition E2.9-E2.11

Flower, J., & Saewyc, E. M. (2005). Assessing the Capability of School-Age Children with Asthma to Safely Self-Carry an Inhaler. *The Journal of School Nursing*, *21*(5), 283-292

NC School Health Services Report Survey, 2015-

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QUESTIONS?