

LETTER TO PARENTS MEDICATION POLICY

TO: Parents/Guardian of _____
FROM: School Health Clinic
DATE: _____
SUBJECT: Medication Policy

To protect your child's safety, the clinic staff will adhere to the following medication policy. It is required that **BOTH** the parent **AND** prescriber signatures are on file before any prescription **OR** non-prescription medication (depending on the school/district policy) is administered. This includes all medications including such over-the-counter products as Tylenol, Advil, etc.

Although this may cause some inconvenience, we feel that this policy is best for the continued protection of your child, and must be followed. **If we do not have your written permission and the written permission of your prescriber, the medication will not be given.** Permission forms can be obtained by contacting the clinic staff.

In order for your child to receive any medication at school, please conform with the following:

- A written request must be obtained from the prescriber and the parent/guardian. This request must include the name of the medication, dosage, time it is given during school hours, and duration. Forms are available at the school.
- A signed Prescriber and Parent Request for the Administration of Medication at School is required in order to dispense medication.
- The medication must be in its original container and, and if an over-the-counter medication, the bottle must be new with an unbroken seal. All medications must have a fixed label which indicates the student's name, name of medication, dosage, method of administration, time of administration and time interval of dosages.
- When the empty prescription bottle is returned to you, please bring the refill to school promptly.
- The medication and the signed permission form must be brought to the school by the parent or guardian. **Students may not bring medication to school.**
- Please include a photo of your child with the permission form.
- New Request forms must be re-submitted each school year, and are **necessary for any changes in medication orders.**
- If your child is taken off medication or will no longer receive it at school, please put your request in a dated, written note as soon as possible, accompanied by a prescriber's signed order to discontinue the medication. If the medication is not picked up by parents from the health aide or school office within 30 days, it will be properly disposed of.
- Medication will not be administered without a signed order from the prescriber or Prescriber and Parent Request for the Administration of Medication at School.

Please contact the building principal or clinic staff if you have any questions. Thank you for your cooperation.

I received a copy of the 504 Procedural Safeguards for the current school year.

Parent/Guardian Signature

SECTION 504 PARENT/CHILD RIGHTS AND PROCEDURAL SAFEGUARDS

1. Your child has a right to take part in and receive benefits from public education programs without discrimination based on a disability.
2. You have the right to receive written notice prior to any action by the district in regard to the identification, evaluation, or placement of your child.
3. Your child has a right to an evaluation prior to the development of an initial § 504 plan and any subsequent significant change in placement. Your child is eligible for a free appropriate public education under § 504 of The Rehabilitation Act of 1973 if the § 504 Team determines that your child has a physical or mental impairment that substantially limits one or more major life activities, including the provision of regular or special education and related aids and services that are designed to meet the individual educational needs of the student as adequately as the needs of students without disabilities are met and that are based upon adherence to Section 504's procedural requirements. Major life activities include, but are not limited to, caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, eating, sleeping, standing, lifting, bending, reading, concentrating, thinking, communicating, working, and learning, or the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, or endocrine functions.
4. The district shall consider information from a variety of sources, including (as appropriate) but not limited to aptitude and achievement tests, teacher recommendations, physical condition, social and cultural background, adaptive behavior, medical reports, student grades, progress reports, parent observations, anecdotal reports, and test scores when making eligibility, educational, and placement decisions under § 504.
5. Eligibility decisions must be made by a group of persons knowledgeable about your child, the meaning of the evaluation data, and the placement options.
6. If eligible as disabled under § 504, your child has a right to periodic reevaluations, generally every three years, before your child's placement is terminated or significantly changed, and if otherwise determined to be necessary.
7. Your child has the right to a free appropriate public education ("FAPE"), meaning the provision of education and related services without cost to the person with a disability or his or her parents or guardians except for those fees that are imposed equally on non-disabled students or their parents.
8. Your child has a right to access facilities, services, and activities that are comparable to those provided for non-disabled students.
9. You have the right to examine educational records of your child and obtain copies at a reasonable cost.
10. With respect to actions regarding the identification, evaluation, or educational placement of your child under Section 504, you have the right to notice, an opportunity to examine relevant records, an impartial hearing with opportunity for participation by you and representation by counsel, and a review procedure.
11. If you wish to challenge the actions of the district's § 504 Team in regard to your child's identification, evaluation, or educational placement, you should file a written grievance with the district's § 504 Compliance Officer, Cari Root, at Solon City School District, 33800 Inwood Road, Solon, Ohio 44139, within 10 calendar days from the time you received written notice of the § 504 Team's action(s). A hearing will be scheduled before an impartial hearing officer selected and appointed by the district and you will be notified in writing of the date, time, and place for the hearing.
12. If you disagree with the decision of the impartial hearing officer appointed by the district, you have a right to a review of that decision by a court of competent jurisdiction.
13. You have a right to file a complaint with the United States Department of Education Office for Civil Rights (OCR) at any time. OCR may be contacted at 600 Superior Avenue, East, Suite 750, Cleveland, Ohio 44114-2611.

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