

# **MEDICATION ADMINISTRATION POLICY 2023 – 2025**

#### **RATIONALE**

#### **Child Safe Standards**

Children have the right to be safe and protected, including at school. http://www.vrqa.vic.gov.au/childsafe

Many students attending school need medication to control a health condition. It is necessary that teachers/staff (as part of their duty of care) assist students, where appropriate to take their medication. The school will ensure the students privacy and confidentiality and will exercise sensitivity towards this issue to avoid any stigmatisation.

#### **AIMS**

- Kennington Primary School will have an administration of medication procedure, which outlines the school's processes and protocols regarding the management of prescribed and non-prescribed medication to students at this school.
- The student's parent/carer may wish to supply medication to be administered at the school. To minimise the quantity of medication held at the school, it should be considered if the medication can be taken outside of the school day, for example medication required three times a day may be able to be taken before and after school, and before bed.
- Students will generally need supervision of their medication and other aspects of health care management. The school in consultation with parents/carers and the student's medical/health practitioner may consider the age and circumstances by which the student could be permitted to self-administer their medication, however this may only occur in very rare circumstances.

## **IMPLEMENTATION**

- Children who are unwell should not attend school.
- The First Aid Coordinator agrees to be the staff member responsible for administering prescribed medications to children.
- Non-prescribed oral medications (e.g. headache tablets) will only be administered by school staff when written parental/carer consent is provided and medication is in original packaging.
- All parent/carer requests for the First Aid Coordinator to administer prescribed medications
  to their child must be in writing on the form provided <u>and must be</u> supported by specific
  written instruction from the medical practitioner or pharmacist's including the name of the
  student, dosage and time to be administered (original medications bottle or container
  should provide this information).
- Requests for prescribed medications to be administered by the school 'as needed' will cause the First Aid Coordinator to seek further written clarification from the parents/carers.
- All student medications must be in the original containers, must be labelled, must have the quantity of tablets confirmed and documented, and must be stored in either the locked

- office first aid cabinet or office refrigerator, whichever is most appropriate. (Asthma medication may be an exception.)
- Consistent with our Asthma policy, students who provide the First Aid Coordinator with written parent permission supported by approval of the principal may carry an asthma inhaler with them.
- Classroom teachers will be informed by the First Aid Coordinator of prescribed medications
  for students in their charge and classroom teachers will release students at prescribed times
  so that they may visit the school office and receive their medications from the First Aid
  Coordinator.
- All completed Medication Request Forms and details relating to students, their prescribed medication, dosage quantities and times of administering will be kept and recorded in confidential official loose-leaf medications register located in the school office by the First Aid Coordinator in the presence of, and confirmed by, a second staff member.
- Students involved in school camps or excursions will be discreetly administered prescribed
  medications by the 'Teacher in Charge' in a manner consistent with the above procedures,
  with all details recorded on loose-leaf pages from the official medications register.
  Completed pages will be returned to the official medications register on return of the
  excursion to school.
- Parents/carers of students that may require injections are required to meet with the principal to discuss the matter.

#### **REVIEW CYCLE**

This policy will be reviewed as part of the 3-year cycle or more often if necessary due to changes in regulations or circumstances and will be ratified by School Council.

This policy was last ratified by School Council in May 2023 and will be reviewed in May 2025

## Appendix A

## **Medication Management Procedures**

The school has developed procedures for the appropriate storage and administration of prescribed and non-prescribed medicines to students by school staff with reference to individual student medical information.

#### Student Information

Parents and/or carers are required to keep the school informed of current medical contact details concerning students and any current medical conditions and appropriate medical history.

Every student who has a medical condition or illness has an individual management plan that is attached to the student's records. This management plan is provided by the student's parents/guardians and contains details of:

- the usual medical treatment needed by the student at school or on school activities
- the medical treatment and action needed if the student's condition deteriorates
- the name, address and telephone numbers for an emergency contact and the student's doctor

## Administration of prescribed Oral Medication

Parents/carers are required to inform the principal in writing of any prescribed medication that students need to take in school hours. Where medication is required in spontaneous situations, detailed administration instructions should be provided, for example in the case of asthma attacks. Medication Administration Permission Forms are available from the Administration Office and should be completed and signed by the parent/guardian.

All medication sent to school is to be administered by school staff and, parents/carers are required to supply medication in a container that gives the name of the medication, name of the student, the dose, and the time it is to be given.

Where medication for more than one day is supplied, it is to be locked in the storage cupboard in the school administration office.

## **Administration of Analgesics**

Analgesics are only to be given following permission of parents/carers and are to be issued by a First Aid Officer who maintains a record to monitor student intake. Analgesics are to be supplied by the parents/carers.

## **Asthma**

Asthma is an extremely common condition for Australian students. Students with asthma have sensitive airways in their lungs. When exposed to certain triggers their airways narrow, making it hard for them to breathe.

Symptoms of asthma commonly include:

- cough
- tightness in the chest
- shortness of breath/rapid breathing
- wheeze (a whistling noise from the chest)

Many children have mild asthma with very minor problems and rarely need medication. However, some students will need medication on a daily basis and frequently require additional medication at

school (particularly before or after vigorous exercise). Most students with asthma can control their asthma by taking regular medication.

## **Student Asthma Information**

Every student with asthma attending the school has a written Asthma Action Plan, ideally completed by their treating doctor or pediatrician, in consultation with the student's parent/carer.

This plan is attached to the student's records and updated annually or more frequently if the student's asthma changes significantly. The Asthma Action Plan should be provided by the student's doctor and is accessible to all staff. It contains information including:

- usual medical treatment (medication taken on a regular basis when the student is 'well' or as pre-medication prior to exercise)
- details on what to do and details of medications to be used in cases of deteriorating asthma

   this includes how to recognise worsening symptoms and what to do during an acute asthma attack
- name, address and telephone number of an emergency contact
- name, address and telephone number (including an after-hours number) of the student's doctor

If a student is obviously and repeatedly experiencing asthma symptoms and/or using an excessive amount of reliever medication, the parents/carers will be notified so that appropriate medical consultation can be arranged. Students needing asthma medication during school attendance must have their medication use; date, time and amount of dose recorded in the First Aid Treatment Book in the sick bay each time for monitoring of their condition.

## **Asthma Medication**

There are three main groups of asthma medications: relievers, preventers and symptom controllers. There are also combination medications containing preventer and symptom controller medication in the same delivery device.

Reliever medication provides relief from asthma symptoms within minutes. It relaxes the muscles around the airways for up to four hours, allowing air to move more easily through the airways. Reliever medications are usually blue in colour and common brand names include Airomir, Asmol, Bricanyl, Epaq and Ventolin. These medications will be easily accessible to students at all times, preferably carried by the student with asthma. All students with asthma are encouraged to recognise their own asthma symptoms and take their blue reliever medication as soon as they develop symptoms at school.

Preventer medications come in autumn colours (for example brown, orange, and yellow) and are used on a regular basis to prevent asthma symptoms. They are mostly taken twice a day at home and will generally not be seen in the school environment.

Symptom controllers are green in colour and are often referred to as long-acting relievers. Symptom controllers are used in conjunction with preventer medication and are taken at home once or twice a day.

Symptom controllers and preventer medications are often combined in one device. These are referred to as combination medications and will generally not be seen at school.

**Appendix B** 



**School - Medication Authority Form** 

# **Medication Authority Form**

For a student who requires medication whilst at school

This form should be completed ideally by the student's medical/health practitioner, for all medication to be administered at school. For those students with asthma, an Asthma Foundation's School Asthma Action Plan should be completed instead. For those students with anaphylaxis, an ASCIA Action Plan for Anaphylaxis should be completed instead. These forms are available from: **DET Health Support Planning Policy** 

Please only complete those sections in this form, which are relevant to the student's health support needs.

Student's Name:		Da	te of Birth: Dat	e:	
MEDICATION REQUIRED					
Name of Medication/s	Dosage (amount)	Time/s to be taken	How is it to be taken? (e.g. orally/topical/injection)	Dates	
				Start Date:	
				End Date:	
				Ongoing: □	
				Start Date:	
				End Date:	
				Ongoing: □	
MEDICATION STORAGE					
Please indicate if there are specific storage instructions for the medication:					
MEDICATION DELIVERED TO THE SCHOOL					
Please ensure that medication delivered to the school:					
☐ Is in its original package					
☐ The pharmacy label matches the information included in this form					
MONITORING EFFECTS OF MEDICATION					
Please note: School staff a	o not monito	or the effects of	f medication and will seek er	mergency medical	

assistance if concerned about a student's behaviour following medication.

# **Privacy Statement**

The school collects personal information so as the school can plan and support the health care needs of the student. Without the provision of this information, the quality of the health support provided may be affected. The information may be disclosed to relevant school staff and appropriate medical personnel, including those engaged in providing health support as well as emergency personnel, where appropriate, or where authorised or required by another law. You are able to request access to the personal information that we hold about you/your child and to request that it be corrected. Please contact the school directly or FOI Unit on (03) 9637 2670.

AUTHORISATION	
Name of Medical/Health Practitioner:	
Professional Role:	
Signature:	
Date:	
Contact Details:	

PARENT/CARER OR ADULT/INDEPENDENT STUDENT** AUTHORISATION				
Name of Parent/Carer				
Signature:				
Date:				

If additional advice is required, please attach it to this form