



Edinburgh College

Distributing

Medications

Policy

Document History

This policy is to be ratified by the School Council on April 2022

The life cycle of this policy is three years.

Rationale

Edinburgh College is responsible for the health and safety of our students. While parents or guardians have ultimate responsibility for the administration of medication and management of health conditions, schools can assist with the provision of these services. The Policy ensures that procedures are established for administering routine and emergency medication, in accordance with legal requirements.

Implementation

General

1. Parents and carers should be discouraged from providing children with medication at school unless they are acting on a Doctor's advice. Wherever it is practicable to do so and consistent with good medical practice, medication should be administered within the family setting, at home.
2. In the case of an emergency, such as in an anaphylaxis, asthma attack or diabetes incident, medications will be administered in accordance with the procedures detailed in the *Anaphylaxis Policy*, *Asthma Management Policy*, *Diabetes Management Policy*, and *First Aid Policy*.

Confidentiality

1. The College shall maintain confidentiality of all medical information, including that provided by Parents or carers, students, doctors, and that contained in medication registers.
2. To this end a Medications Register will be maintained to record all occasions when staff administer medication.
3. This register may be digital.
4. The register shall contain as a minimum:
 1. Student's name
 2. Date and time of administration
 3. Name of the medication
 4. Dosage
 5. Expiry date of the medication
 6. Method of administration
 7. Name of person administering the medication

Arranging the Medication

1. Parents or carers of children and young people who will need medication must submit a written request for the school to assist with administration of medication. The request will:
 1. describe the reasons for the medication
 2. name the medication or medications to be taken

3. inform the Office staff of any special considerations for storing the medication, such as the need for refrigeration
4. provide details of dose and times for administration
2. The medication is to be presented to the Office staff in its original container. The original pharmacy label showing the student's name, dosage, and time to be taken must be attached.
3. Parents or carers are to ensure that the medication is not out of date, or if it is, arrange for it to be replaced.
4. Parents or carers are to notify the Office staff in writing of any changes in the way medication is to be administered and advise the Office staff in writing and collect medication from the school when it is no longer required.

Storage of Medication

1. All medication, other than that approved for self-administration by the student, is to be kept in a secure place that is readily accessible when required by staff who have been trained in the process of administering medication.
2. Provisions must be made for excursions, sporting and other activities that may limit ready accessibility to the medication.
3. Consideration must be given to any specific requirements for storing medication, such as refrigeration.

Distribution of Medication

1. Medication should only be distributed by staff who have been trained in the process of administering medications.
2. Prescription medication should only be given to the student for whom it is prescribed.
3. Where practicable, the identity of the student and the nature and dosage of the medication should be checked by another adult person to ensure medication is given in accordance with directions, particularly where students are working outside the usual classroom situation, such as on excursions or at camps.
4. The use of non-prescription medication should be discouraged within the school setting. Authorisation should only be given when there is a valid reason.
5. Non-prescription medication, including analgesics, shall not be given to a child without the written permission of a parent or guardian.
6. Staff shall monitor use of non-prescription medication. Concerns regarding usage should be raised with parents or carers. Medical opinion shall be sought if the issue cannot be satisfactorily resolved.
7. Provision for camps, excursions and the like, must be considered, especially when students will be in the school's care for extended periods.
8. Where practicable, contact parents or carers before administering medications, particularly non-prescription medications.
9. When medications are required away from campus verbal permission may be sought from Parents or carers if required.

10. Contemporary management of chronic health conditions encourages students to administer their own medication, to recognise the signs and symptoms of their condition, and to participate in the full range of activities provided by the school.
11. The following procedure is to be followed for the approval of self-medication.
12. The parent or carer provides a written request, with guidelines and procedures from the medical practitioner, for the student to be responsible for administering their own medication.
13. Students approved to carry their own medication should demonstrate practices of secure storage of medication that may be potentially harmful to other students and safe disposal of injecting equipment.
14. The student and the authorised staff member shall agree on where medication is stored and how it is to be administered.
15. Conditions requiring self-administration may include:
 1. asthma
 2. cystic fibrosis
 3. diabetes, and
 4. epilepsy
16. When required, students may be assisted to take their medication. Primary school students in particular may need assistance.
17. Students should be warned that sharing medication is not permitted.
18. Unused medication should be returned to the parents or carers.
19. Teachers in charge of students (at the time medication is to be administered) are to be informed that the student needs to be medicated and release the student from class to obtain their medication.

Individual Management Plans

1. More complex health conditions may require individual management plans.
2. Plans should be reviewed annually, signed by a parent, and revised when medication and/or health status change. Teachers, Parents or carers , students, and medical practitioners, as appropriate, should be consulted in the plan's development and review.
3. The following information, provided by the medical practitioner where applicable, should be included in the plan:
 1. Telephone numbers for parents or carers and medical practitioners.
 2. Requirements - medication, dosage, when and how medication is administered.
 3. Triggers, reactions, warning signs and symptoms of a possible emergency.
 4. Instructions from a medical practitioner regarding emergency first aid treatment.
 5. Limitations or guidelines for specific activities such as swimming, sport, outdoor education, camps, and physical education.

Emergencies

1. Protocols shall be developed to respond to emergencies involving students and staff with known health conditions. Protocols should address the following:
 1. Authorised personnel know where medication is stored and to whom it belongs.
 2. The medication is readily accessible at all times.

3. Ensuring students have been correctly identified before administering medication.
4. School personnel are informed of, or can quickly find out, the correct dosage.
5. School personnel are trained in administering the medication, where necessary.
6. A process is established for who is to contact the parent, ambulance, and medical practitioner and when contact is to be made.
7. If an ambulance is called, the ambulance officer should be advised of what medication, if any, has been administered.

Warnings

The College must not:

1. Store or administer painkillers such as aspirin and paracetamol as a standard first aid strategy as they can mask signs and symptoms of serious illness or injury.
2. Allow a student to take their first dose of a new medication at school in case of an allergic reaction. This should be done under the supervision of the parent or carer, or health practitioner.
3. Allow the use of medication by anyone other than the prescribed student.
4. Note: Only in an emergency situation could this requirement be varied. For example, if a student is having an asthma attack and their own blue reliever puffer is not readily available, one should be obtained and given without delay.
5. Over-the-counter medications (including paracetamol) require a medication authority from parents or carers, even if the student is carrying or self-administering their medication.

Medication error

1. If a student takes medicine incorrectly schools must respond in the following way:
2. If required, follow first aid procedures outlined in the:
 1. student health support plan, or
 2. anaphylaxis management plan
3. Ring the Poisons Information Line 13 11 26 and give details of the incident and student.
4. Act immediately upon their advice, such as calling an ambulance (on 000) immediately if you are advised to do so.
5. Contact the student's parents or carers or the emergency contact person to notify them of the medication error and action taken.
6. Review medication management procedures at the school in light of the incident.

Training

1. Where necessary, teachers or other staff must be provided with specific training in the administration of medications before assisting with medication in these circumstances or to assist with the management of health conditions.
2. Specific training in the administration of medications must be provided to staff who lead extended off campus events such as camps.

Ref: <https://www2.education.vic.gov.au/pal/medication/policy>

Related Documents:

- Annual Risk Management Checklist
- Anaphylaxis Management Plan
- Communication Plan
- Ministerial Order 706
- WH&S Action Management Plan