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## Medication Administration Policy

Date: March 2022

Next Review: March 2025

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### 1. Preamble

- 1.1. As a caring Christian community that considers individuals to be uniquely created in the image of God, Swan Hill Christian School (SHCS) has a responsibility and desire to provide for the care, safety and welfare of members of the school community, within the reasonable limits of its capacity to do so.
- 1.2. SHCS has a specific duty of care for the wellbeing of students whereby the risk of harm is minimised and students are able to function within a physically and emotionally secure, supportive and productive environment. This encompasses the health and medical needs of students. Such duty of care may, at times, extend beyond the school day and school premises.
- 1.3. In order to fulfil SHCS's responsibilities to care for the needs of students, the school endeavours to make proper arrangements to administer medication to those students who are ill or who have specific medical conditions requiring medication.
- 1.4. For the safety and welfare of the whole school community, SHCS has a duty of care to ensure that the risk of harm is minimised with ongoing risk assessments in place and adequate training for staff members.
- 1.5. Related SHCS policies include *Health & Wellbeing (Student) Policy*, *Anaphylaxis Management Policy*, *Asthma Management Policy*, *Diabetes Management Policy* and *Emergency and Critical Incident Management Policy*.

### 2. Definitions

- 2.1. *Duty of care* refers to the requirement that the school and staff members take all reasonable care to provide a suitable and safe environment for students, and to take reasonable measures to protect students from risk of injury that should have been reasonably foreseen. Safety measures will differ dependant on the age, health and location of the student.
- 2.2. *Medication* refers to a substance taken into the body to relieve symptoms, treat or cure a medical condition or illness. A common route by which medication is taken into the body is orally (e.g. tablet, capsule, liquid) but it can also be administered in other forms, including topically, inhaled or injected.
- 2.3. *First Aid* as referred to in this policy relates to emergency treatment and support provided to those who suffer injury or illness, while at school or participating in an approved school activity and incorporates basic life support.
- 2.4. A *First Aid Officer* is a staff member appointed by the Principal to provide first aid in the event of illness and injury, monitor students according to their condition and ensure that relevant injury and/or incident report forms are completed.
- 2.5. *Parents* in this policy refers to a student's parent or legal guardian.
- 2.6. *Medical Practitioner* refers to a General Practitioner or other specialist doctor.

### 3. **Policy**

#### 3.1. **Authority to Administer**

- 3.1.1. Parents have primary responsibility for their child's medical conditions and related medication administration.
- 3.1.2. Parents are responsible for providing accurate and up-to-date information about their child's medical conditions and management needs, and also for authorising the administration of medication for their child's specific acute or ongoing medical condition.
- 3.1.3. In order for prescription and non-prescription medication to be administered to a student while at school or while attending a school-related activity, a *Medication Administration Form* must be completed by a parent, detailing the name, purpose and frequency of the medication. Parents are required to bring the medication and form to the office for safe storage. Note: this includes medications such as antihistamines, paracetamol and antibiotics.
- 3.1.4. Parents may give approval for their child to self-administer medication dependant on their age, capabilities and competence. Such self-medication requires written approval by the Principal and the student's medical practitioner.
- 3.1.5. In the case of an emergency, authorisation to administer medication may be given verbally by a parent or, if a parent cannot be contacted, by a registered medical practitioner or emergency service. Such authorisation records will be retained within the student's medical records.
- 3.1.6. The school will ensure that information privacy principles are applied when collecting, using, retaining or disposing of student health information, including that of medication administration requirements.

#### 3.2. **Administration and Documentation of Medication**

- 3.2.1. Staff are responsible for administering only the medication that has been authorised by a student's parent and/or medical practitioner. Staff are to administer medication within the limits of their skill level, expertise and training.
- 3.2.2. Teachers, including casual relief teachers, may be required to administer authorised medication to a student in an emergency situation within the limits of their competence level or according to a student's medical management plan, after sufficient training.
- 3.2.3. Upon advice from the Department of Education and Training, the school will no longer administer analgesia (e.g. paracetamol, aspirin) to students as a first aid strategy. Analgesia used in this way can easily mask signs and symptoms of underlying illness or injury. However, as with other medications, parents may provide the school with analgesia to be administered to their child while at school for specific medical concerns.
- 3.2.4. All medications must be removed directly from the original packaging at the time that such medication is to be administered to a student. If medication is loose, or does not come directly from the packaging, it is not to be administered but either returned to the parent or disposed of safely.
- 3.2.5. In the case of an emergency, such as anaphylaxis, asthma attack or diabetic-related hypoglycaemia, appropriate first aid measures will be taken, which may include the administration of medication, in lieu of emergency services arrival. See *Anaphylaxis Management Policy*, *Asthma Management Policy* and *Diabetes Management Policy*.

- 3.2.6. Medication is to be administered only by those authorised to do so, ensuring that the correct medication is administered to the correct student in the correct dose at the correct time using the correct method.
- 3.2.7. Once medication has been administered by a member of staff, details must then be correctly documented and recorded in the student's file.
- 3.2.8. Students who have been authorised by their parents and/or medical practitioner to self-administer their own medication (e.g. Ventolin inhaler, insulin) must do so responsibly and in accordance with school procedure. If they are well enough to do so, the student will need to attend sickbay if the medication has not been effective.
- 3.2.9. If a staff member needs clarifying direction for a specific medication, they may contact a relevant hospital or pharmacy, while ensuring that they do not disclose identifying information of the student involved.
- 3.2.10. It is recommended that parents administer medication to their own child before or after school wherever possible.
- 3.2.11. The privacy and confidentiality of a student being administered medication, as far as practicable, will be protected as a means to reduce or avoid stigmatisation.
- 3.2.12. Staff members are not to administer the first dose of a new medication to a student in case of an allergic reaction. Initial doses should be supervised by parents or health professionals.
- 3.2.13. Staff members are not to administer medication to any student other than the student named on the prescribed medication packaging and in accordance with the *Medication Administration Form*. The only exception to this expectation is in a life-threatening emergency such as a student requiring Ventolin during an asthma attack when their own puffer is inaccessible.

### 3.3. **Storing Medication**

- 3.3.1. Parents are required to provide the school with the required medication for their child in the original packaging, including that of any paracetamol, antihistamines or other over-the-counter medication that may be required for specific medical concerns while at school. Medication is to be within its expiry date and the minimum amount possible for adequate administration is to be stored by the school, unless it is ongoing medication.
- 3.3.2. Medication is to be stored in accordance with the medication's written instructions. For instance, some medications are to be refrigerated and Schedule 8 medications are to be locked away.
- 3.3.3. Medication is to be stored safely and securely and only accessible by those staff members responsible for administering the medication to the student. Exceptions apply where a medication is required for emergencies (e.g. adrenaline auto-injector, Ventolin, insulin), with such medications to be stored in a safe but easily accessible location.
- 3.3.4. Medication that is not required for emergencies (e.g. adrenaline auto-injector, Ventolin) is not to be stored in first aid kits or within classrooms, unless otherwise required and documented. Exceptions to this may include first aid kits that are routinely taken on camps or excursions in more remote locations.

- 3.3.5. Where feasible, the school will store a student's self-administered medication but, where a student is permitted to carry their emergency medication in their school bag to and from school and while at school, the Principal will consider whether the student needs immediate access to their medication, the storage requirements of the medication and the risks of unsafe access to other students.
- 3.3.6. Schedule 8 medications (e.g. Ritalin) must be kept locked in the office or sickbay. All other medications shall be kept securely in sickbay medication cupboards that are not to be accessible to students while they are in the sickbay for treatment or observation.
- 3.3.7. Medication that has reached its expiry date will either be returned to the student's parents for disposal and replacement.

#### **3.4. Medication Error**

- 3.4.1. In the event that a student has taken medication incorrectly, staff members are to take the following action:
- 3.4.2. If relevant, follow any directions noted in the Student Health Support Plan and/or Anaphylaxis Management Plan.
- 3.4.3. Call the Poisons Information Line on 13 11 26 and give accurate details of the student and the incident.
- 3.4.4. Immediately act on advice given, such as call 000 and request an ambulance.
- 3.4.5. Contact the student's parents or emergency contact person when safe to do so and notify them of the medication incident and the actions taken.
- 3.4.6. Review the medication management and administration procedures in respect to the incident.

#### **3.5. Medication Administration at Camps, Excursions and Other School-Approved Activities**

- 3.5.1. It is a requirement that relevant staff members are aware of all medical conditions and medication requirements that students may have prior to any camps, excursions or other school-approved activities.
- 3.5.2. At each camp, excursion or other school-approved activity, there should be sufficient staff members to care for the needs of the students attending. Staff members will be appropriately trained and qualified to administer first aid as necessary and will have appropriate first aid supplies for immediate use in an emergency. See Camping and Excursion Policy.
- 3.5.3. Parents are required to complete the *Camps and Excursions Medication Consent form* prior to their child attending a school camp or excursion. First aid kits that are taken to camps or excursions may also contain medication and/or medicated ointment that may require additional parental consent in case the medication is required for an injury, illness or other medical emergency.
- 3.5.4. Parents are responsible for providing a sufficient quantity of the required medication in the original packaging, within its expiry date, for the duration of a camp or excursion.
- 3.5.5. Staff members are responsible for ensuring that medication is stored safely and according to the medication storage requirements, and for ensuring that medication is not accessible to students while attending camps or excursions, unless otherwise arranged and documented.

- 3.5.6. Staff members supervising a camp or excursion are responsible for administering a student's medication (unless otherwise approved and documented by the Principal for a student to self-administer) at the required time, and for ensuring that accurate documentation is completed.
- 3.5.7. Medication forms mentioned above are to be returned to the office immediately after the conclusion of a camp or excursion.
- 3.5.8. Parents of students with specialised medical needs may be required to meet with supervising teachers prior to the commencement of a camp or excursion in order to ensure that information regarding the administration of medication is accurate and thorough.
- 3.5.9. There may be instances when a parent is required to attend a camp or excursion for the safety of their child and to carry out the medication administration requirements throughout. This may be determined by the Principal, parents and student involved.