



DISTRIBUTION OF MEDICATION POLICY

ROSANNA
PRIMARY SCHOOL

POLICIES

This policy has been developed by members of School Council.

Date written:	Mar 2015	Date reviewed:	2017
School Council Ratified:	June 2017	Next review:	2020

PURPOSE

- Our 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 when taking medication and with 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.

POLICY STATEMENT

We recognise that:

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

IMPLEMENTATION

- All medications, including prescription and non-prescription medication (including analgesics, such as paracetamol and aspirin and other medications which can be purchased over the counter without a prescription) are to be administered by school personnel following the processes and protocols set out in the Medication Management Procedures (**see Appendix A**).
- In order to ensure that the interests of staff, students and parents/guardians/approved persons are not compromised, medication will only be administered with explicit written permission from parent/guardian/approved person, or in the case of an emergency, with permission of a medical practitioner.
- When administering prescription medication on behalf of parent/carers, the written advice received must be supported by specific written instructions on the original

DISTRIBUTION OF MEDICATION POLICY

medication bottle or container, such as that on the pharmacist's label, noting the name of the student, dosage and time to be administered. Analgesics can mask signs and symptoms of serious illness or injury and will not, therefore, be administered by the school, as a standard first aid strategy. Therefore analgesics such as aspirin and paracetamol will not be stored in the school's first aid kit.

- The principal (or nominee) administering medication needs to ensure that:
 - the correct child receives medication
 - the child has the correct medication
 - the medication is given in the correct dose
 - the medication is given by the correct means (for example, oral or inhaled)
 - the medication is given at the correct time
 - written observations are made when administering medication. The child's response to the medication is documented and further action will be taken if necessary
 - written permission to administer medication has been received from the child's parents/guardians/approved persons or a medical practitioner
- The principal or their nominee will inform teachers of those students in their charge who require medication to be administered at the school. The teachers may be required to release students at prescribed times so they may receive their medications from the principal or nominee.
- The school register will be completed by the person administering the taking of medication.
- The school, in consultation with parents/carers and the student's medical/health practitioner, will consider the age and circumstances by which the student could be permitted to self-administer their medication.
- Ideally, medication to be self-administered by the student should be stored by the school. However, where immediate access is required by the student, such as in the case of asthma, anaphylaxis, or diabetes, medication must be stored in an easily accessible location.

Note:

It is at the principal's discretion to agree for the student to carry and manage his/her own medication.

EVALUATION AND REVIEW

The Rosanna Primary School Distribution of Medication Policy will be reviewed annually or more often if necessary due to changes in regulations or circumstances as per School Council Policy. School Council will evaluate its relevance in line with DET guidelines and community expectations as represented by parent members on School Council.

REFERENCES

- DET Medication Policy
- DET Anaphylaxis Policy
- DET Health Support Planning Policy

<http://www.asthmaaustralia.org.au/>

DISTRIBUTION OF MEDICATION POLICY

RELATED DOCUMENTS

Policy

Student Engagement and Inclusion Policy
First Aid Policy
Anaphylaxis Policy
Care Arrangements for Ill Students Policy

APPENDICES

Appendix 1: Medication Management Procedures
Appendix 2: Medication Authority Form

**This document can be found at:
USER:/Policies/Ratified Policies**

DISTRIBUTION OF MEDICATION POLICY

APPENDIX 1

MEDICATION MANAGEMENT PROCEDURES

Our 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 guardians 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/guardians 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/guardians 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/guardians 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.

DISTRIBUTION OF MEDICATION POLICY

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 – Action Plan

- Every student with asthma attending the school has a written Asthma Action Plan, ideally completed by their treating doctor or paediatrician, 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. This 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 –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 first aid room each time for monitoring of their condition.

DISTRIBUTION OF MEDICATION POLICY

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 such as, salbutamol and tebutaline sulfate, 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.

DISTRIBUTION OF MEDICATION POLICY

APPENDIX 2

Dear Parent / Guardian,

Please note that this form must be completed **and signed** by you, the student's parent/guardian, therefore we will not accept forms returned to us via email. This form should be handed to your child's class teacher or the school office with the medicine in a clearly marked container.

Thank you for your cooperation.

MEDICATION ADMINISTRATION INSTRUCTIONS	
Student's Name: _____	Grade: _____
Name of Medication: _____	
Reason for medication: _____	
Dose: _____	
Period of time within which medication is to be given (Dates): _____	
Time/s it is to be given: _____	
How medication is to be administered: Supervision required	<input type="checkbox"/>
Student Independently Administered	<input type="checkbox"/>
Parent / Guardian Signature: _____	
Date: _____	