



BLACKBURN PRIMARY SCHOOL

MEDICATION DISTRIBUTION POLICY

RATIONALE

Many students attending school need medication to control a health condition. It is necessary that teachers (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.

GUIDELINES

- Our school has established this administration of medication policy to outline the school's processes and protocols regarding the management of prescribed and non-prescribed medication to students at our school.
- The student's parent/carer may request medication 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.

PROCEDURES

- All medications, including prescription as well as non-prescription medication, are to be administered by school personnel following the processes and protocols set out in this Medication Distribution Policy. 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.
- 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.
- Parents of any student who has a medical condition or illness should communicate with the school to ensure their child has an individual management plan. 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.
- Parents/guardians are required to inform their child's teacher 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.
- All medication sent to school is to be administered by school staff.

- 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.
- When administering prescription medication on behalf of parent/carers, the written advice received must be supported by specific written instructions on the original medication bottle or container, such as that on the pharmacist's label noting the name of the student, dosage and time to be administered. The first dose of a new medication should not be taken at school in case of an allergic reaction. Instead, it should be done under the supervision of the family of health practitioner.
- The school will not: store or administer analgesics for students such as aspirin and paracetamol as a standard first aid strategy as they can mask signs and symptoms of serious illness or injury.
- Where medication for more than one day is supplied, it is to be stored securely and appropriately (such as refrigerated) to minimise risk to others. It should be stored in a place only accessible by staff who are responsible for administering the medication. It should be stored away from the classroom and any first aid kits. Asthma medication should be provided to the school by parents/carers in conjunction with a written Asthma Action Plan, ideally completed by their treating doctor or pediatrician, in consultation with the student's parent/carer.
- Anaphylaxis medication should be provided to the school by parents/carers in conjunction with an ASCIA Action Plan for Anaphylaxis and agreed Anaphylaxis Management Plan.
- The principal (or nominee) administering medication must ensure that:
 - the student receives;
 - a. the correct medication;
 - b. in the correct dose;
 - c. via the correct method (such as orally or inhaled);
 - d. at the correct time of day;
 - e. a log is kept of the medicine administered; and
 - f. Medication Authority Form (**Appendix A**) has been completed.
- 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 medication register, kept in the office, 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.
- It is at the principal's discretion to whether a student can carry and manage his/her own medication.

LINKS AND APPENDICES (including processes related to this policy)

Links which are connected with this policy are:

- [DET Medication Policy](#)
- [DET Anaphylaxis Policy](#)
- [DET Health Support Planning Policy](#)
- [Health Care Needs](#)
- [DET Specific Condition Support](#)
- [SPAG - Asthma](#)
- [SPAG - Asthma First Aid Kits](#)

Appendices which are available to staff and may be used with this policy are:

- Appendix A: Medication Authority Form

RATIFIED BY SCHOOL COUNCIL

DATE: October 2016

Date	Version Number:	Update information	Next Review:
25 March 2014	1.0	N/A	June 2016
October 2016	2.0	Review in line with Department guidelines on administration of medicines. Department name change.	2018

Appendix A
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.

Name of School: Blackburn Primary School

Student’s Name: _____ Date of Birth: _____

Medic-Alert Number (if relevant): _____ Review date for this form: _____

Please Note: wherever possible, medication should be scheduled outside the school hours, e.g. medication required three times a day is generally not required during a school day: it can be taken before and after school and before bed.

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: <input type="checkbox"/>
				Start Date:
				End Date:
				Ongoing: <input type="checkbox"/>
				Start Date:
				End Date:
				Ongoing: <input type="checkbox"/>

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 *do not* monitor the effects of medication and will seek emergency 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 or below:

Asthma Management Form

The following confidential information is required to assist in the proper management of a child's asthma, if such help is needed. Please complete and attach to the Medical Consent form. For more information on Asthma see [section 4.5.10.3 of the Victorian Government Schools' Reference Guide](#). Further information is available from the Asthma Foundation www.asthma.org.au.

Student's name:

School:

Usual signs of asthma: Wheezing Chest tightness Coughing Difficulty breathing
Difficulty speaking Other

When completing this form please seek the advice of the asthmatic's doctor if necessary.

1. Usual maintenance regime or medical program followed:

Name of Medication When and how much?	Method (eg. Puffer & spacer, turbohaler)
--	---

Does the child require assistance to take their medication? Yes No

2. Peak flow readings: BestCritical(bring own peak flow meter)

3. Signs of worsening asthma: Wheezing Chest tightness Coughing Difficulty breathing Difficulty speaking Other:

Medication and treatment to be used during worsening asthma:

4. Medication and treatment to be used during crisis situations:

See Asthma First Aid Plan attached on page 2.

5. List any known asthma trigger factor(s):

6. Has the person been admitted to hospital due to asthma in the past 12 months? Yes No

7. Has the person been on oral cortisone for asthma within the past 12 months? (e.g. Prednisolone, Cortisone, Betamethasone etc) Yes No

8. Has the person ever suffered sudden severe asthma attacks requiring hospitalisation? Yes No

Important Notes

If you have answered “yes” to questions 6, 7, or 8 then the decision for the person to participate rests with the child’s doctor. The process in such situations is as follows:

- the person's doctor or parents/guardians (if a student) may contact the school Principal for further information on the program and support available;
- a letter from the student's doctor, stating the doctor's decision must accompany this form.

I declare that the information provided on this form is complete and correct.

Parent/guardian:

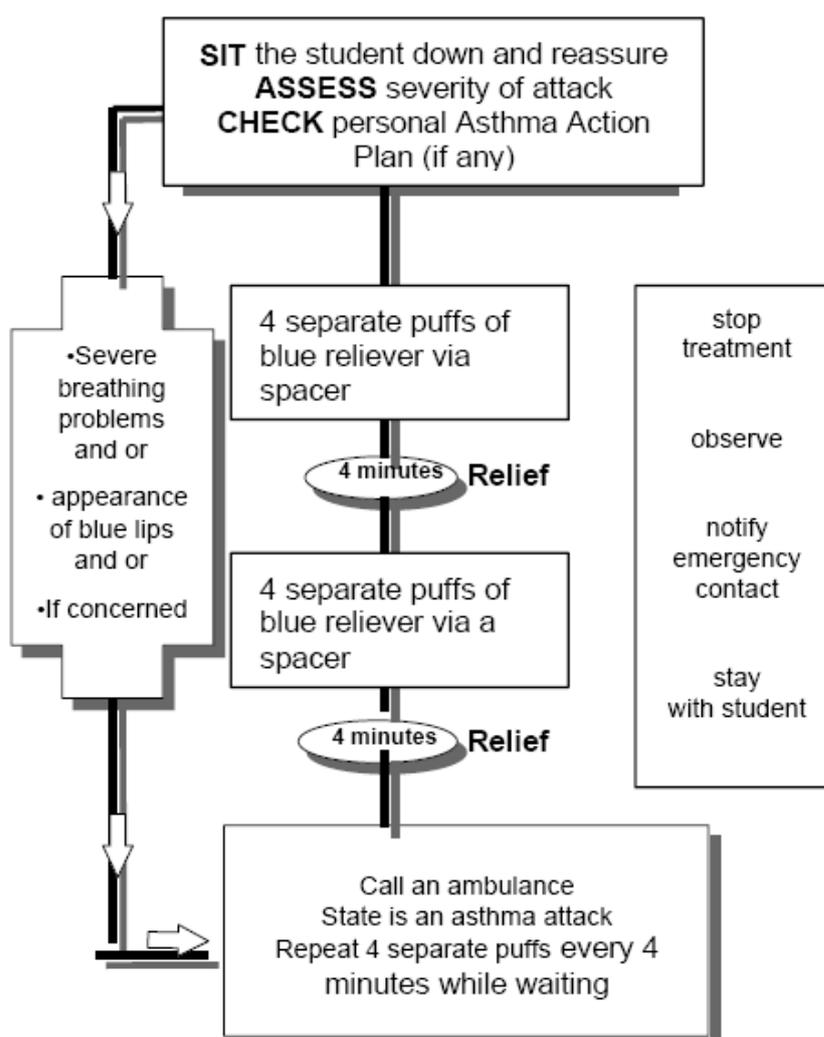
Phone contact(s):

OR

Signature:

Date:

Asthma First Aid Plan



From the Victorian Government Schools' Reference Guide Section 4.5.7.8