



## Medicines in School Policy

### INTRODUCTION

This document outlines the operational management and safety considerations of medicines brought into Sawyers Valley Primary School.

### LINKED POLICIES

This policy should be read in conjunction with the following policies:

- Whole School Drug Education Plan;
- Sawyers Valley Primary School Health and Wellbeing Policy; and
- Department of Education Student Health Care Policy.

### RATIONALE

Sawyers Valley Primary School recognises that in terms of the administration of medication:

- Some students require long term medication for control of chronic medical conditions;
- Some students need short term medication for management of acute illness or infection;
- Some students require occasional analgesia, decongestants or antihistamine;
- Students may require medication during excursions or camps;
- Medications must be stored appropriately, as per the pharmacist's recommendations;
- When medication is given, written records of this administration of medicine must be kept.

### LONG TERM ADMINISTRATION OF MEDICATION

Long-term medication is prescribed, or non-prescribed, medication that a student is required to take during school hours in response to an ongoing medical condition. Instructions and authorisation for the administration of long-term medication will be recorded in the student's health care plan.

#### Procedure:

1. Parents/carers to complete Student Health Care Summary, with the school, for child with long term medical condition;
2. Parents/carers provide signed, Health Care/Action Plan from the child's medical practitioner;
3. Parents/carers to supply medication, devices, supports etc. as per the Health Care/Action Plan;
4. Parents/carers and school staff to be aware of shelf life and expiry date and replace medication supply before expiry;
5. Parents/carers to inform the School Officer/Medical Officer of changes in medical condition or medication;
6. Enter details of medication administered/treatment provided in record log;
7. Where administration of prescription medicines/procedures requires technical or medical knowledge, then individual training will be provided to staff.

### SHORT TERM ADMINISTRATION OF MEDICATION – OCCASIONAL ILLNESS

Parents/carers may request school staff to administer prescribed, or non-prescribed, medication to students for a short period of time when their child has a condition that does not require a long-term health care plan.

#### Procedure:

1. Parents/carers collect *Administration of Medication* form from School Officer/Medical Officer
2. Complete form with the appropriate instructions;
3. Take form to class teacher, along with the supply of medication to be administered (non-Schedule 4 and non-Schedule 8 drugs only).
4. Medication must be provided in its original packaging with the student's name and required dosage clearly indicated;
5. Enter details of medication administered/treatment provided in record log.



## **STUDENT SELF-ADMINISTERING OF MEDICATION**

The common law duty of care does not extend to administering prescribed medication to students who are reasonably able to self-administer. School staff assist students who self-administer medication to do so safely, with respect to the specific student's health care plan or needs and the type of medication involved. Details of medication administered/treatment to be recorded as described previously. Students receive supervision to self-administer by school staff if deemed age appropriate or necessary because of the nature of the medication involved (Restricted Schedule 4 and Schedule 8 drugs).

## **EMERGENCY ADMINISTRATION OF ADRENALINE AUTO-INJECTOR (EPIPEN)**

The emergency administration of an adrenaline auto-injector does not require parent permission. Staff administering an adrenaline auto-injector in an anaphylaxis emergency without parent permission has explicit legal protection.

**A student experiencing an anaphylaxis emergency should receive treatment using his/her own auto-injector device.**

Situations where the school provided devices could be used are:

- When a student who has not been previously diagnosed, is experiencing an anaphylactic reaction for the first time as he/she will not have a prescribed adrenaline auto-injector available;
- When a student with a prescribed adrenaline auto-injector requires a second dose; and
- In an emergency, when a student with a prescribed adrenaline auto-injector does not have his/her medication available.

Procedure for students with prescribed adrenaline auto-injectors:

- Adrenaline auto-injector supplied by parents of students for whom one has been prescribed;
- Adrenaline auto-injector stored in bag clearly labelled with child's name and class in unlocked cupboard in medical room or as stated in child's Action Plan
- School Officer/Medical Officer regularly checks and records state of adrenaline auto-injectors, including temperature checks;
- When an adrenaline auto-injector needs to be removed from the school site (e.g. excursion) classroom teacher ensures adrenaline auto-injector is packed to take with the student in the insulated back pack provided;
- When an adrenaline auto-injector is taken on camp with the student, the teacher in charge ensures correct management of the adrenaline auto-injector for the camp's duration and its safe return to the medical room when back at school.

## **EXCURSION/CAMPING MEDICATION**

Teaching staff are responsible for:

- Informing parents/carers of excursion/camp details in written format and to gather information about any specific medical needs (Medical Form);
- Ensuring medical information collected is treated and stored in a manner that will not betray student confidentiality;
- Taking all the medication related to individual Action Plans for students with medical needs;
- Providing secure storage (locked) of Schedule 4 or Schedule 8 Drugs;
- Assembling a basic first aid kit for each excursion, sporting event or camp to deal with minor accidents and illness.

Parents/Carers are responsible for:

- Informing the School Officer/Medical Officer about changes in medical condition or medication.
- Providing all medication the student may need while on an excursion or away at camp;
- Ensuring all medication is clearly labelled.



## STORAGE OF MEDICATION

- Medications are stored safely and in accordance with the pharmacy label;
- Where indicated, medication is stored in refrigerator or locked cupboard (if Schedule 4 and Schedule 8 Drugs);
- Medications required on an immediate basis, (e.g. adrenaline auto-injector or asthma reliever medication related to student Action Plans) are stored in unlocked cupboard in medical room or as stated in child's Action Plan;
- The school provides adrenaline auto-injectors (EpiPen) and asthma puffers for emergency use. These are stored in unlocked cupboard in Medical Room. These are included in First Aid kits taken on excursions and camps;
- First Aid kits containing medications required for sporting events, camps or excursions will be stored in the Medical Room.

### Schedule 4 and Schedule 8 Drugs

Under the *Poisons Act 1964*, Schedule 4 drugs (often used for seizure management) and Schedule 8 medications such as some used for ADHD, are restricted drugs. Restricted drugs are to be stored in a locked cupboard separately from all other non-Schedule 4 and non-Schedule 8 drugs.

Documentation for recording the short or long term administration of restricted drugs includes the amount of medication provided by parents, the amount, dates and times it is administered at school and the amount, if any, returned to parents. A regular inventory is made of all restricted Schedule 4 and Schedule 8 drugs.