MEDICATION

NARANGA SCHOOL POLICY

Rationale:

 Teachers and schools are often asked by parents to administer medication for their children while at school. It is important that these requests are managed in a manner that is appropriate, ensures the safety of students, and fulfils the duty of care of staff.

Aims:

- To ensure the medications are administered appropriately to students in our care.
- To ensure a safe school environment by following relevant occupational health and safety guidelines.

Implementation:

- Children who are unwell should not attend school.
- The First Aid Officer has agreed to be the staff member responsible for administering prescribed medications to children.
- Non-prescribed oral medications (eg: head-ache tablets) will not be administered by school staff until student enrolment forms are received and parents have signed giving staff permission.
- All parent requests for the school first aid officer to administer prescribed medications to their child must be in writing on the form provided <u>and must be</u> supported by specific written instruction from the medical practitioner or pharmacist's including the name of the student, dosage and time to be administered (original medications bottle or container should provide this information).
- All verbal requests for children to be administered prescribed medications
 whilst at school must be directed to the school first aid officer, who in turn, will
 seek a meeting or discussion with parents to confirm details of the request and
 to outline school staff responsibilities.
- Requests for prescribed medications to be administered by the school 'as needed' will cause the school first aid officer to seek further written clarification from the parents.
- All student medications must be in the original containers, must be labelled, must have the quantity of tablets confirmed and documented, and must be stored in either the locked office first aid cabinet or refrigerator, whichever is most appropriate.
- Classroom teachers will be informed by the school first aid officer of prescribed medications for students in their charge, and classroom teachers will release students at prescribed times so that they may visit the school sick bay and receive their medications from the school first aid officer.
- All completed Medication Request Forms and details relating to students, their prescribed medication, dosage quantities and times of administering will be kept and recorded in a confidential official loose-leaf medication register

- located in the school sick bay by the school first aid officer in the presence of, and confirmed by, a second staff member.
- Students involved in school camps or excursions will be discreetly administered
 prescribed medications by the 'Teacher in Charge' in a manner consistent with
 the above procedures, with all details recorded on loose-leaf pages from the
 official medications register. Completed pages will be returned to the official
 medications register on return of the excursion to school.
- Parents/carers of students that may require injections are required to meet with the principal and school first aid officer to discuss the matter.

Evaluation:

• This policy will be reviewed as part of the school's review cycle.

.,,		
This policy was last ratified by School Council in	March 2014	



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 section 4.5 *Student Health* in the Victorian Government School Reference Guide: www.education.vic.gov.au/referenceguide. Please only complete those sections in this form which are relevant to the student's health support needs.

udent's Name:			Date of Rirth:		
tudent 5 Name.			Date of Birtin.		
ledicAlert Number (if rele	vant):	R	Review date for this form:		
Please Note: wherever possible day is generally no			the school hours, e.g. med aken before and after scho		
Medication required:					
Name of Medication/s	Dosage (amount)	Time/s to be taken	How is it to be taken? (eg orally/ topical/injection)	Dates	
				Start date: / /	
				End Date: / /	
				□ Ongoing medication	
				Start date: / /	
				End Date: / /	
				□ Ongoing medication	
				Start date: / /	
				End Date: / /	
				□ Ongoing medication	
				Start date: / /	
				End Date: / /	
				□ Ongoing medication	
1edication Storage ease indicate if there are specific sto	rage 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.
Self-management of medication
Students in the early years will generally need supervision of their medication and other aspects of health care management. In line with their age and stage of development and capabilities, older students can take responsibility for their own health care. Self-management should follow agreement by the student and his or her parents/carers, the school and the student's medical/health practitioner.
Please advise if this person's condition creates any difficulties with self-management, for example, difficulty remembering to take medication at a specified time or difficulties coordinating equipment:

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 96372670.

<u>Authorisation:</u>
Name of Medical/health practitioner:
Professional Role:
Signature:
Date:
Contact details:
Name of Parent/Carer or adult/independent student**:
Signature:
Date:

If additional advice is required, please attach it to this form

^{**}Please note: Adult student is a student who is eighteen years of age and older. Independent student is a student under the age of eighteen years and living separately and independently from parents/guardians (See Victorian Government Schools Reference Guide 4.6.14.5).