

## PROCEDURE: Medication to Students

### 1. PURPOSE

This procedure details the specific requirements and processes Brisbane Catholic Education schools must comply with to reduce the risks associated with the administration of medication to students for:

- Prescription medication (included scheduled drugs, complex and long-term medication)
- Paracetamol
- Emergency medications
- Non-Prescribed medication (including over the counter)

This procedure applies during school hours and all school activities. Such activities include excursions, camps, sporting events and international travel.

### 2. RESPONSIBILITIES

BCE roles and responsibilities for managing workplace health and safety risks is outlined in the below table:

Role	Responsibilities
Senior Leadership, Principals, Managers	<ul style="list-style-type: none"> <li>• Ensure that the school seeks information from parents about their child having a health condition that requires medication for its management.</li> <li>• Contact the parents if the enrolment form or regular updates indicate that the student has a health condition that puts them at risk and arrange to meet.</li> <li>• Provide the necessary documents to the parents at the meeting and discuss how the school will ensure the safety of their child through the implementation of a student's individual health care plan.</li> <li>• Conduct an assessment to identify potential sources risk.</li> <li>• Consult with parents, relevant staff and the student's when developing the individual health care plan.</li> <li>• Ensure that the school has obtained copies of completed and signed documents from the parents in a timely manner.</li> <li>• Ensure all parts of the health care plan are completed. Consider excluding the student from the school until the health care plan is completed.</li> <li>• Discuss regularly relevant parts of a student's individual health care plan with staff including strategies for avoiding risk and any relevant emergency action plans.</li> <li>• Identify and provide training to nominated staff that are responsible for the care of students.</li> <li>• Ensure that suitably trained staff accompany students on school trips.</li> <li>• Ensure that medication is regularly checked and not past its expiry date or otherwise damaged.</li> <li>• Inform all staff that records related to the management of health conditions remain confidential.</li> <li>• Ensure that medication is suitably stored.</li> <li>• Review annually the individual health care plans.</li> <li>• Ensure that students at risk are given every opportunity to participate in a full range of school activities</li> </ul>

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Role	Responsibilities
Staff responsible for the care of students who have a health condition requiring medication	<ul style="list-style-type: none"> <li>• Know the identity of students who have a health condition.</li> <li>• Attend relevant training relating to management of health conditions, such as the use of the Epi-Pen.</li> <li>• Follow the strategies for avoiding risk as outlined in a student's individual health care plan.</li> <li>• Implement the emergency action plan in the event of a student suffering an emergency event such as an anaphylactic reaction.</li> <li>• Record every occasion when they administer or assist in the administration of medication to a student.</li> <li>• Plan ahead for special class activities ensure that the risk is minimised.</li> <li>• Be available and attend school trips involving a student with a health condition.</li> <li>• Know where the student's medication is kept and check regularly to ensure that they are not past their expiry date or otherwise damaged.</li> <li>• Avoid the use of food treats in class as rewards, as they may contain hidden allergens.</li> <li>• Be aware of hidden allergens in foods and traces of allergens when using items such as egg or milk cartons in art or cooking classes.</li> </ul>
All staff	<ul style="list-style-type: none"> <li>• Know the identity of students who have a health condition.</li> <li>• Participate in discussions relating to management of student health conditions</li> <li>• Ensure that at risk students are given every opportunity to participate in a full range of school activities.</li> <li>• Know where the emergency medication is stored.</li> </ul>
Parents of a student requiring medication	<ul style="list-style-type: none"> <li>• Inform the school principal of the health needs of the child upon enrolment and whenever they change.</li> <li>• When requested by the principal, assist in the preparation of the individual health care plan.</li> <li>• Provide completed medication administration form and the emergency action plan to the school when requested.</li> <li>• Provide the equipment and consumables, including medication (for example, Epi-Pen), for carrying out emergency treatment as specified in the student's emergency action plan.</li> <li>• Ensure that the medication provided is not out of date and is labelled clearly with the student's name and dosage information.</li> <li>• Replace the medication (for example, Epi-Pen) when it expires or after it has been used.</li> </ul>
Inclusive Education	<ul style="list-style-type: none"> <li>• Provide advice to schools as requested on how to prepare an individual health care plan and associated documentation.</li> </ul>

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### **3. PROCEDURE**

#### **3.1. Identification of Students with health conditions**

During the enrolment process, or when advised by a parent/guardian, it is identified that a student requires medication to treat a specific health condition the following process should be implemented.

##### **3.1.1. Meeting to be held**

A meeting with the Principal shall be organised with the parents / guardians and during this meeting, the School is to provide:

- the [Letter to Parents and Carers](#); and
- the [Authorisation to contact medical practitioner](#) form if it is identified that further information is required to support the student for complex or long-term medical conditions.

##### **3.1.2. Individual health care plans or Emergency health plans (complex or long-term medical conditions)**

The School and the parent / guardian are to work together in consultation with the student's medical practitioner and prepare the relevant health plan ([Individual health care plan](#) or Emergency Health Plan) to support the student at school and also the staff to provide necessary assistance.

Any medications where doses may vary, clear instructions shall be included into the plan. A letter from the prescribing medical practitioner shall accompany the plan, outlining the conditions in which the dose is to be varied, and the correct dose when these conditions are present (e.g. sliding scales for insulin, or varied doses for some stimulant medication based on behaviours). This letter may also include further information regarding adverse side effects and instructions to the school on any management that may be required.

Individual health care plans, and Emergency health plans are to be reviewed by a medical practitioner annually, or when there are changes in:

- The student's medical condition or health needs; and / or
- Other factors that affect the plan, for example after an allergic reaction or anaphylactic incident occurs which has not been identified on the current plan.

Specific staff, particularly class teachers or any staff member who has a specific role in the plan, are required to review the student's applicable plan annually to ensure they are aware of their role in the event on an incident.

##### **3.1.3. Transferring of schools**

The Principal shall ensure that the school provides the parent / guardian with a copy of the student's current individual health care plan upon leaving the school. This will assist the process of health care planning at the student's new school.

Students transferring to another school within the BCE community will have their information accessible to the new school via eMinerva.

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### **3.1.4. Risk Assessment**

The Principal conducts an initial assessment to identify issues that may need to be addressed when developing the individual health care plan. Consider the following:

- routine classroom activities, including lessons in other locations around the school
- non-routine classroom activities
- non-routine school activities
- before school, recess, lunchtime, other break or play times
- sport or other programmed out of school activities
- excursions, including overnight excursions and school camps
- first aid services and personnel, and
- education of non-permanent staff (relief teachers) and volunteers.

### **3.2. Prescription Medication**

The [Medication Administration Request](#) form must be completed for all short-term medication (e.g. antibiotics) or long term / complex medication (insulin or behaviour management) that is prescribed by a medical practitioner.

#### **3.2.1. Self-administration of prescription medications**

In certain cases, students may be responsible for the self-administration of medications. The following requirements must be met for students to self-administer their medication:

- Parents/carers provide a written request to the School
- Medical practitioner provides information and advice indicating that the student can independently administer their own medication (not required for emergency medication such as those used for asthma or anaphylaxis)
- The principal considers the student capable of assuming this responsibility at school.
- The student, parents/carers and the school agree on where medication is stored and where and how it is administered. Determining an appropriate location may require a risk assessment to identify and minimise risk to the student, other students, and staff.
- Staff expected to supervise self-administration by injection or pump are provided with appropriate training by the qualified health practitioner or parent/carer who has received instructions/training by the qualified health practitioner, and
- Storage arrangements for self-administered medication shall be monitored.

#### **3.2.2. Labelling of prescription medication**

The parent/carer must provide all medication in its original container and not past its expiry date.

Prescription labels shall include:

- name of the person authorised to take the medication
- dosage
- date and time to be taken; and
- medical practitioner's name.

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### **3.2.3. Storage of prescription medication**

Controlled medications such as Dexamphetamine and Methylphenidate (Ritalin) shall:

- be securely locked away
- have access restricted to staff nominated to assist in the administration of this medication.

All other medication in this category shall be stored:

- in an area that is accessible and secure (not locked)
- in accordance with the instructions on the container
- only for the period for which it is required.

Medication shall be returned to the parent/carer when it:

- has passed its expiry date
- is no longer required to be administered at school or school related activity
- is the end of the school year.

### **3.3. Paracetamol**

Pain medication must not be administered by the school as a standard first aid strategy as it can mask signs and symptoms of serious illness or injury.

BCE supports a single dose of paracetamol in response to specific circumstances. For longer term paracetamol use or where paracetamol has been prescribed by a medical practitioner follow the guidance outlined for Prescription medication.

'Cold and flu' mixtures or a combined preparation should be managed as per the Prescription medication section of this procedure.

Upon Principal discretion, Schools are permitted to purchase paracetamol and administer to students to prevent an excess of paracetamol stored at the school or being taken onto school camps or excursions. If this option is implemented the School must:

- implement section 3.3.1 and section 3.3.4 of the Medication to Students Procedure.
- all paracetamol preparations shall be stored in an easily accessible and secure location and according to the instructions on the container.
- Ensure that the paracetamol has not passed its expiry date, and dispose of expired medication accordingly.

#### **3.3.1. Administering paracetamol provided by Parent / Guardian**

If a dose of paracetamol is to be administered the following authorisations are required:

- an [authority to administer paracetamol](#) form completed by a parent or legal guardian. This form can be completed annually or for specific activities or periods of time (e.g. for the duration of camp only).
- consent (written or verbal) from a parent or legal guardian specific to the time the dose is also required.

Paracetamol shall not be given to a student who has previously had an adverse reaction to paracetamol (as noted in the authority to administer paracetamol form).

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If paracetamol is to be given to a student for fever, it is only given when:

- the student's temperature is reasonably suspected to be above 38 degrees Celsius, and
- the student is in discomfort or pain.

Only one dose of paracetamol shall be given. The dose is in accordance with the instructions on the package or the student's authority to administer paracetamol form.

### **3.3.2. Labelling of paracetamol provided by Parent / Guardian**

The parent/carer must provide all paracetamol preparations in the original container and not past its expiry date.

The paracetamol shall have a pharmacy label affixed to the container / box with the student's name and any other information that may be required to correctly identify the student e.g. year / class.

### **3.3.3. Storage of paracetamol provided by Parent / Guardian**

All paracetamol preparations shall be stored:

- in an easily accessible and secure location
- according to the instructions
- only for the period for which it is required.

Paracetamol shall be returned to the parent when it:

- has passed its expiry date
- is no longer required to be administered at school or school related activity
- at the end of the school year.

### **3.3.4. If symptoms persist**

Where a student's symptoms are not alleviated by a single dose then the following shall occur:

- If the student is at school or at a school activity in the local area, the student's parents will be contacted and asked to take the student home or to a doctor.
- If the student is on a camp or international trip, then an attending staff member shall take the student to a doctor or emergency department and will then follow the medical advice provided.

## **3.4. Emergency medications**

Parents/carers of a student requiring emergency medication shall provide the school with an emergency action plan that is developed and signed by the prescribing health practitioner.

Approved proforma may be used for [anaphylaxis](#) and [asthma](#) action plans and shall contain:

- details of the emergency medication prescription and
- instructions for appropriate administration.

If no action plan has been provided (e.g. first asthma attack, first anaphylactic reaction) the school should follow:

- [anaphylaxis emergency action plan](#)
- [first aid for asthma plan](#)

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- [diabetes emergency plan](#)
- [seizure first aid plan](#).

### 3.4.1. Administering of emergency medication

Follow the instructions on the student's emergency action plan.

Call 000 if required and in any other circumstances where the attending first aid officer or staff member determines an ambulance is required.

The student's parents/carers will be contacted when emergency medication is given.

### 3.4.2. Labelling emergency medication

The parent/guardian must provide all emergency medication in the original container and not past its expiry date.

Emergency medication supplied by the parent/guardian shall be labelled with the student's name and any other information that may be required to correctly identify the student.

### 3.4.3. Storage Requirements

Emergency medication must:

- not be locked away
- be stored in a location all staff must be advised of its location
- have emergency response procedures stored with the medication
- Students who are always required to carry their emergency medication, must have this requirement documented on the relevant emergency action plan by their medical practitioner.

Emergency medication shall be returned to the parent when it:

- has passed its expiry date
- is no longer required to be administered at school or school related activity
- at the end of the school year.

Schools must complete annually the [first aid risk assessment](#) to determine the need to stock additional emergency medications. Asthma puffers are now available over the counter and adrenalin auto-injectors (EpiPens) can be purchased using the [Old Health approval notice](#) and an [authorisation letter](#) signed by the school Principal.

## 3.5. Non-Prescribed medication (including over the counter)

Parents/carers of a student requiring use of non-prescription medication (excluding paracetamol) are to complete the [Medication Administration Request](#) form. This type of medication includes items for example, supplements, antihistamine, topical creams & lotions, upset stomach and heart burn mixtures.

### 3.5.1. Labelling non-prescribed medication

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The parent / guardian must provide all non-prescribed medication in the original container / box with the dosage instructions visible, and have it labelled with the students name and year level.

Encourage parents/guardians to consider whether they can administer medication outside the school day, such as before and after school.

It is at Principal discretion if pharmacy labels or a medical practitioner letter is provided to the school for use of non-prescription medication, in addition to the Medication Administration request form completed by the parent / guardian.

### 3.5.2. Storage requirements

This type of medication must be stored in an:

- easily accessible and secure location
- according to the instructions
- only for the period for which it is required.

### 3.6. Administering medication

In addition to parents / guardians providing a current Medication Administration Request or Authority to Administer Paracetamol form, the following processes will be implemented at the school:

#### 3.6.1. Five Rights of Medication Administration

- **Check** the “Five Rights of Medication Administration” and the record the information in the student [medication register](#). Record this information every occasion when medication is given to a student.
- **Two** members of staff must confirm the correct dosage and medication is being administered to the correct person for prescribed medication and paracetamol. **Both** staff must sign the register to confirm this.
- **Administer** the medication to the student in accordance with instructions.
- **Return** the medication to the appropriate storage location

1.	Right person	Check the student’s identity
2.	Right drug	Check you have the right medication
3.	Right dose	Check the dose on the authority documents and the label
4.	Right time	Check the instructions and time of previous dose
5.	Right route	Check the instructions and ensure oral medications have been swallowed

#### 3.6.2. Recording the administration of medication

Use the student [medication register](#) to record every occasion when medication is given to a student (including self-administration). Record the following information in the medication register:

- the name of student
- name of medication
- exact dosage
- time that medication was given, and



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- the staff member helping with the medication.

### **3.6.3. Record occasions when the wrong medication is given to the wrong student**

If needed, call 000 immediately and follow advice given. If there is no immediate adverse reaction, phone POISONS INFORMATION CENTRE on 131 126 and follow the advice given.

Notify the principal and the student's parent/carer of all medication errors (e.g. missed dose, dose refusal, incorrect dosage, incorrect medication).

Record in web self-service (WSS) every occasion when the wrong medication or dose is given to a student. Include the same details as required in the medication register as well as the circumstances leading to how the incorrect medication was given.

### **3.6.4. Nominated staff to assist with medication administration**

Teachers and other school staff, such as first aid attendants, who are responsible for the care of students requiring medication are to:

- receive suitable training in how to recognise and respond to an emergency situation
- accompany students who require medication on school trips
- not administer intravenous injections, and
- abide by the "Five Rights of Medication Administration".

### **3.6.5. Legal Liability of staff administering medication**

Brisbane Catholic Education has a duty of care to take reasonable steps to keep students safe while they attend school. We meet our duty of care obligations through the actions of our staff. This includes for example, the administration of an EpiPen and/or any other emergency care provided when a student has an anaphylactic reaction at school or during school activities.

In the unlikely event of civil action being brought against school personnel as a consequence of administering medication, Brisbane Catholic Education, through the terms and conditions of the Insurer's policy, will indemnify (i.e. accept responsibility to defend or settle claims) those school personnel who have acted conscientiously within the scope of their professional duties.

## **3.7. Educate staff and students on health conditions at the school**

All staff (including specialist staff, new staff, canteen staff and office staff) are provided with the following:

- details of students who require medication; and
- location of medication
- warning signs, triggers and emergency responses for health conditions requiring medication or other management.
- [Asthma](#), [anaphylaxis](#), and [epilepsy](#) online training
- Scope of information they may share with other students to enable them to
  - better understand the student
  - remain calm during medical events

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- help identify emergency situations.

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### 3.8. Record Keeping

The Principal shall ensure that the school keeps the following records:

- written requests from parents
- associated guidelines and procedures from the medical practitioner
- individual health care plans
- guidelines for specific activities
- action plan for anaphylaxis
- register for administering medication, and
- staff training records.

All documents, whether digital or hard copy, provided to or recorded by the school in relation to the administration of medication to students must be retained according to the [WHS document and data control procedure](#), and shall be treated and stored as confidential information.

## 4. SUCCESS CRITERIA

The following success criteria below can be used as a quick overview Schools have implemented all aspects of this procedure:

- Authority to administer forms are completed for students who require medication.
- All medication is in its original packaging and labelled with student's name and is stored appropriately, and is within date.
- Individual Health Care Plans are established and current for students with complex or long-term medical conditions.
- Emergency Action plans are current for students requiring emergency medication (e.g. anaphylaxis, asthma).
- Medication that is administered is recorded in the medication register.
- Records of wrong doses are entered into web self-service (WSS) and notified to the parents/carer and the principal.

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### 5. REFERENCES

- Work Health and Safety Act 2011
- Work Health and Safety Regulation 2011
- Queensland Government Health (Drugs and Poisons) Regulation 1996
- Education Queensland (2018) [Administration of medications in schools procedure](#)
- Education Queensland (2013) Anaphylaxis Guidelines for Queensland Schools.
- Queensland Health (2013) AG003859913. Administration and use of Schedule 3 adrenaline auto- injectors in state and non-state schools in Queensland
- National Asthma Council Australia (2020) [Asthma Action Plan](#)
- St John Ambulance (2012) [Managing a Diabetic Emergency guide](#)
- Epilepsy Foundation Australia (2020) [Epilepsy Management Plan](#)
- [ASCIA \(2020\) Action Plan for Anaphylaxis](#)