



Links to related documents:	<a href="#">Fact Sheet: WHS Risk Management</a> <a href="#">Form: Action plan for anaphylaxis (Anapen)</a> <a href="#">Form: Action plan for anaphylaxis (Epi-pen)</a> <a href="#">Form: Action plan for asthma</a> <a href="#">QCEC Circular 2013-179 - Adrenaline Auto Injectors</a>
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## Medication to Students: Routine, Emergency and Over the Counter

*This policy details how routine, emergency and over-the-counter medications are to be administered to students at Brisbane Catholic Education schools. Whilst the administration of medication is the responsibility of the parent or carer with legal responsibility for the student, school staff can assist a student with medication under the carer provisions of the Health (Drugs and Poisons) Regulation (1996) where medication is given during school hours or at school activities.*

### Rationale

Each Catholic community, organisation and individual collaboratively engaged in the educational ministry of the Church in the Archdiocese of Brisbane is called to:

#### Teach

We promote faith in Jesus Christ, teaching and learning about Jesus, the gospel and the faith of the Catholic Christian community. Learning is lifelong, life-giving and engages the whole person.

#### Challenge

Inspired by the Holy Spirit, we challenge those we educate to live in communion with God, others and the whole of creation in prayerful, sacramental, just, peaceful, inclusive and reconciling communities.

#### Transform

We educate for a transformed world in communion, by nurturing the gifts and potential of each person, enacting shared leadership, and exercising a preferential option for the poor and the marginalised.

The Vision Statement for Catholic Education above underpins and guides the development and implementation of this policy.

## Implementation

- 1) Identify students with health conditions who require routine prescription, emergency or over-the-counter medication to participate in the full range of school activities.

Determine through the enrolment form or at regular health updates such as parent / teacher interviews, whether the information provided by the parents indicates the need for further discussion. If the form indicates that the student requires medication, a meeting should be organised with the parents. If not, add the form to the student's records.

Meet with the parents and:

- provide the parents with the Information Letter for Parents and Carers ([Appendix 1](#)), and
- seek written permission to contact the medical practitioner and to share information about the student's condition with staff using the Authorisation to Contact Medical Practitioner form ([Appendix 2](#)).

- 2) Schools shall assist those students where a medical practitioner necessitates the use of medication.

Parents shall provide a completed Medication Administration Form ([Appendix 3](#)) along with advice from the medical practitioner prescribing its use. This form is required for both short term (such as antibiotics) and long term (for example insulin) medication.

Over-the-counter including complementary medications (not including paracetamol - refer to [point 14](#)) will not be supported by the school without advice from a medical practitioner.

Schools may establish their own procedure relating to topical treatments for skin lesions.

- 3) Conduct an assessment of school activities to identify potential exposures of risk to students requiring medication or management of health conditions.

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.

- 4) Develop an individual health care plan in consultation with the parents.

The Principal shall ensure that the school informs parents on school procedures for the management of health conditions. The individual health care plan ([Appendix 4](#)) is developed in consultation with the parents, relevant staff, and the student. The plan will contain:

- strategies for specific at risk activities

- medical information provided by the child's medical practitioner, and
- emergency contacts.

For those medications where doses may vary, clear instructions shall be included in 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 those conditions are present (e.g. sliding scales for insulin, varied doses for some stimulant medication based on behaviours).

Where necessary, further information on possible adverse side effects is provided to the school with instructions on any management that may be required.

- 5) Review the individual health care plan annually to ensure that it remains relevant for the student.

The Principal shall ensure that a student's individual health care plan is reviewed annually at a specified time (e.g. beginning of the school year). It may also be necessary to review the plan whenever there are changes in:

- the student's health needs
- staff, particularly class teacher, year coordinator or adviser or any staff member who has a specific role in the plan, or
- other factors that affect the plan, for example, when an allergic reaction or anaphylactic event occurs.

- 6) Medication, including paracetamol, shall be provided by the parents in the original container not past its expiry date.

For any prescribed medication, the following information is to be provided on the pharmacy label:

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

- 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:

- information on all students who have a health condition requiring medication
- factsheet on anaphylaxis ([Appendix 5](#)) (for those schools that have an anaphylactic student)
- the school's management strategies
- where the medication is stored, and
- first aid procedures for those students.

Students are informed of warning signs, triggers and emergency responses for health conditions requiring medication or other management.

- 8) Allow only nominated staff to assist with medication.

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” ([Appendix 6](#)).

9) Enter into the register every occasion when staff assist a student to take their medication.

Use the student medication register ([Appendix 7](#)) to record every occasion when routine prescription, emergency, over-the-counter or paracetamol medication is given to a student. The register shall record:

- the name of student
- name of medication
- exact dosage
- time that medication was given, and
- the staff member helping with the medication.

10) Record occasions when the wrong medication is given to the wrong student.

Enter into web self service (WSS) occasions when the wrong medication is given to a student. Include details required for the medication register as well as the circumstances leading to how the incorrect medication was given.

11) Storage of medication.

The Principal shall ensure that the school:

- stores medication away from direct heat in an easily accessible and secure location
- labels each student’s medication so that it is easy to tell apart, and
- regularly checks that medication is not out of date.

Emergency medication such as for diabetes, anaphylaxis and asthma:

- shall not be locked away
- all teachers are familiar with its location, and
- emergency response procedures accompany the medication.

Any unused portion of medication shall be returned to the parents when it:

- has past its expiry date
- no longer has to be given to the student, or
- is the end of the school year.

12) Emergency medications for anaphylaxis, diabetes, asthma or epilepsy.

Parents 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 proformas may be used for students with anaphylaxis and asthma (refer to ASCIA and Asthma Qld links under additional resources), and shall contain:

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

The Principal shall ensure that the school has in place the relevant emergency response procedures:

- emergency response for anaphylaxis ([Appendix 8](#))
- emergency response for diabetes ([Appendix 9](#))

- emergency response for epilepsy ([Appendix 10](#)), and
- emergency response for asthma ([Appendix 11](#)).

The school shall contact the ambulance following an emergency event such as anaphylaxis requiring the use of an Epi-pen, or an asthma attack requiring repeated asthma first aid and have the student taken to hospital.

The student's parents will be contacted where emergency medication is given.

13) Conduct a risk assessment to determine the need to stock additional emergency medication in the school's first aid kit.

Asthma reliever medication - A person who has a current asthma management certificate may purchase and administer asthma reliever medication. When purchasing the medication, the person must show their asthma certificate and a signed letter from the principal authorising the purchase.

Adrenaline auto-injectors – purchasing and administering auto-injectors are subject to the Queensland Health [written approval](#).

14) Administering paracetamol to a student.

Analgesics should not be administered by the school as a standard first aid strategy as it can mask signs and symptoms of serious illness or injury. Giving paracetamol to a student is subject to the following:

- an Authority to Administer Paracetamol ([Appendix 12](#)) is completed annually by parents to authorise a school to give paracetamol to a student if required for the forthcoming year
- before giving paracetamol, the school shall attempt to contact the parents to obtain specific consent by telephone, fax or email regarding whether a dose of paracetamol may be given
- if paracetamol is to be given to a student for fever, it is only given when:
  - the student's temperature is above 38 degrees Celsius, and
  - the student is in discomfort or pain
- only one dose of paracetamol should be given. The dose is in accordance with the instructions on the package, the advice of a doctor or pharmacist, or the child's Authority to Administer Paracetamol form.

Where a student's symptoms are not alleviated by the dose, the student's parents will be contacted and asked to take the student home or to a doctor.

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).

Preparations that contain Paracetamol only shall be used. 'Cold or flu' mixtures or a combined preparation shall not be given.

For an excursion that incorporates an overnight stay, the consent and medical information form shall be completed before a staff member may give paracetamol to a student whilst on that excursion.

15) Self-administration or assisted administration of medications.

In certain cases, students may be responsible for the self administration of medications in accordance with the following:

- parents provide a written request, with guidelines and procedures from the medical practitioner for the student to be responsible for administering their own medication

- the principal considers the student capable of assuming this responsibility at school
- if appropriate, principal approves student's self medication on receipt of information and written authorisation from the parents and medical practitioner
- the student, parents and the school agree on where medication is stored, and where and how it is administered
- staff expected to supervise self-administration by injection or pump are provided with appropriate training by the qualified health practitioner or parent who has received instructions/training by the qualified health practitioner, and
- storage arrangements for self administered medication shall be monitored.

16) 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.

17) Keep suitable records on administering of medication to students.

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.

Information relating to the administration of medication shall be treated and stored as confidential information.

18) Provide the parents with a copy of the current individual health care plan if the student enrolls in another school.

The Principal shall ensure that the school encourages parents to provide a copy of the student's current individual health care plan to the new school principal. This will assist the process of health care planning at that school.

## **Responsibilities**

### **Principal**

- Ensure that the school seeks information from parents about their child having a health condition that requires medication for its management.
- 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.
- 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.
- Conduct an assessment to identify potential sources risk.
- Consult with parents, relevant staff and the student's when developing the individual health care plan.
- Ensure that the school has obtained copies of completed and signed documents from the parents in a timely manner.
- Ensure all parts of the health care plan are completed. Consider excluding the student from the school until the health care plan is completed.
- 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.
- Identify and provide training to nominated staff that are responsible for the care of students.
- Ensure that suitably trained staff accompany students on school trips.
- Ensure that medication is regularly checked and not past its expiry date or otherwise damaged.
- Remind parents one month before a medication's expiry date that a new one is required.
- Ensure that relevant records are kept at the school.
- Inform all staff that records related to the management of health conditions remain confidential.
- Ensure that medication is suitably stored.
- Review annually the individual health care plans.
- Provide the parents with a copy of the current individual health care plan if the student enrolls in another school.
- Ensure that students at risk are given every opportunity to participate in a full range of school activities.

### **Staff responsible for the care of students who have a health condition requiring medication**

- Know the identity of students who have a health condition.
- Attend relevant training relating to management of health conditions, such as the use of the Epi-Pen.
- Follow the strategies for avoiding risk as outlined in a student's individual health care plan.
- Implement the emergency action plan in the event of a student suffering an emergency event such as an anaphylactic reaction.
- Record every occasion when they administer or assist in the administration of medication to a student.
- Plan ahead for special class activities ensure that the risk is minimised.
- Be available and attend school trips involving a student with a health condition.

- Know where the student's medication is kept and check regularly to ensure that they are not past their expiry date or otherwise damaged.
- Avoid the use of food treats in class as rewards, as they may contain hidden allergens.
- 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.
- Raise student awareness about health conditions requiring medication and their role in making the school environment safe for their fellow students.

#### **All staff**

- Know the identity of students who have a health condition.
- Participate in discussions relating to management of student health conditions
- Ensure that at risk students are given every opportunity to participate in a full range of school activities.
- Know where the emergency medication is stored.

#### **Parents of a student requiring medication**

- Inform the school principal of the health needs of the child upon enrolment and whenever they change.
- When requested by the principal, assist in the preparation of the individual health care plan.
- Provide the medication administration form and the emergency action plan to their child's medical practitioner and return it to the school when the forms are completed and signed.
- Provide written notification for the school to administer or assist a student with the administration of a prescribed medication.
- 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.
- Ensure that the medication provided is not out of date and is labelled clearly with the student's name and dosage information.
- Replace the medication (for example, Epi-Pen) when it expires or after it has been used.

#### **Guidance Counsellors**

- Provide advice to schools as requested on how to prepare an individual health care plan and associated documentation.

#### **BCE OHS Section staff**

- Provide advice to schools as requested on how to reduce the risk of anaphylaxis.

## Definitions

### Analgesics

Drugs producing analgesia (absence or relief of pain). Examples include aspirin and paracetamol.

### Asthma Management Certificate

Certificate provided to participants who have undertaken an asthma management course as defined in [section 256B](#) Health (Drugs and Poisons) Regulation 1996 and satisfies the following specific learning objectives:

- Recognition of the symptoms and signs of asthma
- Knowledge of appropriate use of reliever medication
- Ability to implement an Asthma First Aid Plan

The certificate is valid for 3 years from the date of completion.

### Parents

The term is used to refer to a parent, parents, guardian or carer.

### Prescribed medication

Medications prescribed by a registered Medical Practitioner for a particular person for the treatment of a medical condition. Examples include Schedule 4 (S4) and Schedule 8 (S8) medications.

### Medical practitioner

A doctor registered under the Medical Board of Queensland, or who is registered with a Medical Board in another state or territory to practise medicine in Australia. The development of any health plan in a school setting should be signed off by a medical practitioner.

### Prescribing health practitioner

A health professional who has completed the appropriate training, giving them the authority to prescribe certain medications under the Health (Drugs and Poisons) Regulation 1996 (Qld) e.g. medical practitioner, nurse practitioner, dentist.

### Over-the-counter medication (OTC)

Medications are for self-treatment and can be purchased from pharmacies, with selected products also available in supermarkets, health food stores and other retailers. Examples include cough and cold remedies, anti-fungal treatments, non-prescription analgesics such as aspirin and paracetamol.

### Complementary medicines

Also known as traditional or alternative medicines, include herbal, aromatherapy and homoeopathic preparations, vitamins and minerals and nutritional supplements such as fish oil. Complementary medicines can be purchased at a number of retail venues, including pharmacies or provided by naturopaths.

### Routine medication

Medication required regularly for maintenance of a specific health condition (e.g. medication to treat cystic fibrosis).

## Emergency Medication

Medication required for the emergency first-aid treatment of medical conditions (e.g. Midazolam for specific seizures, adrenaline auto-injectors for anaphylaxis, blue reliever for asthma).

## Schedule 8 (S8) substance

Medicinal products likely to cause dependence or be abused and include controlled substances such as Ritalin and Dexamphetamine.

## Additional Information

### Appendices

[Appendix 1. Information Letter for Parents and Carers](#)

[Appendix 2. Authorisation to Contact Medical Practitioner](#)

[Appendix 3. Student Medication Request Form](#)

[Appendix 4. Individual Health Care Plan](#)

[Appendix 5. Information on anaphylaxis for school staff](#)

[Appendix 6. Five Rights of Medication Administration](#)

[Appendix 7. Student Medication Register](#)

[Appendix 8. Emergency response for Anaphylaxis](#)

[Appendix 9. Emergency response for Diabetes](#)

[Appendix 10. Emergency response for Epilepsy](#)

[Appendix 11. Emergency response for Asthma](#)

[Appendix 12. Authority to Administer Paracetamol](#)

### Reference documents

ASCIA (2010) Anaphylaxis Resources. Available at:

<http://www.allergy.org.au/health-professionals/anaphylaxis-resources>

Education Queensland (2006) Severe Allergic Reactions. Interim Anaphylaxis Guidelines for Queensland Schools.

Federal Department of Health and Ageing (2010) Written asthma action plan. Available at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/asthma-plan>

NSW Department of Education and Training (2006) ANAPHYLAXIS. Guidelines for schools. Second edition 2006.

Queensland Government (2011) Work Health and Safety Act 2011

Queensland Government (1996) Health (Drugs and Poisons) Regulation 1996

Queensland Health (2013) [AG003859913. Administration and use of Schedule 3 adrenaline auto-injectors in state and non-state schools in Queensland](#)

Victorian Department of Education & Training (2006) Anaphylaxis Guidelines. A resource for managing severe allergies in Victorian government schools.