

PROCEDURES

ADMINISTRATION OF MEDICATIONS TO STUDENTS WITH NOTIFIED MEDICAL CONDITIONS

Responsibility of: School Support Services
Effective Date: July 2014
Next Review Date: July 2016
Target Audience: Staff, parents and community

FILE2014/429
EDOC2014/29018
Version Number: 1.0

This document should be read in conjunction with the [Administration of Medications to Students with Notified Medical Conditions policy](#).

1. INTRODUCTION

This document is designed to support the management of a student's chronic (constantly recurring) or severe (critical or dangerous) medical condition in a school context.

Despite careful adherence to these guidelines, emergency situations involving students with medical conditions and/or the administration of medication by staff in a school context may still eventuate. It is important that staff are aware that in adhering to the policy and guidelines they are assisting the department to exercise its duty of care to students. In doing so, and providing they act in good faith and to the best of their ability, they will not incur personal legal liability in the event of a student injury arising out of the administration of medication and/or assisting with a medical emergency in a school context. Staff are protected by the legal principle of vicarious liability in relation to any personal injury proceedings. This means that unless the staff member has deliberately injured the student, or behaved with disregard for the student's safety, the department will be liable for any injury caused by the negligence of the staff member.

2. DEFINITIONS

Parent signifies a child's father, mother or any other person who has parental responsibility for the child, including a person who is regarded as a parent of the child under Aboriginal customary law or Aboriginal tradition.

Medical Condition – a diagnosed medical condition requiring medication/treatment for a student.

Health Care Plan – a plan, developed by a Health Care Team to manage the administration of medication to the student and to mitigate against potential risks to the student in the administration of the medication.

Health Care Team – the team that drafts and manages the Health Care Plan. The Team must include the principal (or delegate) and parent, and may include: medical practitioner; Health Promoting School Nurse; First Aid Officer; teacher; or member from a specialised agency

representing a specific condition such as asthma, diabetes, epilepsy or anaphylaxis (see Medical Support Organisations information below for agency contact information).

Notified Medical Condition – where the school has been notified by a parent or medical practitioner of the medical condition of the student.

3. ROLES AND RESPONSIBILITIES

Roles and responsibilities are as outlined in the Administration of Medications to Students with Notified Medical Conditions policy.

4. PROCEDURES

Health Care Plan

Numerous support documents are available online at <https://education.nt.gov.au/education/policies/medical-administration-of-medications-to-students-with-notified-medical-conditions>

The development of a Health Care Plan commences with either diagnosis of a chronic/severe medical condition, or enrolment processes involving the school, parent and student when completing a departmental Student Enrolment form. The Enrolment Form also contains medical information.

If a student is a new enrolment with a chronic/severe medical condition the school will conduct a risk assessment and evaluation of the prospective student's needs and put specific strategies into place until a Health Care Plan has been developed.

A student with a diagnosed medical condition requiring the administration of approved medication in a school context will need an agreed Health Care Plan. The plan should be reviewed whenever the medical condition, or medical advice in relation to the condition, changes, if there is an incident involving this medical condition, and in any case not later than at the beginning of each school semester (six monthly).

The agreed Health Care Plan will clearly state the needs of the student and the responsibilities of each party (student, parent, health care team, school) and the resources required to implement the plan – including emergency situations.

In developing the plan schools may choose to also use the Student's Health Care Action Plan template. The Action Plan provides a greater level of detail about the actions detailed in the Health Care Plan and may be useful as a handy reference.

The Health Care Plan should also articulate a back-up plan identifying alternative staff and arrangements in the event that key personnel identified in the Health Care Plan are unavailable.

The principal or delegate, parent and other Health Care Team members should initial each page of the Health Care Plan and sign and date the final page upon completion.

A copy of the plan is to be stored on the student file, given to the parent, noted in the Student Administration Management System (SAMS), and kept adjacent to the stored medication.

Transport of Medication

Parents are responsible for the safe transportation of medication to the school front office. Students should not be carrying medication to school unless it is to self-administer for a medical condition, where formal notification has been provided to the Principal, and it is part of an agreed Health Care Plan.

Storage of medication:

Staff should store and supervise only medication that has been prescribed by a doctor for the individual student, for the period of time specified. This ensures the medication is medically warranted.

Medicines provided for the medication of students with diagnosed medical conditions should be securely stored (but not locked) in an appropriate cupboard (refrigerator if specified) in close proximity to the school's first aid supplies. These medicines should be stored separately in individual containers to ensure they are not disturbed or tampered with during access to first aid supplies for everyday emergencies and use.

It is reasonable for school staff to accept and agree to supervise only medication required during their period of supervision or care (for example, 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). This minimises the quantity of medication held on site.

Medications must be stored strictly in accordance with product instructions (paying particular note to temperature) and in the whole original container in which dispensed. In recognition of the fact that the school may not always receive ongoing top ups of the medication in the correct original containers, the school should keep a photocopy/scanned record of the original container in which the medication was acquired by the parent. Parents supply thermal carry packs to maintain safe temperature storage and for ease of transport on excursions.

Storage should be secure with clear labelling and access limited to the staff responsible for medication storage and supervision. **Medications required to be prescribed in a medical emergency should not be stored in a locked cabinet.**

As a minimum standard the safe storage of medication therefore requires:

- prescription by a doctor
- medication provided by the parent
- medication within the expiry date delivered to staff as a daily supply (or a week's supply at the most, except in long-term continuous care arrangements). This might require parents to organise a second labelled container from the pharmacy for safe storage at home

- written instructions from the parent or doctor which must match those printed on the product packaging.

Supervision of medication:

Numerous support documents are available online at <https://education.nt.gov.au/education/policies/medical-administration-of-medications-to-students-with-notified-medical-conditions>

Everyone supervising medication needs to ensure that: the right child; has the right medication; and the correct dose; by the right route (for example, oral or inhaled); at the right time; and that they note when the medication has been administered.

Staff can ask for a medication authority to be provided by the prescribing doctor to assist them with safe supervision of medication. This can be requested for over the counter medication as well as prescription-only medication. If a medication authority is not provided, staff should have written instructions from the parent or doctor. In all cases the instructions must match those on the pharmacy label.

A student should not take his or her first dose of a new medication at school, preschool or in a childcare setting. Instead the student should be supervised by the family or health professional in case of an allergic reaction.

Information in the Health Care Plan, including arrangements and back-up procedures, should be clearly explained to the student by the parent/guardian in the presence of the principal or assistant principal.

Students with Type 1 Diabetes are required to test their blood glucose level several times a day. In primary schools, blood glucose meters may be kept at the front office for students to administer their tests under the supervision of trained staff, in accordance with their Health Care Plan. The blood glucose meter containers need to be clearly labelled with each student's name and contact details.

Middle and senior years' students may carry their blood glucose meters and conduct unsupervised tests in accordance with their Health Care Plan.

Monitoring the effects of medication:

School staff should make observations as to the general behaviour and demeanour of the student and, where necessary, document those observations. In some cases, for example attention disorders or epilepsy, such observations can be used by health professionals in determining care plans. Observations can be documented using the Student's Health Issues Record template found at <https://education.nt.gov.au/education/policies/medical-administration-of-medications-to-students-with-notified-medical-conditions>

It is not the role of school staff however, to interpret behaviour in relation to a medical condition, nor can they be expected to clinically monitor the effects of the medication. If staff are concerned for any reason about a student's health, they should seek advice from the school's First Aid Officer.

Medication error

If a student takes the wrong medication, the wrong amount of medication, or takes medication via the wrong route, the following steps should be followed:

- ring the **POISONS INFORMATION LINE 13 11 26**
- give details of the incident and student
- act immediately upon their advice (for example, if you are advised to call an ambulance)
- notify the student's emergency contact person
- document your actions
- review administration of student medication at the worksite in light of the incident.

School staff should advise their principal and complete a Student Injury Record form available online at

<https://education.nt.gov.au/education/policies/medical-administration-of-medications-to-students-with-notified-medical-conditions>

The department has a responsibility to ensure student wellbeing and safety. Reporting of student injuries may, or may not, trigger risk management processes.

Ultimately the principal of the school at which the student sustains the injury, has responsibilities outlined in the reporting and recording of student injury policy. The principal also has a duty of care to minimise the risk of a repeat injury to students or staff.

Excursions, or when students are off school premises.

The department's [Excursions policy](#) is the lead document in relation to excursions.

If a student with a medical condition requiring medication participates in an excursion or activity off the school grounds, an assessment of the issues relating to the student's participation should be undertaken by the Health Care Team, including the parent, to assist in meeting the student's needs.

The teacher in charge of the excursion or activity is required to take a copy of the Health Care Plan to follow if medical intervention is required. The teacher in charge or accompanying adult should be trained to handle medical conditions of all students listed on the excursion register, or be accompanied by a trained First Aid Officer.

Parents of students with a medical condition may also be invited to provide additional support if considered necessary, but this does not excuse the school or teachers from their professional responsibilities regarding a child or children with a medical condition in their care. Departmental staff have a non-delegable duty of care so even if a child's parent is on the excursion it is the department that is legally liable.

As articulated in the Self Inspection Checklist – School Excursions, schools should carefully plan for the excursion, including clear statements concerning where medications for students with medical conditions will be stored and who has responsibility for dealing with an incident should it arise whilst on an excursion.

Further information about medication management

Clarification about an individual student’s medication should always be directed through the parent or student over the age of 18 to the prescribing doctor.

General information about medication (that is, questions relating to safe medication practices but not identifying individual students) can be obtained from local or hospital pharmacists.

MEDICAL SUPPORT ORGANISATIONS

Name of Organisation	Telephone Number	Email
Allergy and Anaphylaxis Australia	1300 728 000	coordinator@allergyfacts.org.au
Asthma Foundation NT	(08) 8981 6066	asthmant@asthmant.org.au
Healthy Living (Diabetes) NT	(08) 8927 8488	info@healthylivingnt.org.au
The Epilepsy Centre	1300 850 081	enquiries@epilepsycentre.org.au