



PURPOSE

To explain to parents/carers, students and staff the processes Frankston Primary School will follow to safely manage the provision of medication to students while at school or school activities, including camps and excursions.

SCOPE

This policy applies to the administration of medication to all students. It does not apply to:

- the provision of medication for anaphylaxis which is provided for in our school's Anaphylaxis Policy
- the provision of medication for asthma which is provided for in our school's Asthma Policy
- specialised procedures which may be required for complex medical care needs

POLICY

If a student requires medication, Frankston Primary School encourages parents to arrange for the medication to be taken outside of school hours.

However, Frankston Primary School understands that students may need to take medication at school or school activities. To support students to do so safely, Frankston Primary School will follow the procedures set out in this policy.

Authority to Administer

If a student needs to take medication while at school or at a school activity:

- Parents/carers should arrange for the student's treating medical/health practitioner to provide written advice to the school which details:
 - the name of the medication required
 - the dosage amount
 - the time the medication is to be taken
 - how the medication is to be taken
 - the dates the medication is required, or whether it is an ongoing medication
 - how the medication should be stored.

- In most cases, parents/carers should arrange for written advice to be provided in a Medication Authority Form which a student's treating medical/health practitioner should complete (see Appendix 1).
- If advice cannot be provided by a student's medical/health practitioner, the principal (or their nominee) may agree that written authority can be provided by, or the Medication Authority Form can be completed by a student's parents/carers.
- The principal (or their nominee) may need to consult with parents/carers to clarify written advice and consider student's individual preferences regarding medication administration (which may also be provided for in a student's Student Health Support Plan).

Parents/carers can contact the school office for a Medication Authority Form.

Administering Medication

Any medication brought to school to be administered by the school needs:

- to be in the original medication container as dispensed
- clearly state the student's name
- clearly state the dosage required
- clearly state the time the medication is to administered
- clearly state the expiry date of the medication.

Parents/carers need to ensure that the medication a student has at school is within its expiry date. If school staff become aware that the medication a student has at school has expired, they will promptly contact the student's parents/carers who will need to arrange for medication within the expiry date to be provided.

If a student needs to take medication at school or a school activity, the principal (or their nominee) will ensure that:

1. Medication is administered to the student in accordance with the Medication Authority Form so that:
 - the student receives their correct medication
 - in the proper dose
 - via the correct method (for example, inhaled or orally)
 - at the correct time of day.
2. A log is kept of medicine administered to a student.
3. Two staff members will supervise the administration of medication at all times.
4. The teacher in charge of a student at the time their medication is required:
 - is informed that the student needs to receive their medication
 - if necessary, release the student from class to obtain their medication (usually from the school office)

Self-administration

In some cases, it may be appropriate for students to self-administer their medication. The principal (or their nominee) may consult with parents/carers and consider advice from the student's medical/health practitioner to determine whether to allow a student to self-administer their medication.

If the principal decides to allow a student to self-administer their medication, the principal may require written acknowledgement from the student's medical/health practitioner, or the student's parents/carers that the student will self-administer their medication.

Storing Medication

The principal (or their nominee) will put in place arrangements so that medication is stored:

- securely to minimise risk to others
- in a place only accessible by staff who are responsible for administering the medication
- away from a classroom (unless quick access is required)
- away from first aid kits
- according to packet instructions, particularly in relation to temperature.

For most students, Frankston Primary School will store student medication in a locked cupboard in the front office.

Frankston Primary School stores student medication in 'grab-bags' for each student that includes:

- the student's dispensed medication container, and a medication pill-box
- copy of student medication authority form signed by parent
- clear photograph of student for easy identification
- clear labelling on the grab-bag showing student name, (photo), medication, dosage and time.

The principal may decide, in consultation with parents/carers and/or on the advice of a student's treating medical/health practitioner:

- that the student's medication should be stored securely in the student's classroom if quick access might be required
- to allow the student to carry their own medication with them, preferably in the original packaging if:
 - the medication does not have special storage requirements, such as refrigeration
 - doing so does not create potentially unsafe access to the medication by other students.

WARNING

Frankston Primary school will not:

- in accordance with Department of Education policy, store or administer analgesics such as aspirin and paracetamol as a standard first aid strategy as they can mask signs and symptoms of serious illness or injury
- allow a student to take their first dose of a new medication at school in case of an allergic reaction. This should be done under the supervision of the student's parents, carers or health practitioner
- allow use of medication by anyone other than the prescribed student except in a life-threatening emergency, for example if a student is having an asthma attack and their own puffer is not readily available.

MEDICATION ERROR

If a student takes medication incorrectly, staff will endeavour to:

Step	Action
1.	If required, follow first aid procedures outlined in the student's Health Support Plan or other medical management plan.
2.	Ring the Poisons Information Line, 13 11 26 and give details of the incident and the student.
3.	Act immediately upon their advice, such as calling Triple Zero "000" if advised to do so.
4.	Contact the student's parents/carers or emergency contact person to notify them of the medication error and action taken.
5.	Review medication management procedures at the school in light of the incident.

In the case of an emergency, school staff may call Triple Zero '000' for an ambulance at any time.

COMMUNICATION

This policy will be communicated to our school community in the following ways

- Available publicly on our school’s website
- Included as annual reference in school newsletter
- Discussed at staff briefings/meetings as required
- Made available in hard copy from school administration upon request

FURTHER INFORMATION AND RESOURCES

The Department’s Policy and Advisory Library (PAL):

- [Medication Policy](#)
- [First Aid for Students and Staff Policy](#)

Our school policies and documents:

- *First Aid, Health Care Needs*
- *Medication Authority Form, Medication Administration Log*

NEXT REVIEW	2028
PRINCIPAL	Renee Kennedy
EVALUATION	This policy will be reviewed as part of the school’s review cycle, or as required due to changes in relevant Acts, Laws, DE mandates, or should situations arise that require earlier consideration.



MEDICATION AUTHORITY FORM – PARENT AUTHORITY

STUDENTS REQUIRING MEDICATION TO BE ADMINISTERED AT SCHOOL

This form should, ideally, be signed by the student’s medical/health practitioner for all medication to be administered at school but schools may proceed on the signed authority of parents in the absence of a signature from a medical practitioner.

- For students with asthma, [Asthma Australia’s School Asthma Care Plan](#)
- For students with anaphylaxis, an [ASCIA Action Plan for Anaphylaxis](#)

Please only complete the sections below that are relevant to the student’s health support needs. If additional advice is required, please attach it to this form.

Please note: wherever possible, medication should be scheduled outside school hours, eg medication required three times daily is generally not required during a school day – it can be taken before and after school and before bed.

Student Details

Name of school: _____

Name of student: _____ Date of Birth: _____

MediAlert Number (if relevant): _____

Review date for this form: _____

Medication to be administered at school:

Name of Medication	Dosage (amount)	Time/s to be taken	How is it to be taken? (eg oral/topical/injection)	Dates to be administered	Supervision required
				Start: / / End: / / OR <input type="checkbox"/> Ongoing medication	<input type="checkbox"/> No – student self- managing <input type="checkbox"/> Yes <input type="checkbox"/> remind <input type="checkbox"/> observe <input type="checkbox"/> assist <input type="checkbox"/> administer
				Start: / / End: / / OR <input type="checkbox"/> Ongoing medication	<input type="checkbox"/> No – student self- managing <input type="checkbox"/> Yes <input type="checkbox"/> remind <input type="checkbox"/> observe <input type="checkbox"/> assist

					<input type="checkbox"/> administer
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Medication delivered to the school

Please indicate if there are any specific storage instructions for any 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

Supervision required

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 be agreed to by the student and their parents/carers, the school and the student’s medical/health practitioner.

Please describe what supervision or assistance is required by the student when taking medication at school (e.g. remind, observe, assist or administer):

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

We collect personal and health information to plan for and support the health care needs of our students. Information collected will be used and disclosed in accordance with the Department of Education and Training’s privacy policy which applies to all government schools (available at: <http://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx>) and the law.

Authorisation to administer medication in accordance with this form:

Name of parent/carer: _____
Signature: _____ Date: _____

Name of medical/health practitioner: _____
Professional role: _____
Signature: _____ Date: _____
Contact details: _____



MEDICATION AUTHORITY FORM – MEDICAL PRACTITIONER AUTHORITY
STUDENTS REQUIRING MEDICATION TO BE ADMINISTERED 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 the Australasian Society of Clinical Immunology and Allergy (ASCI): <http://www.allergy.org.au/health-professionals/ascia-plans-action-and-treatment>.

Please only complete those sections in this form which are relevant to the student’s health support needs.

Name of School: _____

Student’s Name: _____ Date of Birth: _____

MedicAlert Number (if relevant): _____ Review date for this form: _____

Please Note: wherever possible, medication should be scheduled outside the school hours, e.g. 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.

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: / / <input type="checkbox"/> Ongoing medication
				Start date: / / End Date: / / <input type="checkbox"/> Ongoing medication
				Start date: / / End Date: / / <input type="checkbox"/> Ongoing medication
				Start date: / / End Date: / / <input type="checkbox"/> Ongoing medication

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Medication Storage

Please indicate if there are specific storage instructions for the medication:

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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:

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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/Mature minor**:
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Signature:

Date:

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

**Please note: Mature minor is a student who is capable of making their own decisions on a range of issues, before they reach eighteen years of age. (See: [Decision Making Responsibility for Students - School Policy and Advisory Guide](#)).

