

Policy on the administration of medication: HS 09

This policy should be read in conjunction with:

- **EH Policy statement HS 12 Anaphylaxis/food allergies (currently under development);**
- **Care Centre Policies in larger school contexts/where applicable;**

Date of Review: May 2014

Date for review: May 2016

Policy Number: HS 09

Policy prepared by: EH Policy reference group

Background to the policy statement:

There are times when a child may be sufficiently well enough to return to school/preschool after an illness whilst still completing a course of medication e.g. antibiotics.

There are also other circumstances where a child is managing an **ongoing medical condition** or **chronic illness** e.g. asthma; diabetes. A chronic illness is defined as an illness that is ongoing and requires treatment over long periods of time. In these circumstances, the child may require medication on an ongoing basis to support their participation at school/preschool.

Aim/purpose of the policy statement:

- To clearly establish the adult role in the responsible administration and recording of medication administered to children within the school/preschool setting;
- To proactively manage issues related to the storage of medication administered within the school/preschool setting;
- To enlist parental co-operation and to clearly establish the procedures for administration of medication within the school/preschool;
- To ensure the safety of the child in the administration of drugs/medication

Policy statement:

At EtonHouse schools and preschools, staff members are committed to ensuring children's health, safety and well being which includes the responsible administration of medication prescribed by responsible medical practitioners.

Implementation practices and procedures:

School/preschool/staff responsibilities:

- In relation to children with **chronic illnesses** (e.g. diabetes or asthma) any information about the child's illness and medication requirements must be shared/discussed with the child's teaching team upon enrolment;
- **Long term medication and equipment** used to administer medication which supports chronic illness e.g. asthma inhalers, EpiPens, must be kept at the school/preschool

throughout the child's enrolment at the school. Principals (school care centres) must work with parents to ensure that these medications are current (see parent's responsibilities);

- If medication requires refrigeration, plans must be made to ensure this requirement is met whilst also supporting accessibility in an emergency (consider cooler boxes);
- Medications must not be accessible to children for whom the medication is not prescribed;
- A medication plan for the child with a chronic illness **must be displayed** in the child's classroom so that staff are fully aware of their responsibilities in administering medication (consider also the need to **brief relief staff and before/after care staff**);
- The class teacher must discuss with the child's parents any additional requirements necessary to support the child's participation in events outside of the typical school/preschool day (e.g. cooler boxes may be required to store medication which requires refrigeration on field trips);
- Staff will not be responsible for **verbal requests** by parents/guardians to administer medication. To avoid possible misunderstandings that could arise (in relation to dosage instructions) we request that **all requests to administer medication be received in writing** on the EH authorisation to administer medication form. A copy of this is given to all parents upon registration and will be emailed to you upon request;
- Medication will only be administered if **written instructions (in English) are received**;
- Staff must NOT administer over the counter medications (analgesics and anti-cold medications; vitamins/cough drops);
- Medications must be stored in a safe place which is **inaccessible to young children**, preferably in a locked or child proof cupboard. **Appropriate provision must be made to store medications which require refrigeration**;
- In the case of asthma and anaphylactic reactions Epi-Pens and asthma inhalers **MUST NOT** be locked away i.e. asthma and adrenalin medications **must be readily available to staff** due to the immediacy of the child receiving treatment i.e. wherever they are stored (Office, Care Centre/Sick Bay) the location must be known to **all** teaching staff and **especially** to the specific child's teaching team;
- Medication can only be administered to the child whose name and dosage is stated (in English) on the label of the medication container (irrespective of requests from parent(s)).
- Staff will not administer medication where the expiry date of the medication has expired;

- When administering medication, staff must ensure that the **time and dosage** of medication are **to be checked by a second party**. The label must be read carefully before medication is administered. *Give the right dose, by the right method, at the right time* (Aronson, 2002, p. 154-155) **and to the correct child**; The Authorisation to administer Medication form must be signed by the individual who administered the dosage and witnessed by a second individual who was present when the dosage was measured (if applicable) and administered i.e. two signatures are required;
- The **actual time and dosage** at which the medication was administered must be recorded and reported to the parent(s) so that the parent(s) is able to make any required adjustments to the medication regime. This information should be recorded in a specific class/ centre medication book;
- Staff must adhere to specific requirements e.g. administering medication with food; and must be familiar with the process of managing specific occurrences of chronic illnesses e.g. asthma attacks;
- Any observed side effects following administration of medication must be noted and reported to the School/Preschool Principal and parent(s);
- Where children are engaged in events which differ from the typical school/preschool day, (e.g. sports day; off campus visits), children who are obviously unwell on arrival at school/preschool must be discouraged from attending these events;

Parental responsibilities:

Currently if a child is found to have a fever and or other symptoms which indicate that the child is not well, parents are contacted and requested to take the child home. This is in the best interests of all children as a preventative measure to reduce cross infection within the child's class and across the school/preschool. We ask that parents please continue to support us in these measures to ensure our children and staff remain healthy.

It is sometimes difficult however to decide when and how long to keep a child home from school/preschool. The timing of the period of absence is often important, again in order to minimise cross infection within the child's group and to prevent the child who may still be recovering from acquiring other illnesses while their resistance is lowered.

24 hour fever free:

A child should be fever free for 24 hours before recommencing school/preschool. As a child's temperature is lowest in the morning, a low temperature on awakening is often not a true indicator of 'wellness'. If a child has been given Panadol, Tylenol, Motrin or the equivalent the previous night, OR on the morning before attending school/preschool this medication could still be at work in lowering the child's temperature. **Therefore a child should be fever free (without the assistance of medication) for a period of 24 hours before returning to school/preschool.**

Should your child require medication at school/preschool (e.g. completing a course of antibiotics), we ask that you complete the EtonHouse Authorisation to Administer

EtonHouse Policy on the Administration of Medication/ Issued: May 2014

Medication form outlining the details of your child's medication and email this form to the following personnel:

- The Principal of the **Preschool** and **your child's class teacher**;
- In large **school settings** to the school nurse/medical or care centre. In these larger settings, the teacher will take the child's medication to the medical care centre/nurse on duty who will accept responsibility for administering said medication.
- The **Authorisation to Administer Medication** form must be sent the day before, or at the very latest on the morning before your child arrives at preschool/school. This allows time for the information to be read prior to the start of the next school/preschool day; The Authorisation form may be attached to the communication booklet (in settings where these are used), or scanned and emailed through to the school/preschool; **Staff /the child's class teacher must acknowledge receipt of this form**
- Parents bringing their child (ren) to school/preschool are requested to hand the medication directly to the class teacher/staff member in charge of the group at the time of arrival.
- In larger school settings, the teacher must also inform before and after care staff of the *Authorisation to administer medication* form as well as brief care staff of any administration requirements.
- When children are traveling by bus, medication must be stored in a **child proof container** and placed in a **zip locked bag** which is **clearly labeled** with both the **child's name** and the **class name**.
(The child proof container serves to minimise the possibility that your child OR other children can independently access the medication). The zip locked bag must be handed by the parent/guardian to the bus attendant who will pass it to the adult receiving children from the bus. **As stated above, it is the parent's responsibility to inform the teacher (via the Authorisation to administer medication form) that their child has medication to be administered.**
- We seek parental co-operation in ensuring that medication brought to school/preschool is stored in the original container in which the drug was dispensed. This container must be clearly labelled with the **child's name; dosage instructions and expiry date** (i.e. the medical practitioner's instructions). These details are essential if staff members are to accept responsibility for administering the medication;
- Please **do not** decant medication from the original container or request that staff administer medication for any child other than the child whose name appears on the labelled medication container.
- In situations of long term/chronic illness both medication and the equipment used to administer the medication e.g. asthma inhalers, EpiPens, must remain at the preschool.

We ask that parent's accept full responsibility for ensuring the currency of this medication

Evaluation of this policy:

A review of this policy and implementation procedures will be conducted every two years. This review will be undertaken in collaboration between Principals and staff of the EtonHouse Education Centre.

Reference:

Aronson, S. (2002). *Healthy young children: A manual for programs*. Washington: NAEYC.