



PROCEDURE

1. Purpose

1.1 The purpose of this procedure is to facilitate safe systems of work that ensure student and staff safety, support schools to satisfy all legal and regulatory requirements and to outline the processes relating to:

- (a) administering medications to students when attending school or non-school related activities;
- (b) the receipt, possession, storage and disposal of medications for students;
- (c) responding to medication incidents and medical emergencies.

1.2 This procedure applies to all BCE schools during school hours and all school activities such as excursions, camps, sporting events and international travel.

2. Roles and Responsibilities

Principal	<ul style="list-style-type: none">• Comply with the authorisation provided under the Medicines and Poisons Act 2019 (Qld) to possess and administer medications.• Implement a Substance Management Plan (SMP), ensuring review of the plan at least annually and communication of the plan to all staff at the school.• Comply with all requirements of the school SMP and this procedure.• Allocate resources including sufficient staff to implement the school's SMP and safe administration of medication.• Delegate handling and administration of medication duties to appropriately trained staff.• Ensure all First Aid Officers have completed annual anaphylaxis and asthma training.• Ensure all staff delegated to receive, handle and administer medications have completed annual training.• Ensure all staff delegated to administer medication have an up to date first aid certification.• Engage in regular communications with parents/legal guardians about their requirements for student medication through multiple channels.• Ensure processes are in place to communicate a student's medication needs to relevant staff.• Ensure medication incidents are recorded in WSS and fully investigated.• Assess the risks associated with medications storage and handling for the school.
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	<ul style="list-style-type: none">• Maintain confidentiality of health-related information and records.• Provide opportunities for students that require medications to fully participate in school activities.
Staff delegated to receive and handle student medications	<ul style="list-style-type: none">• Comply with all requirements of the school SMP and this procedure.• Ensure student medication received by the school complies with the packaging and labelling requirements set out in this procedure.• Ensure documentation and forms relating to student medication is current and support safe medication administration.• Ensure accurate record keeping for all medication handling.• Provide up-to-date alerts to staff on medication requirements of students in their care.• Contact parents for renewal of plans and expired medications.• Maintain up-to-date training including annual iLearn training BCE08881 Medication Safety: Medication to Students.
Staff delegated to administer medication to students	<ul style="list-style-type: none">• Comply with all requirements of the school SMP and this procedure.• Adhere to the 5 'rights' of safe medication administration when administering medication to students.• Maintain current first aid certification.• Maintain up-to-date training in asthma and anaphylaxis to safely administer emergency medication.• Maintain up-to-date training including annual iLearn training BCE08881 Medication Safety: Medication to Students.• Complete additional relevant training as identified in the Annual First Aid Risk Assessment or Individual Student Health Support plans.
First Aid Officers	<ul style="list-style-type: none">• Maintain up-to-date training in asthma and anaphylaxis.• Purchase emergency medications as required, using the Purchase Order for buying EpiPen & Asthma inhaler stock.• Implement Action Plans.• Administer emergency medications.
All staff supervising students	<ul style="list-style-type: none">• Review and understand the school's SMP.• Be aware of children with medical conditions in their care.• Maintain up-to-date training in asthma and anaphylaxis to safely administer emergency medication.• Know where emergency medication is kept for students in their care.• Ensure that all medication and first aid needs are met when attending off-site activities e.g., excursion, sporting event.

3. Requirements

3.1 Medication at Schools

All BCE schools must have medical authorisation and parent/guardian consent to administer medications to students. The only exception to this is medication used for emergency first aid response, which has been purchased by the school (specifically adrenaline autoinjectors and asthma reliever inhalers).

3.1.1. Medication includes:

- non-scheduled and schedule 2 (S2) medications (pharmacy and 'over-the-counter' medicines);
- schedule 3 (S3) medications (pharmacist only medicines);
- schedule 4 (S4) medications (prescription only medicines); and
- schedule 8 (S8) medications (controlled drugs).

3.2 Substance Management Plans (SMPs)

All schools must have a SMP in place prior to handling, storing or administering medications at school. SMPs must be developed using the [BCE Substance Management Plan Template](#).

The SMP must clearly detail the processes in place at the school for receiving, administering, storing and disposing of medication. SMPs must be communicated to all BCE staff working at the school.

SMPs must be reviewed as soon as practicable following an incident and at least every 5 years from the date of the last review.

3.3 Students with medication requirements

3.3.1. Parent/Guardian to notify school

Parents/guardians are to advise the school as soon as possible when medication is required to be administered to a student at school.

Schools should regularly communicate to parents/guardians about administration of medications at school.

The [request to administer medication form](#) must be completed by a parent/guardian for all medication that needs to be administered by school staff.

The parent/guardian consent form must be updated at the beginning of the school year and when any changes occur to a student's medication requirements. This includes ceasing medication.

The first dose of a new medication should not be administered at school, due to the potential dangers of an adverse reaction.

3.3.2. Principal Approval

The Principal, and their delegate, must consider the available information to determine if the school has the capability to safely manage all aspects of medication handling including:

- student plans, including self-administration and associated controls;
- Substance Management Plan; and
- Medical Emergency Plans.

The Principal, and their delegate, has the right to [request additional medical advice](#) to assist in this process.

Students with medical conditions that require:

- the administration of emergency medication;
- additional health support in addition to medication; or
- additional support or training of school staff for safe administration of medication

must have an [Individual Health Support Plan](#). Refer to the [BCE Individual Health Support Plan Handbook](#).

3.3.3. Recording medication requirements

Student medication requirements must be recorded and updated in eMinerva.

3.4 Receiving Medication

All schools must consult the [BCE Handling and Storage of Medication Handbook](#) when implementing processes for receiving medications for students. Receipt and return of medications from Parents/Legal guardians must be documented using the [Student Medication – Parent/Legal guardian Supply & Return](#) form.

3.4.1 Medical Authorisation

Medical authorisation is provided via a pharmacy label (attached to the original or pharmacy-dispensed packaging) indicating the medication has been prescribed to the student by an authorised registered health practitioner. The pharmacy label should detail when and how the medication is to be administered.

The only exception to medical authorisation is medication purchased by the school which is administered for emergency first aid response, specifically adrenaline autoinjectors and asthma reliever inhalers.

The [request to administer medication form](#) must be provided by the parent/guardian prior to, or when supplying medication to the school.

3.4.2 Packaging, Labelling and Equipment

Medication must be supplied to the school by a student's parent/legal guardian, except where self-administration is approved. Medication supplied by a student will not be accepted, unless exceptional circumstances exist, such as independent students, adult students, etc. These arrangements must be clearly documented.

Only school staff designated in the school SMP are to receive medication to ensure the medication complies with the packaging, labelling and documentation requirements.

All medication must be received in its original or pharmacy-dispensed packaging with a pharmacy label attached.

The pharmacy label must include:

- name of the person authorised to take the medication (student);
- strength of the medication in the packaging;
- dosage to be taken;
- date and/or time to be taken;
- registered health practitioner's name and date prescription dispensed; and

- instructions/information for safely administering medication, if required (e.g. to be taken with food, etc.).

Parents/guardians must provide all dosing equipment (e.g. cups, crushers, etc) required to facilitate safe administration of medication by school staff. This does not include pill-cutters. Where a student is prescribed a dose of medication that requires a tablet to be cut, the medication must be pre-cut and packaged by a pharmacist in a dose administration aid (e.g. Webster-pak).

3.4.3 'As needed' medications

Where the pharmacy label states that a medication is to be provided "as needed", "as required" or "PRN" (pro re nata) etc., written instruction from the student's registered health practitioner must be received by the school prior to administering the medication. Written instructions must be provided in the following approved form:

- an Asthma Action Plan; or
- an Anaphylaxis Action Plan; or
- a medication order for insulin with a diabetes management plan; or
- a completed [BCE Medication Administration Instructions](#) form.

A [Medication Administration Instruction](#) form will also be required where there is insufficient information on the pharmacy label and/or associated action/management plans to enable safe administration of medication, such as changes to dose, time of administration, signs/symptoms to indicate the need for medication administration, etc.

3.5 Storing Medication

3.5.1 S8 medicines and S8 safes

All schools that possess S8 medicines for administration to students must establish an S8 safe. For a school, an S8 safe is a lockable room, hardwood or metal cupboard or drawer.

The Principal must appoint, in writing, an appropriate person/s to establish the S8 safe and an appropriate person/s to manage the S8 safe.

Access to the S8 safe is authorised, in writing, by the appointed S8 safe establisher. Access to the key for the S8 safe must be strictly controlled to prevent unauthorised access. The S8 safe must be closed and locked at all times, except for the purposes of taking out or putting in S8 medication.

Medication must not be taken from the S8 safe unless the medication is intended for supply, administration or reconciliation of the S8 safe. Any medication taken from the S8 safe must not be left unattended.

An S8 medicines register must be retained in the S8 safe to record when each type of medicine is added to or removed from the safe and the amount of each type of S8 medicine held in the safe at any given time. Access to the register is authorised, in writing, by the S8 safe manager. S8 medicine registers must be kept intact, for two years after the last entry in the register is made.

The S8 safe manager must notify the Chief Executive of Queensland Health ([in the approved form](#)) if an S8 medicine register is lost, stolen or destroyed within the two year retention period . Notice must be given **no later than the end of the next business day from the time the S8 Medicine Register is lost, stolen or destroyed.**

The S8 safe manager must reconcile S8 medication quantities held in the safe against the register quantities at least monthly, or more frequently as detailed in the school SMP.

All schools that possess S8 medicines must comply with the requirements for establishing and managing an S8 safe and S8 medicines register detailed in the [BCE Handling and Storage of Medication Handbook](#).

3.5.2 S2, S3 and S4 medicines

All schools that possess S2, S3 and S4 medicines for administration to students must establish a medicine store. The Principal must appoint, in writing, an appropriate person to establish the medicine store and an appropriate person to manage the medicine store.

The type and location of the medicine store must ensure that:

- students and non-school persons cannot access the store without being seen by school staff; and
- medicines are stored in accordance with the manufacturer's instructions.

All schools that possess S2, S3 and S4 medicines must comply with the requirements for establishing and managing a medicine store detailed in the [BCE Handling and Storage of Medication Handbook](#).

3.6 Administering Medication

A school must not administer medication without appropriate medical authorisation from the student's authorised registered health practitioner and parent/guardian consent.

The only exception to this, is medication administered as part of emergency first aid response to anaphylaxis or asthma.

3.6.1 Resourcing and training

- An adequate number of trained staff must be available at school and during non-school related activities (excursions, camps, sports carnivals, etc.) to safely administer medications to students, including emergency medications.
- The administration of medication to students are voluntary duties unless it is detailed within the scope of an employee's contractual obligations.
- All staff involved in administering medication must complete:
 - iLearn training BCE08881 Medication Safety: Medication to Students on an annual basis;
 - anaphylaxis and asthma training on an annual basis;
 - first aid certification and maintain currency; and
 - any other training necessary to safely administer specific medications as identified/recommended by the student's registered health practitioner.

3.6.2 Safe administration of medication

The [BCE Administering Medication to Students Handbook](#) provides additional information to assist schools in complying with this procedure.

- Two trained staff (administering staff) must be involved in administering medication to a student.

- Administering staff must observe standard infection control precautions for administering medication.
- Administering staff must adhere to the "[5 rights of safe medication administration](#)".
- If any of the "5 rights" are unable to be met, medication must not be administered and staff must seek advice from the Principal.
- Medication must be administered from the original/pharmacy dispensed packaging. Medication must not be removed from the original/pharmacy dispensed packaging and repackaged into another container for administration at a later time.
- The school must not administer medication outside of the medical authorisation regardless of parent/guardian consent. For example, if a student misses their morning dose of a scheduled medication at home, the school cannot administer the missed dose as this is outside the school's medical authorisation.

3.6.3 "As needed" medication

- "As needed" medication cannot be administered without medication administration instructions provided by the student's registered health practitioner. Instructions must be provided in a form detailed in section 3.4.3.
- Follow the student's medication administration instructions.
- Prior to administering medication, contact parent/legal guardian to confirm when the student last had a dose of the medication.
- Seek confirmation from the Principal or, in their absence, their delegate to determine if the medication is to be administered or not.
- Comply with all requirements detailed in 3.5.2 [Safe administration of Medication](#)
- Contact parent/legal guardian to inform them if medication has been administered and the time of administration.

3.6.4 Medication for Emergency Conditions – early and emergency response medication

- Follow the student's Action, Management or Emergency Response Plan (**Plan**) and administer medication without delay.
- Comply with all requirements detailed in 3.5.2 [Safe administration of Medication](#) when administering early response medication.
- As required by the Plan, immediately phone emergency services (000), request ambulance services, stay on the phone and follow any advice.
- Complete a WSS Incident and Injury Report form and follow the relevant actions in the [BCE Incident Management and Investigation Procedure](#).

3.6.5 Recording administration

Staff are to record the administration of routine medication, as needed medication and medication for Emergency Conditions in the required medication log or register for the student every time medication is administered, including:

- [Routine Medication Log](#)
- ['As needed' Medication Log](#)
- [Emergency Conditions Medication Log](#)
- S8 Medicines Register – registers are available through the HSW team
- Off-campus Activities S8 Medication Log

All schools must comply with the requirements for recording medication administration detailed in the [BCE Administering Medication to Students Handbook](#).

Administration of emergency first-aid medication to a student who does not have a medication log will be recorded in the WSS Incident Report in accordance with the [BCE Incident Management and Investigation Procedure](#).

3.7 Self-administration

Self-management of health conditions encourages students to build independence, recognise the signs and symptoms of their health condition, and administer their own prescribed medication, either routinely or as needed. Schedule 8 medications are not approved for self-administration.

Self-administration in schools is subject to:

- the student and their parent/guardian completing the [Request for Student to self-administer Medication form](#);
- consideration of the information provided in the request form, the safety and maturity of the student, storage of medication and dosing equipment, emergency management and support required; and
- approval by the Principal after consideration of all available information.

Approval may be refused or withdrawn by the Principal at any time, based on the risks and impacts to the school, including staff and other students. All schools must comply with the self-administration process detailed in the [BCE Administering Medication to Students Handbook](#).

The use or possession of 'over-the-counter', pharmacy or prescribed medications by students is not permitted in BCE schools or during school activities, unless the student has Principal approval for self-administration.

3.8 Medication Return and Disposal

Schools must not store medication that is:

- no longer required to support a student's health needs (e.g. excursion finished, medication changed, medication ceased, end of school year); or
- not suitable to administer (i.e. passed its expiry date or was not stored per manufacturer's instructions).

Medication that is no longer required must be collected by the parent/legal guardian. Medication must not be sent home with a student. Medication that is no longer suitable to administer must be disposed of at a pharmacy. Following reasonable notice (as determined by the Principal) to a student's parent/legal guardian, any unclaimed medication will be taken to a pharmacy for disposal.

Medication that becomes contaminated during administration (i.e. when it is dropped on floor, or when dosing equipment for another medication is used etc.), is not suitable to administer and must be disposed of.

Medication that is spat out must be disposed of and a subsequent dose of medication must not be administered to the student.

Medication must not be disposed of by pouring down a sink, flushing down a toilet, or sending to landfill and may only be disposed of by taking it to a pharmacy for disposal.

The disposal of medication must be recorded in the student's medication log or S8 Medicines Register. Refer to [*BCE Handling and Storage of Medication Handbook*](#).

3.9 Medication incidents

All medication incidents or loss/theft of medication must be reported, reviewed, investigated and corrective actions taken in accordance with the [*BCE Incident Management and Investigation Procedure*](#).

3.9.1 Critical medication incidents

- Unauthorised drug – administered medication to the wrong student or administered wrong medication to a student.
- Incorrect dose (high) – administered a higher dose of medication than authorised.
- Omission (critical) – routine medication was missed due to school error resulting in a significant health impact/s for the student.

The Principal or, in their absence, the delegate must be notified immediately of any critical medication incidents. The Principal or, in their absence, the delegate must ensure that the student's parent/legal guardian is notified as a matter of urgency.

If a student is administered an unauthorised drug or incorrect dose (high), the student must be closely monitored by the first aid officer.

- If any immediate adverse reaction occurs, administer first aid and call 000 straightaway.
- If there is no immediate adverse reaction, phone Poisons Information Centre on 131 126 and follow their advice.

The Principal or, in their absence, the delegate is to notify the HSW Partner/Officer, BCE Legal team and BCE Insurance team as soon as possible following a critical medication incident.

3.9.2 Non-critical medication incidents

- Incorrect dose (low) – administered a lower dose of medication than authorised.
- Wrong time – medication administered outside the administration window.
- Omission (non-critical school error) – routine medication was missed, without significant health impact for the student, due to school error.
- Omission (non-attendance) – routine medication was missed due to student not attending for medication.
- Unable to administer – medication could not be administered due to the medication not being provided by the parent/guardian or medication was not suitable to administer (expired, not stored correctly, contaminated etc.).
- Refusal – student refused to take medication or medication was spat out.

All non-critical medication incidents must be notified, as soon as possible, to the Principal or, in their absence, the delegate, who will ensure the student's parent/guardian is notified before the end of the school day.

All medication incidents must be recorded on the student's medication log.

3.9.3 Lost or stolen S8 medication

In circumstances where S8 medication is unaccounted for, the Principal or, in their absence the delegate must be immediately notified. The Principal/delegate is to notify the HSW Partner/Officer, BCE Legal team and BCE Insurance team as soon as possible following suspected lost/stolen S8 medication. Immediate action must be taken to locate the unaccounted for S8 medication.

Where a Principal and/or their delegate reasonably suspects that any quantity of S8 medicine has been lost or stolen, they must notify the Chief Executive of Queensland Health ([in the approved form](#)) and the Queensland Police Service (via Policelink 131 444) **immediately or no later than one (1) business day from the time that the reasonable suspicion is formed.**

3.10 Off-campus activities (excursions, camps, sporting events, etc)

Schools must comply with section 3.6 [Administering Medication](#) for all off-campus activities where medication administration is to occur.

Schools must ensure that reasonably practicable controls are implemented when medication administration occurs outside of the normal student medication processes. School-specific controls that must be adhered to for all off-campus activities are to be detailed in the school SMP. Additional controls may be required specific to the off-campus activity or student requiring medication administration. These controls must be detailed in the risk assessment for the off-campus activity.

The [BCE Handling and Storage of Medication Handbook](#) provides guidance on risk management strategies for off-campus activities.

3.11 Emergency First Aid Medication

All staff who have completed training in anaphylaxis and/or asthma are authorised to possess and/or administer an EpiPen or asthma puffer in response to emergencies for cases of asthma or anaphylaxis. Trained staff are to use the [BCE Purchase Order for Buying EpiPen & Asthma Inhaler stock](#) form to purchase stock of emergency first aid medication for the school.

Any school staff member, regardless of training can administer an EpiPen to a student in an emergency. As the administration of these medicines can be lifesaving, any delay to administer may put a student at risk. Schools should strongly consider providing asthma and anaphylaxis training to all staff to enable immediate emergency response.

4. Compliance Monitoring

Non-compliance with this procedure is a breach of the Catholic Education Archdiocese of Brisbane Code of Conduct.

Compliance with this procedure will be monitored by:

Role	Compliance responsibilities
Manager – Health, Safety and Wellbeing	<ul style="list-style-type: none"> monitor compliance with this procedure and report frequent and/or serious non-compliance to senior management.

5. Associated Documents

- 5.1 Catholic Education Archdiocese of Brisbane Code of Conduct
- 5.2 *Medicines and Poisons Act 2019* (Qld)

- 5.3 *Medicines and Poisons (Medicines) Regulation 2021* (Qld)
- 5.4 [Queensland Health Departmental Standard](#)
- 5.5 [Reporting lost or stolen medicines - s226 MPMR | Queensland Health](#)
- 5.6 Therapeutic Goods (Poisons Standard—October 2024) Instrument 2024 (Cth)
- 5.7 Work Health and Safety Act 2011 (Qld)
- 5.8 *Work Health and Safety Regulation 2011* (Qld)
- 5.9 [BCE Handling and Storage of Medication Handbook](#)
- 5.10 [BCE Administering Medication to Students Handbook](#)
- 5.11 [BCE Incident Management and Investigation Procedure](#)
- 5.12 [BCE Individual Health Support Plan Handbook](#)
- 5.13 [BCE Alcohol and drug related incidents Procedure](#)
- 5.14 [Safeguarding Policy.](#)

6. Definitions

5 'rights' of medication administration	<p>BCE uses the 5 'rights' of safe medication administration to minimise the risk of errors when administering medication to students. The 5 'rights' are a series of confirmation steps that must be performed PRIOR to administering any medication to a student. Staff administering medication must check:</p> <ul style="list-style-type: none"> • 'right' student; • 'right' medication; • 'right' dosage; • 'right' time; and • 'right' route.
'As needed' Medication	Medication that is administered on an 'as needed' or 'as required' basis, when specific signs and symptoms present. School staff must follow the medication administration instructions.
Authorised registered health practitioner	A person registered under the Health Practitioner Regulation National Law, who is authorised to prescribe medication. Authorised registered health practitioners include medical doctors, dentists, optometrists, nurse practitioners and midwife practitioners.
Emergency Conditions Medication	Medication that is administered for life-threatening health conditions such as anaphylaxis, asthma, etc. Emergency Conditions medication will be prescribed for students with these conditions and this medication must be given immediately, without delay. Early response medication may also be prescribed which is given when mild to moderate signs/symptoms are presented, e.g. antihistamines. School staff must follow the student's action plan.
Emergency first-aid medication	Emergency first-aid medications are adrenaline (epinephrine) auto-injectors (EpiPens) and blue inhaled asthma relievers (asthma puffers). These medications can be administered without medical authorisation.



Medicines	<p>The Poisons Standard defines medicines as “<i>poisons for therapeutic use</i>”. Poisons are defined as an ingredient, compound, material or preparation which may cause harm. Most medicines are classified into schedules under the Poisons Standard to control the risk to public health, however other medicines are not scheduled.</p> <p>Regardless of scheduling under the Poisons Standard, BCE has determined that all medicines intended for administration to students at school or during school-based activities must be medically authorised to minimise the potential risk of harm.</p> <p>For the purposes of this procedure, ‘medication’ and ‘medicine’ bear the same meaning.</p>
Review Incident	<p>A Review Incident includes:</p> <ol style="list-style-type: none"> (1) where there is a substantial change to the internal or external operations related to the dealings at, or in connection with, the school (e.g. where there is change of authorised person (principal) or delegates, a change to the type of medication possessed and administered, a change to or installation of a new medicine store or S8 safe); (2) a non-compliant audit outcome results in new risks being identified or recommendations to modify how known and foreseeable risks related to dealings with medicines are managed; (3) a systemic issue is identified as a result of: <ul style="list-style-type: none"> • failure of risk-management systems for dealings in the SMP contributing to a critical or major incident; or • a recurrence of undesirable incidents related to dealings with medicines (e.g. loss or theft of medication); or • a pattern of non-compliance with legislation, codes of practice or other requirements, including the school SMP, across a substantial number of staff.
Routine Medication	<p>Medication that is administered at a scheduled time each day. This will include medications administered for both short-term and long-term periods.</p>
Schedule 2 (S2) medications	<p>Pharmacy medicines - substances which may require advice from a pharmacist and are available from a pharmacy or licensed person. PHARMACY MEDICINE will be clearly displayed on the primary packaging.</p>
Schedule 3 (S3) medications	<p>Pharmacist only medicines - substances which require professional advice but are available from a pharmacist without a prescription. PHARMACIST ONLY MEDICINE will be clearly displayed on the primary packaging.</p>
Schedule 4 (S4) medications	<p>Prescription only medicines - substances which are prescribed by a treating health practitioner and available from a pharmacist on</p>

	prescription. PRESCRIPTION ONLY MEDICINE will be clearly displayed on the primary packaging.
Schedule 8 (S8) medications	<p>Controlled drugs - substances which are restricted for supply, possession and use to reduce abuse, misuse and physical or psychological dependence. These substances are prescribed by authorised treating health practitioners and available from a pharmacist on prescription. S8 medications include Methylphenidate (<i>Ritalin, Artige, Concerta, etc</i>), Dexamfetamine sulfate (<i>Aspen, Sigma, etc</i>), Lisdexamfetamine (<i>Vyvanse</i>), etc.</p> <p>Strict regulatory controls are in place for the possession of S8 medications in schools.</p> <p>CONTROLLED DRUG will be clearly displayed on the primary packaging.</p>
Unscheduled medications	These are medicines that are not scheduled under the Poisons Standard and include alternative medicines, supplements, vitamins, some analgesic (paracetamol/ibuprofen) products, etc.

Document Control

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