ADMINISTRATION OF MEDICATION

Reference	WHS_P159/03/24	Date approved	27 March 2024
Approved by	Director of Organisational Services	Date for review	27 March 2027

INTRODUCTION

This procedure details the requirements Townsville Catholic Education (TCE) schools must comply with to reduce the risks associated with the administration of medication to students for:

- prescription medication (included scheduled drugs, complex and long-term medication)
- over the counter medication e.g., Paracetamol etc.
- emergency medications.

This procedure applies during school hours and all school-related activities, including excursions, camps, sporting events and international travel.

SCOPE

This procedure applies to the Townsville Catholic Education Office and all systemic Catholic Schools and Colleges under the guidance of the Townsville Catholic Education Office.

OVERVIEW

The administration of medications to students is only to occur when necessary, during school hours or school-related activities, and when there is either medical authorisation for its administration or it is required as an emergency first aid response.

PROCEDURE

1.0 Substance Management Plans (SMP's)

A substance management plan (SMP) is a legislative requirement under the *Medicines and Poisons Act 2019. A* SMP is a document that details how risks associated with buying, possessing, administering and disposing of medications are managed and is a mandatory requirement for all schools to have in place. The principal must ensure a SMP has been developed and that assigned staff responsible for administering medication are to be familiar with the SMP and its requirements.

Refer to the TCO Sharehub/WHS/Medications for a template and guidance for developing your schools substance management plan.

The principal or delegate is responsible for reviewing the SMP every 5 years, or in response to certain incidents/events, these incidents/events include:

- when there are substantial changes to internal or external operations (e.g. change of principal)
- a non-compliant audit outcome

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- a systemic issue is identified as a result of failure of risk-management systems contributing to a critical or major incident
- a recurrence of undesirable incidents related to dealings with medicines
- a pattern of non-compliance with legislation, codes of practice or other requirements, including an SMP, across a substantial number of staff.

2.0 Types of Medications

Students may require medication to manage ongoing health disorders or conditions, short-term illnesses or in a medical emergency. For the purposes of the administration of medication in school procedure, medications can be described as 'routine', 'as-needed', or 'emergency first aid'.

Table 1: Medication Authorisation Requirements

MEDICALLY AUTHORISED FOR A SPECIFIC STUDENT				
Type of medication		**Description**	**Examples**	**Required Forms**
Routine	Short term	Required over a short period of time for the treatment of an acute condition e.g. infection.	• antibiotics • ointments • eye drops • ear drops	• Consent to administer medication at School Form - Part A
	Long term	Required over a long period of time for the ongoing management of a specific disorder	• Ritalin • enzyme tablets • insulin • anti-epileptic medications	• Consent to administer medication at School Form - Part A
As needed	Non-emergency response	Required as a non-emergency response to certain symptoms (e.g. rash, irritated eyes), in accordance with a medication order.	• antihistamines • topical creams/ointments for allergies	• Consent to administer Medication - Part A & Part B
	Emergency response	Required as an emergency response for medical conditions (e.g. epilepsy, anaphylaxis, asthma) in accordance with a medication order / a health plan / written instruction from a prescribing health practitioner.	• Midazolam • adrenaline auto-injector • asthma reliever • Solu-Cortef • GlucaGen	• Consent to administer medication at School Form Part A & Part B • Health Plan (e.g Asthma/Anaphylaxis)
NOT MEDICALLY AUTHORISED FOR A SPECIFIC STUDENT				
Emergency first aid medication		Retained in the school's first aid kit and used as a first aid response to asthma and anaphylaxis. Dispensed in devices that non-medical personnel can be trained to use.	• adrenaline auto-injector • blue asthma reliever	
Refer to S3.1 for alternative medical authorisations				

3.0 Approval process for the administration of medications

For medication to be administered at school or during school-related activities, there must be medical authorisation for the student to have that medication, and the medication must be in its original container with intact packaging.

Refer to Table 1: Medication Authorisation Requirements for an overview of the type of medications and approval forms required.

Approval is to be obtained:

- For each type of medication administered.

- If changes occur to the dosage requirements or administration requirements of the medication.
- When medication changes occur (e.g. by providing an accompanying letter/action plan from the prescribing health practitioner).

For Boarding Schools where enrolment processes incorporate consent for the School's Registered Nurse to administer specific over the counter medications (e.g. ibuprofen, paracetamol, anti-histamine), the Consent to Administer Medications form does not apply. These OTC medications are to be administered under the direction of the Registered Nurse and recorded on the Record of Administration Form and/or the Boarding Management System (Reach).

3.1 Consent to Administer Medication Form

The Consent to Administer Medication form must be completed by the parent/carer for all medication that is prescribed by a health practitioner. Consent forms and associated documentation must be recorded in Compass, refer to the guide: Management of Student Medications in Compass.

Part A of this form is required to be completed for all medications administered to a student.
Part B of this form is required when the school needs more information from the prescribing health practitioner:

- As part of an emergency response in the form of a 'Health or Action Plan'
- For the administration of Insulin
- For 'as needed' medications (but not an emergency response)

A prescribing health practitioners letter or detailed health plan my be substituted for Part B if all required information is included.

Part B or alternative accepted medical authorisation is required as the school needs clear instructions to enable non-medically trained school staff to safely administer the medication.

Part C of this form is to request approval for students to self-administer medications.

3.2 Accepted Types of Medical Authorisation

For the purposes of this procedure, medical authorisation may take the form of:

- A prescribing health practitioner's letter.
- A detailed health plan (signed by the prescribing health practitioner).
- The medication with a current pharmacy label with a prescribing health practitioners name listed.
- Completion of TCE Part B - Consent to Administer Medication Form or other Medication Order.

A prescribing Health Practitioner is defined as a qualified health professional who has completed the appropriate training, giving them the authority to prescribe certain medications under the Medicines and Poisons (Medicines) Regulation 2021 (Qld) e.g. doctor, dentist, optometrist, nurse practitioner. A pharmacist, naturopath or herbalist is not a prescribing health practitioner.

Refer to the Table 1: Medication Authorisation Requirements, to determine when each form is required.

3.3 Review of Requests to Administer Medications

The principal or delegate is required to review the medication administration requests and associated information. It is the Parents/Carers responsibility to ensure the required forms and information is provided.

The principal or delegate must consider the following:

- Is the correct documentation provided?
- Where will the documents be kept so they are accessible by staff?
- Where will the medication be stored? Does the school have an appropriate area for storage?
- Have procedures been set up for the recording of medication administration within the school?
- Are there any specific disposal requirements e.g. sharps containers?
- What is the process for the transport of medication and is it required to travel with student e.g. excursions.

- Does the request include for the student to self-administer the medication? If yes, has a risk assessment been completed?
- Who needs to be informed/Which staff will administer medication?
- Have staff received the appropriate training for the administration of the medication being required or is further training required?
- Are there any other risks associated with the medication use within the school environment ie. side effects.
- Consider any additional communication requirements for complex health care needs.

Note: Students with complex health care needs will require further consultation with parents/carers and/or staff as there may be additional staff willingness, capability and competency requirements to consider. Requests for invasive administration techniques require review and approval by the principal in consultation with school leaders utilising a risk management approach.

Principals may consult with TCEO WHS, Student Protection and/or Inclusive Education teams to support them in their decision-making.

Once assessed the principal or delegate is to communicate relevant information/procedures to staff supervising students with health conditions.

Pill cutters

Where the dosage of medication requires tablets to be cut, Schools are to request that parents/carers supply a pill cutter, labelled with the student's name. The pill-cutter is to be stored with the student's medication and not used for other students' medication – to reduce the risk of cross-contamination. The remainder of a cut tablet is to be returned to the container or blister pack.

4.0 Administration of Medication

- Staff administering medication must be authorised by the principal and appropriately trained in accordance with Section 14.0 Training of staff.
- Two members of staff must confirm the correct medication and dosage is being administered to the correct student for all medication. This is to reduce the likelihood of medication errors.
- Self-administration by students must be approved by the Principal or delegate in accordance with Section 5.0 Self administration of medications.
- When administering medication, staff are to follow the 7 RIGHTS of safe medication administration to avoid medication errors.
- Standard precautions for infection control are to be observed when administering medication. Refer to Qld Health for further information on standard precautions.
- Record medication administration on the Record of Medication Administration Form
- Staff are to respond in accordance with first aid procedures in the event of any side effects or medication errors.
- The staff member responsible for administering medication must monitor medication expiry dates and notify parents/carers if the medication is approaching the expiry date.
- In the event of medication refusal, notify the principal or delegate and classroom teacher. The Parent/carer is to be contacted to determine risks and any further actions.

4.1 Administering Emergency Medication

Where administration is part of an emergency response, follow the Students' Action Plan and administer the medication without delay. Follow first aid procedures and call emergency services 000. Notify parents/carer and record the incidence in the student management system (ie. Compass) and follow TCE Incident Reporting Procedures. Ensure emergency medications are replaced.

4.2 Record Keeping

Medications administered, must be recorded on the Record of Medication Administration Form. Medication errors, side effect, and any dose refusals must be recorded in Compass. Refer to the guide: Management of Student Medications in Compass for further instructions on recording in Compass.

Medication errors must be reported via the TCE Incident Reporting Procedures.

4.3 Side Effects

All medications have the potential to cause side effects. Where possible (e.g. for a new routine medication), it is recommended that parents/carers administer the initial dose/s to their child prior to requesting that the school administer it. In this way, parents/carers can determine if their child experiences any side effects and inform the school so that staff can more effectively monitor the student's condition and contact parents/carers if there are any concerns.

Follow first aid procedures and record the incident in the student management system (Compass), notify the principal/delegate and parent/carer. Incidents are to be reported via the TCE Incident Reporting Form in accordance with Incident Reporting Guidelines and Compass.

4.4 Medication Errors

Medication errors are any preventable error in administration and include errors that result in harm to a student as well as errors that do not result in harm. A medication error includes any failure to administer medication as prescribed, such as administering:

- the wrong medication to a student
- medication at the wrong time
- an incorrect dose of medication to a student.

In the event of a medication error staff must follow first aid procedures, notify the principal/delegate and parent/carer.

Record the incident in Compass regardless if the student becomes ill or not, medication errors including critical incidents must be reported via the TCE Incident Reporting Form in accordance with Incident Reporting Guidelines.

The principal or delegate is to review medication errors to determine cause and implement actions to prevent reoccurrence.

Critical Incidents include if a student has collapsed, is not breathing or has difficulty breathing, severe nausea or vomiting, other severe reactions (hives, swollen lips, face, gone pale, sweating, chills) or the student has consumed unauthorised medication with or without an observable reaction.

5.0 Self-administration of medications

Contemporary management of chronic 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.

NO student should be solely responsible for self-administering emergency medication, as their symptoms may compromise their ability to do so.

The principal **CANNOT** approve students who are prescribed Controlled Drugs (e.g. Ritalin or Dexamphetamine) to personally manage and self-administer this medication. These medications must be stored securely in a locked location (e.g. locked cabinet or drawer) when not being administered. They must only be administered by assigned school staff.

Controlled drugs - refers to a medicine in Schedule 8 of the Poisons Standard as defined in section 11 of the *Medicines and Poisons Act 2019.* Refer to the medicine packaging where it will state 'Controlled Drug' to identify these substances.
Controlled drugs may be prescribed for conditions such as treatment of insomnia, anxiety, severe pain, and attention-deficit/hyperactivity disorder. Typically, these types of medication present a higher risk to the community and are more commonly misused.

Routine medications

Some students require routine administration of medication to manage their health condition. These may include:

- the injection of insulin for diabetes
- inhaling preventative medication such as Ventolin for asthma
- orally administering enzyme replacements for cystic fibrosis
- applying medicated ointment to the skin.

The principal/delegate, in consultation with the student, their parent/carer and their health team, can implement an approval process to allow a student to self-administer their medication, with the exception of controlled drugs.

- Use the TCE Risk Assessment for determining self-administration form and, in consultation with parent/carers/student and their health team consider the factors and risks involved in the safe self-administration of medication. Use caution when considering requests in relation to young students e.g. those under 10 years of age.
- Approved students are to be responsible for possession and self-administration of medication only when it is considered that the student can confidently and competently undertake safe self-administration of medication at school.
- Document any discussions with the parent/carer and record in the student management system (Compass).
- Ensure relevant staff are aware of students who are self-administering and self-managing their medications and any association Health plans and emergency response requirements.

6.0 Health plans

Health Plans is an overarching term describing documents completed by qualified health practitioners which provide the school with directions or guidelines to manage student's health support needs. Health plans include Action Plans, Emergency Health Plans and Individual Health Plans.

Individual Health Care plans may include:

- instructions about the storage and administration of medication
- scales for insulin or varied doses of stimulant medication based on behaviour
- information about side effects and their management.

A detailed Health Plan signed by a prescribing Health Practitioner is accepted as medical authorisation and are required to be reviewed annually. A students Health Plan is to be documented in Compass, refer to the guide: Management of Student Medications in Compass.

7.0 Emergency medications

Schools in accordance with the TCE First Aid Management Guideline maintain two types of emergency first aid medications in their (most accessible) first aid kits:

- adrenaline auto-injector/s (e.g. EpiPen), and
- asthma reliever/s (with spacer).

Emergency first aid medications may be administered as a first aid response to students, staff or other visitors on the school site if they:

- are undiagnosed and have their first reaction at school
- are diagnosed and require additional medication (e.g. requiring a second dose)
- there are issues with their own prescribed medication (e.g. due to misfiring, or their medication is empty or unavailable).

Parents/carers of a student requiring emergency medication shall provide the school with a Health Plan that is signed by the prescribing health practitioner as outlined in Table 1: Medication Authorisation Requirements, along with supporting information.

8.0 Over the Counter Medication (OTC) - Non-Prescribed

OTC medications are those that can be purchased from pharmacies, supermarkets, health food stores and other retailers without having a prescription. Examples include cold remedies, cough syrups, anti-fungal treatments, non-prescription analgesics such as paracetamol as well as alternative medicines (traditional or complementary) such as herbal, aromatherapy and homeopathic preparations, vitamins, minerals and nutritional supplements.

Whilst parents/carers may administer OTC medications to their child at home without medical authorisation, they are likely to be:

- aware of the child's complete medical history
- able to provide ongoing, direct supervision while the child is ill
- able to recognise if their child is having an adverse reaction and requires medical attention.

OTC medications administered at school, must be medically authorised and have the appropriate documentation provided in accordance with the 'As needed - Non emergency' medications as outlined in Table 1: Medication Authorisation Requirements

9.0 Camps & Excursion

An essential part of planning for camps and excursions is ensuring that systems are in place so that students who require medications receive them. The use of Compass to store student medical information and medications assists in excursion planning.

Additional medication considerations for camps/excursions include:

- Assigning a staff member for being responsible for medication administration while on camp/excursions and ensuring they are appropriately trained in accordance with this procedure.
- Re-assess students who have been previously approved for self-administration. No student on a camp or excursion is to be solely responsible for their medication. Changes to routine can impact upon a student's management of their health condition.
- Checking the availability of, location of, and distance to emergency services or hospitals.
- Access to power is required for certain medications e.g. nebulised medication.
- Storage and transportation of the medications e.g. insulated wallet, approvals for taking medications on a plane.
- Ensuring that emergency first aid medications are available during travel to and from, and at a camp/excursion location for the duration of the event.
- Advising all staff supervising students with health conditions of their symptoms and health needs.
- Ensuring all staff are appropriately trained in the management of student health conditions including any chronic health condition e.g., diabetes, asthma etc.
- Ensure health action plans are in place and clearly understood by supervising staff responsible for students with complex/chronic health conditions.
- Ensuring the relevant documentation will be available (e.g. recording sheets, medication orders) for the duration of the camp/excursion.
- Ensuring all unused medications are returned to parents/carers.

Refer to TCO Sharehub/WHS/Excursions & Camps for further information.

10.0 7 RIGHTS of safe medication administration in schools

The 7 RIGHTS of safe medication administration in schools are based on best practice. Following these 7 RIGHTS reduces the risk of errors occurring when administering medication to students.

If any of the following RIGHTS are unable to be met – DO NOT administer the medication and seek advice from the principal/delegate.

Table 2: 7 Rights of Safe Medication Administration in Schools

1. Right Documents	**Have you got the right documentation?**
2. Right Person	**Check the student's identity** ➔ Ask the student to state their name and date of birth, or by matching the student photo to the photo on the medication record form. ➔ Where a student may not be able to identify themselves TCE recommends a Medi bracelet be worn by the student to allow administration of medication.
3. Right Medication	**Correct medication in the original packaging** ➔ The information on the medication container matches with the documentation e.g. student's name & directions for administration including dosage, times and route
4. Right Dose	**Check the dose to be administered on the prescription label** ➔ Ensure the prescription label matches the medication order or information provided from the prescribing health practitioner. ➔ After administration, confirm that the student has consumed the medication e.g. swallowed the tablet
5. Right Time	**Check it is the right time to administer the medication** ➔ Refer to the time on the Consent to administer medication form. ➔ Check any special instructions e.g. at meal breaks for medication to be taken with or after food, every 4 hours.
6. Right Route	**Check the require administration route stated on the prescription label or medication order** ➔ Routes may include: oral, nasal, inhalation, topical, injection

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7. Right Storage	**Ensure medications are appropriately stored** ➔ Medication is stored in accordance to manufacturer's instructions ➔ Controlled drugs are stored securely in a locked location when not being administered ➔ Medication is stored in a location that meets the student's individual requirements ➔ Medication that is no longer required by the school is collected by the parent/carer or is taken to a pharmacy for disposal.

11.0 Receipt & transport of medications

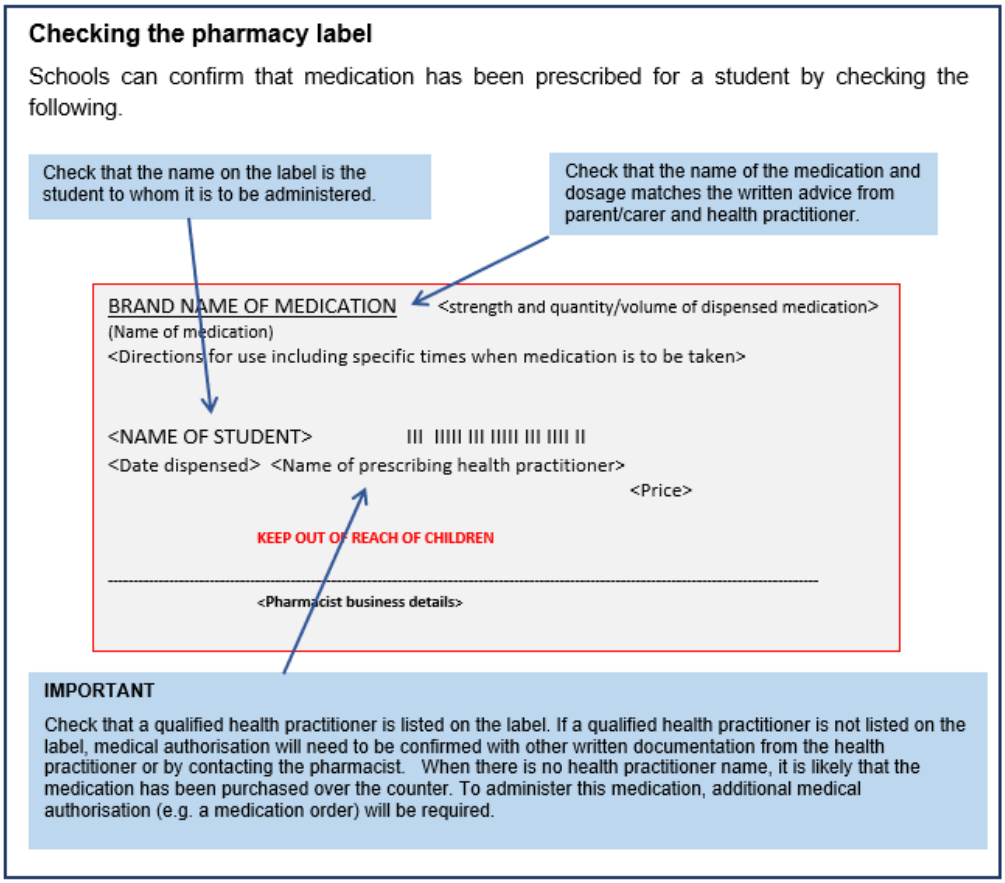
Parents/carers should be encouraged to provide and collect students' medication in person. Insulated bags may need to be used to transport medications that require refrigeration or need to be kept at a certain temperature.

Medication should always be supplied to the school:

- In its original container with the internal packaging intact i.e. sealed foil strip, sealed blister pack.
- With a current pharmacy label which includes:
    - name of the person authorised to take the medication
    - dosage
    - date and time to be taken
    - medical practitioner's name.

Where packaging of individual medications is not intact i.e. the foil is no longer sealed around the tablet, the safety of the medication could be compromised. Do not administer this medication and alert the parent/carer to this situation.

The only time that medication may not be supplied to the school in its original container is when a pharmacist has used a dose administration aid (DAA) e.g. Webster-Pak. While this is not the medication's 'original container', it has been packed by the pharmacist and will be a tamper-evident, well-sealed device or system that allows for the organising of doses of prescribed medication according to the time of administration.



12.0 Storage of Medications

Medications come in a variety of forms and have their own storage requirements in order to maintain shelf-life and be effective. Risks associated with storing medications include:

- loss (e.g. through spillage or poor management)
- theft or misuse by those for whom they were not prescribed
- deterioration due to incorrect storage
- access issues, especially for emergency medications
- expiry of medication.

To reduce these risks, Schools are to:

- Store medications according to their specific requirements, with consideration to the safety of the student and the school community, the frequency of their administration and the requirements in student health plans.
- Implement a process to monitor medication expiry dates and ensure sufficient supply.
- Medication (& consumables) shall be returned to the parent/carer when it has passed its expiry date and is no longer required to be administered at school, school-related activity or it is the end of the school year.

NOTE: Emergency medication:

- MUST NOT be stored in a locked location (e.g. cupboard/classroom) as delays in giving emergency medication can result in death.
- Needs to be portable to respond to a medical emergency.
- May need to be stored in a portable insulated wallet.

Table 3: Medication Storage Considerations

Type of medication	Considerations for storing medications
All medications	Store safely, considering a student's individual requirements and in accordance with manufacturer's instructions. ● In an area that is accessible and secure (not locked) ● Consider temperature requirements. ● Provide an area reserved for medications only. ● Consider if secure/locked storage is required with authorised access only.
Controlled drugs (Schedule 8 drugs)	Always store securely in a locked location (e.g., locked cabinet/drawer) when not being administered. This location should be for medications only. Have access restricted to staff nominated to assist in the administration of this medication.
Enzyme replacements and salt tablets for cystic fibrosis	Keep in proximity to the student so that they consume them with their meals.
Emergency first aid medication	Keep in the most accessible school first aid kit/s.
Refrigerated medications	Do not store medication in a fridge that students or unauthorised personnel may access. Consider having a separate fridge for medications.
Medication kept with the student	Some students require medication to be kept with them (or close by) to manage their individual health needs.

13.0 Disposal

When medication is initially brought to the school, advise the parent/carer that they will need to collect any unused medication when it is no longer required to be administered at school. All medication must be returned to the parent/carer at the end of the school year.

When medication has passed its expiry date and cannot be administered – ask the parent/carer to collect it for disposal within 5 business days.

Unused medication that has not been collected by the parent/carer must be taken to a pharmacy for disposal by a staff member nominated by the Principal e.g. through the Return Unwanted Medicines project. The pharmacy will ensure that all medication (including controlled drugs) is disposed of correctly and in accordance with the law.

Sharps must be disposed of in a sharps disposal container (refer to the Education Qld guidelines in the Safe Handling and Disposal of Needles and Syringes). Schools are to have available a designated sharps container which is sealable and puncture proof, these can be purchased through First Aid Suppliers.

Ensure sharps are placed immediately into an approved sharps container at the point of use. Do not recap, remove, bend or break/clip used needles.

14.0 Training of staff

14.1 Assigned staff for the administration of medication

The principal/delegate is to assign staff responsible for the administration of medication, staff assigned to this task must have volunteered and be willing, capable and competent.

Nominated staff are to receive training in the safe administration of routine and emergency medications, this procedure and the Schools Substance Management Plan. Staff are to receive training on the commencement of their medication administration duties and every 2 years thereafter or when there is a change to processes/procedures.

14.2 Staff who support students with health care needs

School staff supporting students with healthcare needs are to be trained and familiar with the health care needs for the students they are responsible for, and the procedures stated within their plan. Responsible staff are to be trained in relevant medication and emergency processes in accordance with the students' health plan e.g. Emergency anaphylaxis and asthma management.

Ensure staff are aware to not delay administering emergency medication and first aid response, indemnity provisions apply where staff have acted within the scope of their professional duties.

Refer to TCO Sharehub/WHS/Medications for training guidance.

15.0 Legal Liability of staff administering medication

Townsville Catholic Education has a duty of care to take reasonable steps to keep students safe while they attend school. This includes for example, the administration of an EpiPen/Anapen 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 because of administering medication, Townsville Catholic Education, through the terms and conditions of the Insurer's policy, will indemnify those employees who have acted conscientiously within the scope of their professional duties.

16.0 Record Keeping

The principal shall ensure that the school keeps the following records:

- Substance register of all medication kept at school (Type, #students taking, number of boxes kept).
- Record of Administration Form.
- Associated Health Plans/documentation from the prescribing health practitioner.
- Register for administering medication.
- Staff training records.
- Risk assessments for student self-administration.
- Medication errors.

All documents, whether digital or hard copy provided to or recorded by the school in relation to the administration of medication to students must be retained according to the TCE Record Retention and Disposal Guidelines and shall be treated and stored as confidential information.

RESPONSIBILITIES

Principals	• Implement processes for the administration of medication within your school in accordance with this procedure. • Principals may delegate tasks in accordance with this procedure, however retain the overarching responsibility to ensure compliance. • Develop and maintain a school based management plan (SMP) and make it available to staff.

	• Review the SMP as soon as practicable following a review incident, or at least five years after the date of commencement or date of previous review. • Communicate school processes to relevant staff on the safe administration of medication to students • Follow approval processes for students who self-administer their medication in accordance with this procedure • ensure relevant staff are trained in administering medications • communicate with parents/carers on medication management processes • Ensure processes are in place for reviewing student Health Plans annually.
Health support staff / staff who supervise students	• Have knowledge of and comply with the school's SMP • Participate in discussions relating to the management of student health conditions • Safely receive and store students' medication, and dispose of if required • Safely administer medically authorised medication to students • Ensure emergency medication is stored in a accessible location • Prepare relevant documentation and accurately record the administration of medication • Notify the principal/delegate if there is a medication administration error, or if medication is stolen, misused or diverted from the person to whom it was prescribed
Parents/Carers/Students	• Provide information to the principal/delegate about the student's health condition/s, including written information from qualified health practitioners, at enrolment or on diagnosis, and provide updated information when any information changes • Ensure that enough well-maintained equipment, in-date medication and consumables, labelled clearly with the student's name, are supplied • Collect unused medication from the school when it is no longer required or has expired
TCEO WHS	• Support Principals/delegates in the application of this procedure

REFERENCES

Legislative

- Education (General Provisions) Act 2006 (Qld)
- Queensland Government Health (Drugs and Poisons) Regulation 1996
- Medicines and Poisons Act 2019
- Medicines and Poisons (Medicines) Regulation 2021 (Qld)
- Human Rights Act 2019 (Qld)
- Work Health and Safety Act 2011 (Qld)
- Work Health and Safety Regulation 2011 (Qld)

Policies & Procedures

- Critical Incident Management - Guideline
- First Aid Management Guidelines
- Incident Reporting Guideline
- Infection Control - Prevention of Needle Stick and Other Sharps Injuries

- Infection Control Guideline
- Management of Student Medications in Compass
- School Excursion and Camp Procedure
- DEC Work Health and Safety Policy

Further Resources

- Queensland Government Indemnity Guideline
- Guide to developing a Substance management plan for medicines - Queensland Health
- Administration of Medication in Schools - Education Queensland
- Returning unwanted medicines
- Safe handling and disposal of needles and syringes - Education Queensland

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