# Operational Policy: Administration of Medication (NAG 5)

## Blind & Low Vision Education Network NZ

## Statement of Intent:

The Blind & Low Vision Education Network NZ (BLENNZ) recognises that it has a responsibility for ensuring ākonga receive the appropriate medication as required for their health, safety and well-being during those periods of time when ākonga are attending programmes for which BLENNZ is responsible. This includes ākonga enrolled in day and residential programmes (including Immersion courses). It does not include ākonga who are attending with parents or whānau. Administration of medication to these ākonga is the responsibility of their parents and/or guardians.

BLENNZ also recognises that it has a responsibility to ensure that staff receive legal protection and appropriate training and support when dealing with issues related to the administration of medication.

## Definition:

“Medication” refers to medications provided for ākonga by a medical practitioner, medication purchased “over the counter” (e.g. pamol) and non prescription preparations (e.g. savlon, skin rash cream etc).

“DNR” refers to “Do Not Resuscitate”. DNR orders refer to CPR (Cardiopulmonary Resuscitation) only and not to other issues of care (p. 109 Medical Practice in New Zealand 2013).

## Policy Requirements:

1. Written authority by a parent, caregiver or whānau member who has legal responsibility for the care of the ākonga is required before administration of any medication by BLENNZ staff.

A medication agreement giving written authority by a parent, caregiver or whānau member who has legal responsibility for the care of ākonga for the administration of medication will be signed on enrolment at the BLENNZ Homai Campus School (including residential services) and when enrolling for an Immersion course where parents are not present. The agreement will state that a current (i.e. within the use by date) and adequate supply of medication is to be held by BLENNZ, and it is the parent/caregiver’s responsibility to provide BLENNZ with any further medication as required.

Signed authority from parents/caregivers must be provided for any ākonga to carry or administer their own medication. Such authority will include information on the medication and procedures for any emergency that may arise.

2. Parents/whānau/caregivers are required to provide written medical information about the ākonga’s condition, the medication and any associated apparatus necessary to ensure staff can respond appropriately to medical emergencies.

3. Within the Homai Campus school and long term residential, medication must be provided in its original container with directions for administration included on the label. In addition the signed written authority will state details of dosage and time medication is to be given. Notification of these details may be written in the ākonga’s notebook or on a medical register form. Medication for ākonga attending short term residential courses may be provided in blister packs with supporting documentation. Medication for ākonga attending National Assessment is the responsibility of parents/caregivers.

4. Appropriate staff will hold a current First Aid Certificate and the administration of any emergency care will be within the terms of that qualification. Where further assistance is required the appropriate emergency help will be sought.

5. It is the responsibility of parents/guardians to ensure instructions are updated on a daily (or as regularly as needed) basis. Staff are responsible for ensuring new medical information is documented, signed and included on the ākonga’s file (hard copy and electronic where appropriate). Senior staff will be responsible for ensuring that information regarding any new or change of medication is disseminated to relevant staff. “Senior staff” includes Senior Teachers within the Homai Campus school, Residential Team Leaders, Co-ordinators, Managers and Senior Managers.

6. When medication administration is via apparatus with which staff are unfamiliar (e.g. Ventolin inhaler), or in instances where staff feel they need assistance to develop skills or confidence to administer medication, support and practical advice shall be sought. When further support and/or advice is given, this shall be documented as part of the ākonga’s medical plan.

7. Should BLENNZ management believe staff cannot adequately provide the appropriate medical treatment requested by parents/guardians, ākonga shall only attend programmes if BLENNZ and the parent/whānau/caregiver have mutually agreed to a nominated person attending to do so.

8. Staff shall record the ākonga’s name, medical information – symptoms which indicate need for medication, instructions, dosage, expiry date, time and date of medication and name of the staff member administering the medication each time medication is administered, on the ākonga’s medication chart. Two staff members will check the medication before it is administered. Both staff are required to sign that the medication has been given.

9. Medication will be stored appropriately and securely.

10. If written approval has not already been received, painkilling medication e.g. Panadol may be administered by appropriate BLENNZ staff only after verbal permission has been requested and given by the parent/caregiver. This must also be recorded.

11. Parents must be informed of any additional medication that has been given in accordance with the ākonga medication plan.

12. A DNR order (Do Not Resuscitate) relates to intervention by medical staff. If an ākonga requiring medical attention has a DNR order on file, staff must provide medical assistance (including CPR) until such time as emergency services arrive. Emergency services must be informed of the DNR order. The only exception to the performing of CPR will be if information pertaining to the actions of BLENNZ staff is specifically noted in the DNR order, at which time the orders of the DNR must be followed.

13. There are two defibrillators on site: one in the Main building and the other in the Residential building – Café BLENNZ. These were originally provided for adults. Approval for use on ākonga will be included in the medical section of any enrolment documentation for BLENNZ, irrespective of whether ākonga are on site or not.

## Supporting Documentation:

[Ministry of Education: Health Conditions in Education Settings-Supporting Children and Young People](http://www.education.govt.nz/ministry-of-education/specific-initiatives/health-and-safety/practice-framework-resources-for-health-and-safety/health-conditions-in-education-settings-supporting-children-and-young-people/)

[Cole's Medical Practice in New Zealand 2013 - End of Life Issues](https://www.mcnz.org.nz/assets/News-and-Publications/Coles/Chapter-11.pdf)

[Link to MOE website - Licensing Criteria for Early Childhood Centres](http://www.education.govt.nz/early-childhood/running-an-ece-service/the-regulatory-framework-for-ece/licensing-criteria/centre-based-ece-services/health-and-safety/child-health-and-wellbeing/hs28-medicine-administration)

BLENNZ First Aid policy

[Link to Early Childhood Licensing Requirements](https://www.education.govt.nz/early-childhood/licensing-and-regulations/the-regulatory-framework-for-ece/licensing-criteria/centre-based-ece-services/health-and-safety/child-health-and-wellbeing/hs28-medicine-administration/)

Approved: 

Date: 8 February 2023

Next Review: 2026