

563.3

POLICY ON ADMINISTRATION OF MEDICATION

Preamble:

In the course of a day at CCS, requests may be made by a student, or a parent on behalf of the student, for administering non-prescription medication and/or prescribed medication. This policy is intended to provide policies and procedures in attending to medication needs. The Principal has the primary responsibility for the administration of the medication. It is understood that the appointed staff person is administering the medication under the principle of “in loco parentis”¹, and not as a health professional. It is understood that the parents have the responsibility to keep the school informed of “at risk” concerns and of medicine related procedures or requirements.

Policy and Procedures:

- 1.0 Non-prescription medication, that is medicine of any kind not ordered by prescription, should not be handled by school personnel.
- 2.0 The Principal will designate the school’s secretary (or an alternate in case of her absence) as the staff member authorized to administer prescription medication.
- 3.0 In sensitive or unusual circumstances, a staff member, other than the secretary, may administer prescription medication provided:
 - a) A separate agreement has been made in writing between the parent and the other staff member.
 - b) The agreement receives the approval of the Principal.
 - c) The staff member ensures the medication is stored in a secure and safe place.
- 4.0 The signed authorization must be updated and submitted annually prior to the administration of prescribed medication. An updated form is also required when changes occur. Each request is automatically terminated on the last day of school.
- 5.0 Calvin Christian School cannot be held responsible for private arrangements between the parent and the student concerning prescribed or non-prescriptive medication administration.
- 6.0 The secretary or staff member must keep a record of administered prescribed medication.
- 7.0 The CCS Anaphylaxis Policy and First Aid emergency treatment override this policy.
- 8.0 The school’s secretary is permitted to discard any outdated medication and unused medication (outside of the duration of administration indicated by the parent.) without obtaining prior approval from the parent.

Approved by CCS BOD Nov. 9, 2004

¹“in loco parentis” means “in the place of the parent”

REQUEST FOR MEDICATION ADMINISTRATION FORM

To be completed by parent/guardian and returned immediately to the school office before the commencement of medication administration at CCS by authorized personnel.

Name of Student: _____ Ontario Health Card No. _____

Date of Birth: _____ Grade: _____ Teacher: _____

Name of Parent/Guardian: _____

Address: _____

Home Telephone: _____ Business Telephone: _____

Contact in Case of Emergency:

1. Name: _____ Telephone: _____

2. Name: _____ Telephone: _____

Name of Physician: _____ Telephone: _____

Why is this medication required?

Special Instructions (storage, training, specific side effects ...)

Medication Prescribed: _____ Dose: _____

Time of Administration (be specific): _____

Duration of administration (provide dates): _____

I have read the CCS Policy on Administration of Medication. I understand CCS has been authorized by me to administer prescribed medication to my child but I release any staff member and the CCS BOD from any legal liability that may result from the administration of medication. I will complete a revised form if there are any changes or modifications to the administration of my child's prescribed routine medication.

Signature of Parent/Guardian: _____ Date: _____