



Document Title:	HAAD Standards for administration of medication in schools		
Document Ref. Number:	HAAD/AMDS/SD/1.0	Version	1.0
Approval Date:	13 August 2012	Effective Date:	August 2012
Last Reviewed:	N/A	Next Review:	December 2013
Revision History	Version 0.9 issued June 2010		
Document Owner:	Public Health & Policy , Family and School Health		
Applies to:	Licensed Healthcare facilities – school clinics		
Classification:	☉ Public		

1. Purpose

1.1 This standard aims to ensure that school clinics and management have the requisite provisions to offer safe and quality medication administration services for students; to do this it sets out the:

- 1.1.1 Duties for healthcare providers delivering services to students in a school, or associated setting;
- 1.1.2 Medications that may be administered to students by HAAD licensed healthcare professionals in an emergency situation within a school, or associated setting; and
- 1.1.3 Service specifications for administration of medication in schools, or associated setting.

2. Scope

- 2.1 This standard applies to all School Healthcare Providers (Facilities and Professionals), including school clinics, licensed by HAAD in the Emirate of Abu Dhabi.
- 2.2 This standard refers to the administration of the following medication in schools:
 - 2.2.1 Medication prescribed by a treating physician; and
 - 2.2.2 Medication required in an emergency situation occurring within a school, or associated setting as specified in this standard and in accordance with Appendix 1-4.

3. Duties for Healthcare Providers

- 3.1 All licensed healthcare providers (facilities and professionals), including school clinics, engaged in the provision of School Healthcare services must:
 - 3.1.1 Comply with the requirements of this Standard;
 - 3.1.2 HAAD policies and standards including but not limited to:
 - 3.1.2.1 Reporting adverse reactions;
 - 3.1.2.2 Managing patient medical records, including developing effective recording systems and maintaining patient records;
 - 3.1.2.3 Patient Consent;

- 3.1.2.4 Patient confidentiality;
- 3.1.2.5 Patient Referral/transfer;
- 3.1.2.6 Complaints management; and
- 3.1.2.7 Patient rights and responsibilities, including fulfilling the requirements of Patients' rights and responsibilities charter;
- 3.1.3 Comply with HAAD requests to inspect and audit records and cooperate with HAAD authorised auditors, as required for inspections and audits by HAAD;
- 3.1.4 Licensed healthcare professionals in Abu Dhabi must ensure that they practice within their scope of practice and privileges assigned by their facility, and that medication administration to students is within their scope of practice; and
- 3.1.5 Administer medications specified in this standard to students in accordance with evidence based clinical care pathways, at the recommended doses for specific age groups, and by reference to the prescribing physician's instructions, and where appropriate the product medical information sheet.
- 3.1.6 When administering medication, the school nurse must administering medication must apply **the principle of The 7 Rights**
 - a. Right Drug
 - b. Right Patient
 - c. Right Dose
 - d. Right Time
 - e. Right Route
 - f. Right Reason
 - g. Right Documentation

4. Enforcement and Sanctions

- 4.1 Healthcare providers must comply with the requirements of this Standard, the HAAD Standard Provider Contract and the HAAD Data Standards and Procedures. HAAD may impose sanctions in relation to any breach of requirements under this standard in accordance with the [HAAD *Policy on Inspections, Complaints, Appeals and Sanctions*].

5. Standard 1. General Requirements for Administration of Medication

- 5.1 Medication should only be taken at school when essential; that is, detrimental to a child's health if they are not taken during the school day, such as:
 - 5.1.1 Medication prescribed by a treating physician for acute or chronic conditions;
 - 5.1.2 Medication required in an emergency situation.
- 5.2 The administration of medication must be carried out in accordance with the provisions of this HAAD Standard and as per the specifications provided at Appendices 1 to 9;
- 5.3 The school clinic must develop a clear School Medication Policy, ensuring that it is understood and accepted by staff, parents and students. The School Medication Policy must include as a minimum the specifications detailed at Appendix 6.
- 5.4 The details of storage and access arrangements of medications must be included in the School Medication Policy (refer to Appendix 7 for details).
- 5.5 Whenever possible, parents should be contacted prior to administering the medication.
- 5.6 The Consent to administer medications (emergency or prescribed) must be obtained from parents at the outset, and must be renewed annually or whenever there is a change in medication administration requirements.
- 5.7 All medication administration information and related activities and reactions must be recorded in the student medical record.

6. Standard 2. Administration of Emergency Medication

- 6.1 Medication that may be administered in an emergency situation is limited to the following:
- 6.1.1 Epinephrine for acute allergic reactions (Anaphylactic shock);
 - 6.1.2 Administration of metered-dose inhalers;
 - 6.1.3 Paracetamol;
 - 6.1.4 Antihistamine cream.
- 6.2 Individual care plans must be in place for students whose health conditions may cause them to experience emergencies (e.g. known food or insect anaphylaxis, asthma, diabetes, hemophilia etc.). Details of required care for children with Diabetes are included in the HAAD Standard for Diagnosis and Management of Childhood Diabetes at: <http://www.haad.ae/haad/tabid/819/Default.aspx>;
- 6.3 HAAD licensed school nurses or physicians employed by the school clinic must ensure that parents consent to their child receiving emergency medication, limited to those approved in this standard in an emergency by completing the Parental Consent Form provided at Appendix 8a. Signed consent forms for all children must be kept on record, and updated according to current information.
- 6.4 Emergency medication must be kept safe, secure but quickly accessible in an emergency.
- 6.5 Healthcare professionals administering emergency medications must have the appropriate training to do so, and must ensure that they are permitted to do so under their scope of practice and privileges granted to them by their facility's privileging committee (HAAD Standard for Privileging Framework).

7. Standard 3 Administration of Prescribed medication

- 7.1 Only medication prescribed by a HAAD Licensed physician may be administered to children at school or school associated settings;
- 7.2 Prior to the administration of medication, HAAD licensed school nurse or physician employed by the school clinic must ensure that parents complete the parental consent form provided at Appendix 8b. The parental consent form must be completed whether the child can self-administer the prescribed medication or a HAAD licensed healthcare professional is required to administer it. Forms must be kept on record and updated according to changed information.
- 7.3 Medications must be in the original container and have clear and comprehensive instructions for administration and dosage. School nurses must not accept medication that is provided in a different container or if changes have been made to the prescription instructions by a non-authorized physician.
- 7.4 For the safety of children, parents are required to provide the school clinic with a copy of the prescription and the prescribing physicians report.

Appendices

- Appendix 1 – Epi-pens (Epinephrine)
- Appendix 2 – Administration of metered-dose inhaler (Salbutamol)
- Appendix 3 – Administration of Paracetamol
- Appendix 4 – Administration of antihistamine cream
- Appendix 5 – Medication Return and disposal
- Appendix 6 – Developing a School Medication Policy
- Appendix 7 – Medication Storage and access
- Appendix 8 – Consent forms (8a and 8b)
- Appendix 9a & b – Administration of medication record

Appendix 1 Epi-pens (Epinephrine)

Administration of Epinephrine in acute allergic reactions (Anaphylactic shock):

What is anaphylaxis?

Anaphylaxis is a severe and sudden allergic reaction. It can occur when a susceptible person is exposed to an allergen (such as food or insect sting). Reactions usually begin within seconds to minutes of exposure and can progress rapidly over a period of up to two hours or more. Anaphylaxis is potentially life-threatening and always requires an emergency response.

- Epi-pen is an auto-injector device, which contains a single measured dose of adrenaline (also known as epinephrine) for administration in cases of severe allergic reaction, such as anaphylaxis. A version containing half the standard dose of adrenalin (EpiPen Jr) is available for small children under 30kg. When the child has signs of an acute allergic reaction, the Epi-pen should be given according to the product manufacturer's instructions. Not giving the Epi-pen can be much more harmful than giving it when it may not have been necessary.
- The Epi-Pen must be stored at room temperature and protected from heat and light. It should be kept in the original labeled box.
- Expiry dates and discoloration of contents must be checked by the school nurse monthly.
- The Epi-Pen should be replaced by the school at the request of the school nurse in private schools, and by Ambulatory Healthcare Services–School Health Services in public schools.
- The used Epi-Pen should be given to the ambulance crew so that they will know what medication the student has received.
- The student is allowed to keep and self-administer Epi-Pen provided the parental consent form is completed and signed by the physician and parent/guardian.
- In the absence of an Epi-pen, a HAAD licensed nurse (refer paragraph 5.5 in Section 5 of this Standard) or physician can administer Epinephrine in accordance with the product manufacturer's instructions.
- The Epinephrine must be readily accessible for use in an emergency.
- The use of the Epinephrine must be recorded on the student's medication administration record, with time, date and full signature of the person who administered the Epinephrine.
- Once the Epinephrine is administered, an ambulance/ emergency room must be called for follow up and transfer.

Appendix 2 - Administration of metered-dose inhaler (Salbutamol)

- Children with asthma need to have immediate access to their rescue inhalers when they need them.
- Children who are able to use their inhalers themselves should be allowed to carry them with them. If the child is too young or too immature to take personal responsibility for the inhaler, staff should make sure that it is stored in a safe, but accessible place, and clearly marked with the child's name.
- For children with asthma, the child's pediatrician/ treating physician must prescribe a spare inhaler to be kept at the school.
- When a child has an asthma attack they should be treated according to their individual healthcare plan, treating physician's instructions or asthma card. An ambulance should be called if any warning signs are identified.
- In an emergency, administration of metered-dose inhaler must be conducted in accordance with duties specified under **Section 5** of this Standard, and must follow the instructions and dose specified on the product's information sheet and evidence based guidelines.
- An appropriate inhaler can be provided if the child forgets his own inhaler, or runs out of his own inhaler. A spacer device should be available along with the inhaler.
- Expiry dates of the inhaler should be checked by the school nurses monthly. The spacer device needs to be cleaned at least once a month.

Appendix 3 - Administration of Paracetamol

- Paracetamol is a pain reliever and a fever reducer.
- Paracetamol is used to treat many conditions such as headache, muscle aches, backache, toothaches, colds, and fevers.
- Take a comprehensive history to understand how much Paracetamol has been taken and the times taken in the last 24 hours to prevent overdose and to manage future administration accordingly.
- Use a pediatric form of Paracetamol with the special dose-measuring dropper or oral syringe that comes with the specific pediatric form.
- Follow the directions on the medicine label.
- Do not exceed recommended dosage. An overdose can damage the liver or cause death.
- Aspirin (acetylsalicylic acid) must not be given to children or teenagers as it can cause a rare but serious illness called Reye's syndrome.

Appendix 4 – Administration of anti-histamine cream

- Antihistamines block histamine, a symptom-causing chemical released by the immune system during an allergic reaction.
- It can reduce swelling and soothe insect bites and stings.
- Do not use this cream for more than three days at a time.
- If the symptoms do not improve, stop using the cream and refer the child to a healthcare centre or physician.
- Check the label on the medicine for exact dosing instructions.

Appendix 5: Return or disposal of Prescribed Medication

1. Medication should be returned to the student's parents/guardians when:

- 1.1 The course of treatment is complete;
- 1.2 Medication labels become detached or unreadable;
- 1.2 Prescription instructions are changed;
- 1.3 The expiry date has been reached;
- 1.4 End of school term/year.

2. Returning medications to parents:

- 2.1 Send parents a request to come and pick up the medication.
- 2.2 Medications returned to parents must be documented on the student medical record, including name of medication and return date.
- 2.3 Obtain the signature from parents/guardian receiving the medication as well as the school staff member returning the medication.

3. Disposal of medication:

- 3.1 Medications that cannot be returned to parents/ guardian must be disposed by the end of the school year.
- 3.2 The following is the procedure for disposal of medication:
 - 3.2.1 The School Clinic and healthcare professionals employed by it must dispose of medication in accordance with the HAAD Policy on Medical Waste Management.
 - 3.2.2 The date the medication is disposed including name of medication should be documented in student medical record.
 - 3.2.3 The signature of the person disposing of the medication and the method of disposal should be documented in student medical record.

Appendix 6: Developing a School Medication Policy

A policy must include:

1. Procedures for managing prescribed, and emergency medications, to be taken during the school day or setting duration;
2. Requirements for training for healthcare professionals to ensure optimal competency;
3. Procedures for managing medications on school organized field trips and outings.
4. Specifications for medication administration to students when they participate in field trips, school camps, and other out-of-school activities.
5. Procedures to notify parents of their responsibilities to:
 - 5.1 Sign consent to allow administration of medication at school;
 - 5.2 provide current contact details for communication purposes, especially in emergency situations;
 - 5.3 supply the school with any prescribed medications and copies of the prescription and where available treating physician's report and student's health report;
 - 5.4 provide labeled containers';
 - 5.5 ensure medications are current as per the treating physician's prescription;
 - 5.6 supply any necessary medical devices for prescribed medication (e.g. nebulizers, insulin pumps) and ensure that such devices are appropriately maintained;
 - 5.7 give information of any medical needs; and
 - 5.8 supply information regarding any known allergies, medical conditions and contraindications.
6. Procedures for assisting students with long-term or complex medical needs.
7. Procedures for students carrying and taking their medications themselves.
8. Record keeping.
9. Ensuring that student confidentiality is maintained.
10. Safe storage and disposal of medications.
11. Quick access to the school's emergency procedures and emergency medication.
12. Risk assessment and management procedures.
13. Procedures for communicating with child's parents.

Appendix 7: - Medication storage and access

1. School Nurses must only store, supervise and administer medications that are registered with the Federal Ministry of Health (MOH).
2. All medications must be stored in the designated medication storage area (cupboard in the nurse office or medication fridge).
3. Storage areas must be kept locked at all times. Keys remain the responsibility of the nurse with special access arrangements when she is not available.
4. Emergency medication should be quickly available when needed.
5. Medications must be stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which it was dispensed.
6. Large volumes of medications must not be stored.

Access to medication

1. The medications are only accessible by the nurse
2. All emergency medications must be readily available for children and should not be locked away but kept in a safe, secure, accessible place.
3. The school administration and nurse must make special access arrangements for emergency medications.

Appendix 8A Form (1) PARENTAL CONSENT TO ADMINISTER EMERGENCY MEDICATION

I consent that my child: Name _____ Date of Birth _____ Address _____ _____ Phone No _____ School _____ Class _____	
be given the appropriate medication in the following cases 1. Administration of Epinephrine in an acute allergic reaction (anaphylactic shock) 2. Administration of Salbutamol Inhaler to control asthmatic symptoms 3. Administration of Oral Glucose for hypoglycemia 4. Administration of Paracetamol to control mild to moderate pain and fever 5. Administration (topical) of Antihistamine Cream for allergic reaction	
Any precautions that school personnel need to know?	Any contraindications that school personnel need to know?
What are possible reactions/side effects?	What should be done in the event of reaction/side effect?
<p>Check the box below:</p> <p><input type="checkbox"/> YES – The above medication can be administered by a HAAD Licensed School Nurse/Physician in accordance with this standard and the relevant policies.</p> <p><input type="checkbox"/> NO – The above medication cannot be administered by a HAAD Licensed School Nurse/Physician.</p>	

Parent/Guardian-Full name:

Parent/Guardian signature:

Date

Appendix 9a - ADMINISTRATION RECORD OF PRESCRIBED MEDICATION

Name of Student: _____

Grade and class: _____

Name of Medication: _____

Date	Time	Dose	Route	Signature	Comments

FORM 9b: ADMINISTRATION RECORD OF NON PRESCRIBED MEDICATIONS

Date	Student name	Time	Grade /Class	Name of medication	Dose given	Route	Any reactions	Name of healthcare professional administering	Signature of healthcare professional administering	Comments