

Medication Administration Policy

Introduction:

In supporting the health and wellbeing of children the use of medications may be required by children at our preschool. Any medication must be administered as prescribed by medical practitioners and first aid guidelines to ensure continuing health for the child and for the child's safety and wellbeing.

<u>Aim:</u>

Families requesting the administration of medication will be required to follow the guidelines developed by Toukley Preschool to ensure the safety of children and educators. The education and care service will follow legislative guidelines and standards in order to ensure the health of children, families and educators at all times.

Implementation:

The Nominated Supervisor will:

• Ensure that a medication record is developed for each child requiring medication at the centre. The medication record must detail the name of the child, authorisation to administer medication signed by a parent/or person named on the enrolment form as authorised to consent to the administration of medication, the name of the medication to be administered, the time and date the medication was last administered, the time and date or the circumstances under which the medication should be administered, the dosage of the medication to be administered, the manner in which the medication is to be administered.

Once the medication is administered, details of the administration, including signatures from the administrator and the witness, need to be completed.

See Attachment A - Medication Record

• Ensure that medication is not administered to a child being educated and cared for by the centre unless it is:

- prescribed by a registered practitioner, from its original container with the original label including the name of the child for whom it is prescribed, before the expiry or use-by-date, or

- from its original container, with the original label and instructions and before the expiry or use-by-date, and in accordance with any instructions attached to the medication or provided by a registered medical practitioner, either verbally or in writing.

• Ensure that written and verbal notification are given to a parent/guardian or other authorised person of a child as soon as practicable, if medication is administered to the child in an emergency when consent was either verbal or provided by medical practitioners.

• Ensure that if medication is administered without authorisation in the event of an asthma or anaphylaxis emergency, that the parent of the child and emergency services are notified as soon as practicable.

• Ensure that enrolment records for each child outline the details of persons permitted to authorise the administration of medication to the child.

• Take reasonable steps to ensure that medication records are maintained accurately.

• Keep medication forms in a secure and confidential manner and ensure the records are archived for the regulatory prescribed length of time. Refer *Confidentiality and Privacy Policy*.

• Ensure that educators receive information about the medical and medication policies during their induction.

• Request written consent from families on the enrolment form to administer emergency asthma medication if required. Families will be reminded that every attempt to contact them for verbal permission will be made by the education and care service prior to administering asthma medications. Refer to *Medical Conditions Policy* for further details.

• Inform families of the centre's medical and medication policies and the need to ensure that safe practices are adhered to for the wellbeing of both the child and educators.

Educators will (with support from the Nominated Supervisor) :

• NOT administer any medication without the authorisation of a parent or person with authority – except In the case of an emergency, when the verbal consent from an authorised person, a registered medical practitioner or medical emergency services will be acceptable if the parents cannot be contacted.

• Ensure that medications are stored in the refrigerator in a labelled and locked medication container with the key kept in a separate location, inaccessible to children. For medications not requiring refrigeration, they will be stored in a labelled and locked medication container/cupboard with the key kept inaccessible to children.

• Ensure that two educators administer medications at all times. One of these educators must have approved First Aid qualifications in accordance with current legislation and regulations. Both educators are responsible to check the Medication Form, the prescription label and the amount of medication being administered. Both educators must sign, date and note the time on the Medication Form. Medications will be returned to the locked medication container after use.

• Follow hand washing procedures before and after administering medication.

• Share any concerns or doubts about the safety of administering medications with the Nominated Supervisor to ensure the safety of the child. The Nominated Supervisor may seek further information from the family, the prescribing doctor, or the *Public Health Unit* before administering medication.

• Ensure that the instructions on the Medication Form are consistent with the doctor's instructions and the prescription label.

• Request that the family request an English translation from the medical practitioner for any instructions written in a language other than English.

• Ensure that the Incident, Injury, Trauma and Illness Record documents any medication given in an emergency otherwise all medications will be written up on a Medication Record Form.

Families will:

• Notify educators, both via Enrolment Forms and verbally (complete Medication Form) when children are taking any medications. This includes short and long term medication use.

• Complete a medication record form and a first aid/risk management plan as applicable for children requiring medication while they are at the centre. Documents for long term medication use will be developed with the family and the medical practitioner completing and signing the plan. Plans must be updated as the child's medication needs change.

• Be requested to sign consent to use creams and lotions (list of items in the first aid kit provided at enrolment) should first aid treatment be required.

• Be required to keep prescribed medications in original containers with pharmacy labels. Medications will only be administered as directed by the medical practitioner and only to the child whom the medication has been prescribed for. Expired medications will not be administered.

• Keep their child away from the preschool while any **symptoms of an illness remain and for 24 hours from commencing antibiotics** to ensure they have no side effects to the medication.

• NOT leave any medication in children's bags.

• Give any medication for their children to an educator who will provide the family with a Medication Form. The family will complete the Medication Form and the educator will sign to acknowledge the receipt of the medication. No medications will be administered without written consent from the parent or authorised person.

• Provide any herbal/ naturopathic remedies or non-prescribed medications (including paracetamol or cold medications) with a letter from the doctor detailing the child's name, dosage and the expiry date for the medication. (See guidelines regarding paracetamol below.)

Guidelines for administration of paracetamol

Families must provide their own paracetamol for use as directed by a medical practitioner. Paracetamol will be kept in the locked medication container for emergency purposes should authorised collectors not be contactable.

To safeguard against the over use of paracetamol, and minimise the risk of masking the underlying reasons for high temperatures, educators will only administer paracetamol if it is accompanied by a doctor's letter stating the reason for administering, the dosage and duration it is to be administered for.

If a child presents with a fever at the education and care service, the family will be notified immediately and asked to organise collection of the child as soon as possible. If a child's family cannot be contacted and the child's temperature rises above 38°C (as per authorised consent from enrolment form) Panadol will be administered according to prescribed/recommended dosage and an Injury, Incident, Trauma and Illness form will be completed. Attempts to contact the family will continue and the child will be made as comfortable as possible and away from other children attending the service.

Administration of paracetamol is done so under the same procedures as all other medication as described above. While waiting for the child to be collected, educators will implement the following procedures to reduce the child's fever and discomfort:-

- Remove excess clothing to cool the child down
- Offer fluids to the child
- Encourage the child to rest
- Provide a cool, damp cloth for the child's forehead
- Monitor the child for any additional symptoms

• Maintain supervision of the unwell child at all times, while keeping them separated from the children who are well.

Medications kept at the educator and care service:

Any medication, cream or lotion kept on the education and care premises will be regularly checked for expiry dates. First Aid kit contents are checked every six months by an external company with items expired or close to expiring being replaced.

If a child's individual medication is due to expire or running low, the family will be notified by educators that replacement items are required.

NO MEDICATION WILL BE ADMINISTERED IF IT IS PAST THE PRODUCT EXPIRY DATE.

Medication noted past its expiry date will be returned to the parent/guardian for replacement or disposal.

EVALUATION

The administration of medications is practiced in accordance with regulatory guidelines. Open communication between educators and families is a priority for ensuring children receiving medications remain safe and gain appropriate care to meet their health needs.

Families and staff are essential stakeholders in the policy review process and will be given opportunity and encouragement to be actively involved.

In accordance with R. 172 of the Education and Care Services National Regulations, the service will ensure that families of children enrolled at the service are notified at least 14 days before making any change to a policy or procedure that may have significant impact on the provision of education and care to any child enrolled at the service; a family's ability to utilise the service; the fees charged or the way in which fees are collected.

Legislative Requirements:

- ⊲ Work Health and Safety Act 2011
- ⊲ Education and Care Services National Law Act 2010
- Education and Care Services National Regulations
- ACECQA's Guide to the National Quality Framework

Links to National Quality Standard

- Education and Care Services National Regulations: 90, 92-96, 160, 177, 181-184
- National Quality Standards/ Elements: 2.1, 2.1.1, 7.1.2

Sources:

 \lhd ACECQA's Guide to the National Quality Framework, Section 3

 Staying Healthy in Child Care: Preventing Infectious Diseases in Child Care, 5th Edition, 2013 -www.nhmrc.gov.au/sites/default/files/documents/reports/ clinical%20guidelines/ch55-staying-healthy.pdf
 Information NSW Department of Health – www.health.nsw.gov.au

Now Department of Health – <u>www.neatth.hsw.gov.au</u>
 National Health and Medical Research Council – www.nhmrc.gov.au

⊲ CELA

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