



Medication Administration

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY

Introduction

In supporting the health and wellbeing of children the use of medications may be required by children at the education and care service. 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.

Goals / How will it be done?

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

Strategies / How will it be done?

Our service and educators will only administer medication to children if it is authorised by parents (or by someone authorised by parents on the enrolment record to make decisions about the administration of medication). If there is a medical emergency, we will also administer medication when authorised verbally by a parent, medical practitioner or an emergency service, however we may administer medication during an asthma or anaphylaxis emergency without first receiving authorisation. Medication may be administered according to an individual child's Medical Condition Risk Minimisation Plan.

The Nominated Supervisor / Person in Day to Day Charge will:

◁ Ensure that a Medication Administration Record is completed for each child requiring medication at the education and care service. The Medication Administration Record must detail the name of the child, be signed by a parent or person named in the child's enrolment record as authorised to consent to 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 next 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.

◁ Ensure that medication is not administered to a child being educated and cared for by the service 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. **No medication will be administered if it is past the product expiry date.**

◁ Ensure that written and verbal notification are given to a parent 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.

◁ 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 duration and care service prior to administering asthma medications. Refer to *Dealing with Medical Conditions Policy* for further details.

◁ 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 container above the fridge. Asthma medication will be considered in the individual child's Medical Condition Risk Minimisation plan.

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

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

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

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

Families will:

◁ Notify educators, both via enrolment forms and verbally when children are taking any medications. This includes short and long term medication use.

◁ Complete a Medication Administration Record for children requiring medication while they are at the education and care service. Documents for long term medication use will be developed with the family and the medical practitioner completing and signing the Medical Condition Risk Minimisation 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 children away from the care and education setting 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. Medication must be given directly to an educator on arrival for appropriate storage. Auto injection devices (e.g. Epipens), asthma puffers and non-refrigerated medication will be stored above the fridge so they are inaccessible to children. All other medication will be stored in accordance with the storage instructions on the medication in a locked labelled container in the fridge.

◁ The educator will provide the family with a Medication Administration Form. The family will complete the Medication Administration 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.

◁ NOTE: For parents of children that normally travel in by bus, the initial meeting with medicine must be face to face at the Centre. This also will enable the Medication Administration Form to be completed by the parent. On subsequent days, when the child is travelling on the bus, parents must phone to notify staff that medication is present in their child's bag (and include written relevant details with the medication).

Medications kept at the education and care service

Any medication, cream or lotion kept on the education and care premises will be checked every three months for expiry dates in conjunction with the First Aid Checklist.

A list of first aid kit contents close to expiry or running low, will be given to the Director who will arrange for the purchase of replacement supplies.

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.

Administration of Medication (non-emergency)

Educators will administer medication to a child:

◁ If a Medication Administration Form has been completed and signed by the parent or another authorised person, and;

» is in the original container;

» has not expired;

» has an original label and instructions that can be clearly read and, if prescribed by a doctor has the child's name;

» is administered in accordance with any instructions on the label or from the doctor.

◁ After the child's identity and the dosage of the medication is checked by an educator who is not administering the medication. This educator will witness the administration of the medication.

Administration of Medication in emergencies other than anaphylaxis or asthma emergencies

◁ Educators will administer medication to a child in an emergency:

» if a parent or another authorised person verbally authorises the administration of the medication or

» they receive verbal authorisation from a registered medical practitioner or emergency service if the parent or authorised person cannot be contacted.

◁ The child will be positively reassured, calmed and removed to a quiet area under the direct supervision of a suitably experienced and trained educator.

◁ The Nominated Supervisor will contact the child's parent, and provide written notice to the parent, as soon as possible.

◁ The Nominated Supervisor will ensure the service completes a Medication Administration Form.

Administration of Medication during Anaphylaxis or Asthma Emergencies

◁ Educators may administer medication to a child in an anaphylaxis or asthma emergency without authorisation.

◁ The child will be positively reassured, calmed and removed to a quiet area under the direct supervision of a suitably experienced and trained educator.

◁ The Nominated Supervisor/Responsible Person will contact the child's parent and the emergency services as soon as possible.

◁ The Nominated Supervisor/Responsible Person will advise the child's parent in writing as soon as possible.

◁ The Nominated Supervisor/Responsible Person will ensure the service completes a Medication Administration Record.

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.

STATUTORY LEGISLATION & CONSIDERATIONS

◁ The NSW Work Health and Safety Act 2011 and the NSW Work Health and Safety Regulation 2011

◁ Children (Education and Care Services National Law Application) Act 2010

◁ Education and Care Services National Regulations

◁ Guide to the National Quality Framework 2018

SOURCES

◁ Guide to the Education and Care Services National Law and the Education and Care Services National Regulations

◁ Staying Healthy in Child Care: Preventing Infectious Diseases in Child Care, 5th Edition, 2013

◁ NSW Department of Health – www.health.nsw.gov.au

◁ National Health and Medical Research Council – www.nhmrc.gov.au

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