**Administration of Medication Policy**

In supporting the health and wellbeing of children, the use of medications may be required for children at Waratah All Year Care. Any medication must be administered as prescribed by medical practitioners and first aid guidelines to ensure the continuing health, safety and wellbeing for the child.

**National Quality Standard (NQS)**

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| Quality Area 2: Children’s Health and Safety  |
| 2.1.1 | **Wellbeing and comfort**  | Each child’s wellbeing and comfort is provided for, including appropriate opportunities to meet each child’s needs for sleep, rest and relaxation |
| 2.1.2 | **Health practices and procedures**  | Effective illness and injury management and hygiene practices are promoted and implemented.  |
| 2.2 | **Safety**  | Each child is protected  |
| 2.2.1 | **Supervision**  | At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard |
| 2.2.2 | **Incident and emergency management**  | Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented  |

**Education and Care Services National Regulations**

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| Children (Education and Care Services) National Law  |
| 90 | Medical conditions policy |
| 91 | Medical conditions policy to be provided to parents |
| 92 | Medication record |
| 93 | Administration of medication |
| 94 | Exception to authorisation requirement - anaphylaxis or asthma emergency |
| 95 | Procedure for administration of medication |

**Related Policies**

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| Administration of First Aid Policy Arrival and Departure Policy Control of Infectious Disease Policy Child Protection Policy Code of Conduct PolicyDiabetes Management Policy Enrolment Policy Epilepsy Policy Family Communication PolicyHealth & Safety Policy Incident, Illness, Accident and Trauma Policy Medical Conditions Policy Privacy and Confidentiality Policy Respect for Children PolicySafe Storage of Hazardous Substances Policy Sick Children PolicySupervision Policy Work Health and Safety Policy  |

**PURPOSE**

To ensure all educators of Waratah All Year Care understand their liabilities and duty of care to meet each child’s individual health care needs. To ensure all educators are informed of children diagnosed with a medical condition and strategies to support their individual needs. To ensure that all educators are specifically trained to be able to safely administer children’s required medication with the written consent of the child’s parent or guardian. Educators will follow this stringent procedure to promote the health and wellbeing of each child enrolled at Waratah All Year Care.

**SCOPE**

This policy applies to children, families, staff, management and visitors of the Service.

**IMPLEMENTATION**

Families requesting the administration of medication to their child will be required to follow the guidelines developed by Waratah All Year Care to ensure the safety of children and educators. Waratah All Year Care will follow legislative guidelines and adhere to the National Quality standard to ensure the health of children, families and educators at all times.

For children with a diagnosed health care need, allergy or relevant medical condition a Medical Management Plan must be provided prior to enrolment and updated regularly. A Risk Minimisation Plan and Communication Plan must be developed in consultation with parents/guardians to ensure risks are minimised and strategies developed for minimising any risk to the child. (see *Medical Conditions Policy).*

Management will ensure:

* The Administration of the Authorised Medication Record is completed for each child.
* children with specific health care needs or medical conditions have a current medical management plan detailing prescribed medication and dosage by their medical practitioner
* A separate form must be completed for each medication if more than one is required.
* Medication is only administered by the Service with written authority signed by the child’s parent or other responsible person named in the child’s enrolment record that is authorised by the child’s parents to make decisions about the administration of medication. [Regulation 92(3)(b)]
* Medication is provided by the child’s parents including the following guidelines –
* The administration is authorised by a parent or guardian;
* Medication is prescribed by a registered medical practitioner (with instructions either attached to the medication, or in written/verbal form from the medical practitioner.)
* Medication is from the original container;
* Medication has the original label clearly showing the name of the child;
* Medication is before the expiry/use by date.
* Any instructions attached to the medication or related to the use of the medication
* Medication is given directly to an educator for appropriate storage upon arrival.
* Asthma and Anaphylaxis medications are to remain in the child’s bag.
* Written and verbal notifications are given to a parent or other family member 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.
* If medication is administered without authorisation in the event of an asthma or anaphylaxis emergency the parent of the child and emergency services are notified as soon as practicable.
* If the incident presented imminent or severe risk to the health, safety and wellbeing of the child or if an ambulance was called in response to the emergency (not as a precaution) the regulatory authority will be notified within 24 hours of the incident.
* Enrolment records for each child outline the details of persons permitted to authorise the administration of medication to the child.
* Reasonable steps are taken to ensure that medication records are maintained accurately.
* Medication forms are kept in a secure and confidential manner and ensure the records are archived for the regulatory prescribed length of time.
* Children’s privacy is maintained, working in conjunction with the Australian Privacy Principles (APP)
* educators receive information about Medical Conditions and Administration of Medication Policies and other relevant health management policies during their induction
* educators, staff and volunteers have a clear understanding of children’s individual health care needs, allergy or relevant medical condition as detailed in Medical Management Plans, Asthma or Anaphylaxis Action Plans
* Educators receive information about the medical and medication policies during their induction.
* To request written consent from families on the enrolment form to administer the Emergency Asthma Kit if required.
* Families will be reminded that every attempt to contact them for verbal permission will be made by the Service prior to administering asthma medications.
* Families are informed of Waratah All Year Care’s medical and medication policies
* Safe practices are adhered to for the wellbeing of both the child and educators.

A Nominated Supervisor/ Responsible Person /Educators will:

* 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 with the key kept inaccessible to children.
* adrenaline autoinjectors should be kept out of reach of children and stored in a cool dark place at room temperature. They must be readily available when required and not locked in a cupboard. A copy of the child’s medical management plan should be stored with the adrenaline autoinjector.
* Ensure that two educators administer and witness 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 for:
* Checking the Medication Form,
* Checking the prescription label and the amount of medication being administered
* Checking the use-by date
* Signing and dating the medication form
* Returning the medication back into the locked medication container.
* Follow hand-washing procedures before and after administering medication.
* Discuss any concerns or doubts about the safety of administering medications with management to ensure the safety of the child
* Seek further information from the family, the prescribing doctor, or the Public Health Unit before administering medication if required
* Ensure that the instructions on the Medication Form are consistent with the doctor’s instructions and the prescription label.
* Invite the family to request an English translation from the medical practitioner for any instructions written in a language other than English.
* Ensure that the Medication Record is completed correctly

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 record for child requiring medication whilst they are at Waratah All Year Care.
* Update long term medication records quarterly or 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.
* develop a Risk Minimisation Plan for their child in collaboration with management and educators and medical practitioner for long-term medication plans.
* Be required to keep prescribed medications in original containers with pharmacy labels. Please understand that medication 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 Waratah All Year Care while any symptoms of an illness remain.
* Keep children away from the Service 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 Record
* Complete the Medication Record and the educator will sign to acknowledge the receipt of the medication. Please understand that no medication will be administered without written consent from the parent or authorised person.
* Provide any herbal/ naturopathic remedies or no 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.

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 disproportionate use of Paracetamol, and minimise the risk of concealing the fundamental 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 temperature whilst at the Service, the family will be notified immediately and asked to organise collection of the child as soon as possible.
* The family will be encouraged to visit a doctor to find the cause of the temperature. While waiting for the child to be collected, educators will
* Remove excess clothing to cool the child down
* Offer fluids to the child
* Encourage the child to rest
* Monitor the child for any additional symptoms
* Maintain supervision of the ill child at all times, while keeping them separated from children who are well.

Medications kept at the service

* Any medication, cream or lotion kept on the premises will be checked monthly for expiry dates in unification with the First Aid Checklist.
* A list of first aid kit contents close to expiry or running low will be given to the Nominated Supervisor 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.
* It is the family’s responsibility to take home medication
* MEDICATION WILL NOT BE ADMINISTERED IF IT HAS PAST THE PRODUCT EXPIRY DATE.
* Families are required to complete a medication form for lotions to be administered. (Long-term medication form).

Emergency Administration of Medication

* In the occurrence of an emergency and where the administration of medication must occur, Waratah All Year Care must attempt to receive verbal authorisation by a parent of the child named in the child’s Enrolment Form who is authorised to consent to the administration of medication.
* If a parent of a child is unreachable, Waratah All Year Care will endeavor to obtain verbal authorisation from an emergency contact of the child named in the child’s Enrolment Form, who is authorised to approve the administration of medication.
* If all the child’s nominated contacts are non-contactable, Waratah All Year Care must contact a registered medical practitioner or emergency service on 000.
* In the event of an emergency and where the administration of medication must occur, written notice must be provided to a parent of the child or other emergency contact person listed on the child’s Enrolment Form.

**Emergency Involving Anaphylaxis or Asthma**

* For anaphylaxis or asthma emergencies, medication will be administered to a child without authorisation, following the correct action plan has been provided. [National Asthma Council (NAC) or ASCIA]
* in the event of a child not known to have asthma or anaphylaxis and appears to be in severe respiratory distress, the emergency plans for first aid must be followed immediately.
* an ambulance must be called immediately
* place child in a seated upright position
* give 4 separate puffs of a reliever medication (eg: Ventolin) using a spacer if required.
* repeat every 4 minutes until the ambulance arrives
* in the event of an anaphylaxis emergency where any of the following symptoms are present, an Epipen must be administered
	+ difficulty/noisy breathing
	+ swelling of the tongue
	+ swelling or tightness in throat
	+ difficulty talking
	+ wheeze or persistent cough
	+ persistent dizziness or collapse pale and floppy

(Sydney Children’s Hospitals Network – 2020)

* The Service will contact the following as soon as practicably possible -
	+ Emergency Services
	+ A parent of the child
	+ The regulatory authority within 24 hours
* The child will be comforted, reassured, and removed to a quiet area under the direct supervision of a suitably experienced and trained educator.

**Source**

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| * Australian Children’s Education & Care Quality Authority.
* Australian society of clinical immunology and allergy. ascia. <https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis>
* Guide to the Education and Care Services National Law and the Education and Care Services National Regulations
* ECA Code of Ethics.
* Guide to the National Quality Standard.
* Staying Healthy in Child Care - Fourth Edition 4
* NSW Department of Health - [www.health.nsw.gov.au](http://www.health.nsw.gov.au)
* National Health and Medical Research Council - [www.nhmrc.gov.au](http://www.nhmrc.gov.au)
* Revised National Quality Standard
* The Sydney Children’s Hospital Network (2020)

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**Review**

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| Policy Reviewed  | Modifications  | Next Review Date  |
| June 2018 | New Policy Created for new service | June 2019 |
| June 2019 | No Changes | June 2020 |
| July 2020 | * rearrangement of some points for better flow
* addition of information
* inclusion of Medical Management Plan
* additional information re: anaphylaxis or asthma emergency
 | July 2021 |