

D-18 Medication Administration

National Quality Standards (NQS)

2.1	Each child's health and physical activity is supported and promoted.
2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
7.1.2	Systems are in place to manage risk and enable the effective management and operation of a quality service.

Education and Care Services National Regulations

Reg. 90	Medical conditions policy		
Reg. 91	Medical conditions policy to be provided to parents		
Reg. 92	Medication record		
Reg. 93	Administration of medication		
Reg. 94	Exception to authorisation requirement—anaphylaxis or asthma emergency		
Reg. 95	Procedure for administration of medication		
Reg. 96	Self-administration of medication		
Reg. 161	Authorisations to be kept in enrolment record		
Reg. 162	Health information to be kept in enrolment record		
Reg. 168	Education and care service must have policies and procedures		
Reg. 177	Prescribed enrolment and other documents to be kept by approved provider		
Reg. 181	181 Confidentiality of records kept by approved provider		
Reg. 183	g. 183 Storage of records and other documents		

My Time, Our Place

1.2	Children develop their autonomy, inter-dependence, resilience and sense of agency
3.2	Children take increasing responsibility for their own health and physical wellbeing

Child Safe Standards

1	Child safety is embedded in organisational leadership, governance and culture.		
2	Children participate in decisions affecting them and are taken seriously.		
7	Staff are equipped with the knowledge, skills and awareness to keep children safe through continual education and training.		
10	Policies and procedures document how the organisation is child safe.		

Policy Statement

We aim to ensure the proper care and attention to all children through following specific guidelines regarding all medications given to the children. To ensure the interests of staff, children and parents are not compromised, medication will only be administered with the explicit permission of the parents, or in the case of an emergency, with the permission of a medical practitioner. Specific consideration will also be given to children who are carrying medication in their school bags.

Procedure

Parents who wish for medication to be administered to their child while at the service will complete the Administration of Medication Form. As per Regulation 92 of the *Education and Care Services National Regulations,* the form must provide the following information:

- the name of the child;
- the authorisation to administer medication (including, if applicable, self-administration), signed by a parent or a 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 be next administered;
- the dosage of the medication to be administered;
- the manner in which the medication is to be administered;
- when the medication is administered to the child—
 - the dosage that was administered; and
 - the manner in which the medication was administered; and
 - the time and date the medication was administered; and
 - the name and signature of the person who administered the medication; and
 - the name and signature of the person who witnessed the administration.

Authorisation from anyone other than the parent/guardian cannot be accepted. If anyone other than the parent is bringing the child to the service, a written permission note from the parent, including the above information, must accompany the medication.

As per section 5 of Regulation 93, in the case of an emergency, authorisation can be given verbally by:

- a parent or authorised nominee (providing they are authorised to consent to administration of medication as per the child's enrolment form)
- or if a parent or authorised nominee cannot reasonable be contacted in the circumstances, a registered medical practitioner or an emergency service.

Medication must be handed directly to a Responsible Person on duty and should not be left in the child's bag.



Prescription medication must be provided in its original container, bearing the child's name and an expiry date. Medication will only be administered to the child for whom it is prescribed. Non-prescription medication will not be administered at the service unless authorised by a medical practitioner.

Staff will ensure medications are stored in the refrigerator in a labelled and locked medication box 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 box with the key kept inaccessible to children.

Under Regulation 94, medication may be administered to a child without authorisation in the case of an anaphylaxis or asthma emergency. If medication is administered under this regulation, the Nominated Supervisor or Responsible Person on duty must ensure that the parent/guardian of the child and emergency services are notified as soon as practicable.

Administering Medication

Medication will only be administered from its original container, bearing the original label and instructions and before the expiry or use by date. Medication will only be administered by a Responsible Person with approved First Aid qualifications.

Before medication is given to a child, the Responsible Person who is administering the medication will verify the correct dosage with another staff member who will witness the administration of the medication.

After the medication is given, the Responsible Person will record the details on the Administration of Medication Form, including:

- the dosage that was administered; and
- the manner in which the medication was administered; and
- the time and date the medication was administered; and
- the name and signature of the person who administered the medication; and
- the name and signature of the person who witnessed the administration.

Where a medical practitioner's approval is given, staff will complete the medication form and write the name of the medical practitioner for the authorisation.

Where medication for treatment of long-term conditions such as asthma, diabetes, epilepsy, or ADHD is required, the service will require an individual medical management plan from the child's medical practitioner or specialist detailing the medical condition of the child, correct dosage of any medication as prescribed and how the condition is to be managed in the service environment.

Asthma Medication

The only exception to this procedure is for asthma medication. A child may carry asthma medication on their person, or in their bag, with parental permission. This will be obtained at the time of enrolment as part of their individual Risk Minimisation Plan, or at the time the staff are notified of a child's diagnosis.

West Ryde BASC Inc. Policies and Procedures

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Where a child carries their own asthma medication/puffer, they are encouraged to report to staff their use of the puffer as soon as possible after administering, or prior to administering (if possible). Staff will then record this in the child's Communication Plan, attached to their individual Risk Minimisation Plan.

Self-administration of Medication

Under Regulation 96 of the *Education and Care Services National Regulations,* a child over pre-school age may self-administer medication if authorisation has been obtained for the child on enrolment.

In the event of a child having permission to self-administer regular medication (other than asthma medication), this must be detailed on their individual medical management plan, including recommended procedures for recording that the medication has been administered. The management plan must be provided by a medical practitioner.

Medications kept at the service

- Any medication, cream or lotion kept on the premises will be checked monthly for expiry dates.
- If a child's individual medication is due to expire or running low, the family will be notified by staff that replacement items are required.
- Medication will not be administered if it has expired based on the expiry dates stated on the original packaging.
- Parents will be responsible for ensuring short-term medications, such as antibiotics, are taken home at the end of each day and returned to the service with the child as necessary.

Related Policies

- Acceptance and Refusal of Authorisations Policy
- Allergies Policy
- Anaphylaxis Management Policy
- Arrivals and Departures Policy
- Asthma Management Policy
- Dealing with Medical Conditions Policy
- Enrolment and Orientation Policy
- First Aid Policy
- Hygiene Policy
- Maintenance of Records Policy
- Privacy and Confidentiality Policy
- Staff Orientation and Induction Policy

Sources

• Childcare Centre Desktop – Administration of Medication Policy

- Child Safe Standards
- Education and Care Services National Regulations 2011
- Framework for School Age Care in Australia My Time, Our Place
- National Quality Standard Australian Children's Education and Care Quality Authority
- Network of Community Activities Dealing with Medical Conditions and Medication Administration Sample Policy

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Version Control						
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	 Format changed 					
v.2.202310	 No changes made 					
v.2.202206	 Minor wording changes 	Staff				
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v.2.202005	 No changes made 					
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	Regulations and My Time Our Place					
	 Included specific information to be 	Staff				
	included on medication forms as per					
	the Regulations					
	 Included specific information relating 	Staff				
	to the storage of medications at the					
	service					
	 Specified Regulation 94 	Staff				
	 Added paragraph on asthma 	Staff				
	medication					
	 Added paragraph on self- 	Staff				
	administration of medication					
	 Added paragraph on medications kept 	Staff				
	at the service					