POLICY: 4.5 ADMINISTRATION OF MEDICATION

Procedure: 4.16 Administration of Medication

The responsibility for the administration of medication is a critical health and safety requirement, negotiated and established between the parent and Educator. Parents are required to provide separate written permission for the administration of any medicine to their child. This includes any treatment or shampoo for head lice infestation and teething gels.

4.16.1 Linking to Policy

This procedural guidance should be read in conjunction with the service <u>4.5 Administration of</u> <u>Medication Policy</u> and will assist the Approved Provider, Management, Staff (Nominated Supervisors, Coordinators, and Administrative Staff members) Educators, Educator Assistants and parents to implement the policy. The procedure covers: <u>4.16.2 Roles and Responsibilities</u>

4. TO.2 Roles and Responsibilities

4.16.3 Medication Authorisation

4.16.4 Record on Medication being Administered

4.16.5 Self Administration by a Child Over Preschool Age

4.16.2 Roles and Responsibilities

The Service staff will

- provide the families with relevant information about health management policies and practices when enrolling and regularly after that through newsletters.
- gather information about the child's health needs at enrolment.
- seek blanket permission to administer 1 dose of paracetamol from the parent.
- ensure a Medical Management Plan or Health Management Plan is in place for any ongoing medical condition, and appropriate permissions are authorised for medication taken regularly, e.g., insulin
- inform parents about the capacity of the service to administer medication in the event of an Asthma and Anaphylaxis reaction at enrolment. Refer to 4.14 Anaphylaxis Management Procedure and 4.15 Asthma Management Procedure
- provide forms for Educators to record relevant health and medication details and train them on how to complete the form.
- check-in with Educators on their support and monitoring visit to see if there are completed forms to be collected, file the forms on the child's file.
- support families and Educators when dealing with health management matters, including supporting the development of a Risk Minimisation Plan.

- safely store confidential health and medical details including administering of medication records. The Incident, Injury, Illness, and Trauma Records will be kept until the child is 25 years old. The Medication Record Permission will be kept until 3 years after the child's last attendance. See 10.6 Records Management and Storage Procedure
- keep an up to date current copy of each child's health needs, where applicable Health Care Plan, Medical Management Plan and Risk Minimisation Plan. See 10.6 Records Management and Storage Procedure.
- provide training to new Educators ensuring they can competently follow the instructions given to administer medication

It is the responsibility of the family to:

- ensure they provide details of their child's medical needs, and the Child Enrolment Form is current, and authorisations are up to date.
- provide a summary of the child's health, medications, allergies, doctor's name, address and phone number, and a Medical Management Plan approved by a Doctor to the Co-ordination Unit staff and Educator before starting care and ongoing as required. See to 4.13 Medical Conditions Procedure, 4.14 Anaphylaxis Management Procedure and 4.15 Asthma Management Procedure for guidance.
- keep the Educator up to date with any changes to a child's medical condition or Medical Management Plan.
- Provide medication in its original packaging.
- complete the Medication Record Permission authorising the Educator to administer medication to their child; if daily use of medication is requested a letter from the child's medical practitioner is required. Request the Educator to administer only the recommended dosage on the original medication package.
- seek a doctor's certificate for a child to show the child is fit and well to return to care after illness if requested by the Educator.
- for asthma, diabetes or other similar ongoing medications parents will be required to advise the Nominated Supervisor in writing whether their child will be responsible for administering their own medication or will require supervision and full details of how, when (i.e., at what intervals) and by whom all such treatment is to be administered. Refer 4.13 Medical Conditions Procedure, 4.14 Anaphylaxis Management Procedure, and 4.15 Asthma Management Procedure

Educators will:

- ensure medication is administered to a child only from its original packaging.
- ensure medication is only administered to a child enrolled in the service with the written permission of the child's family or legal guardian using the Medication Record Permission.
- all completed Medication Record Permission will be forwarded to the Service or given to the visiting Coordinator to be placed on the child's file.

- before the person authorising the administering of medication leaves the residence, ensure the written instructions provided are consistent with the instruction on the medication or as prescribed by a doctor.
- where medication is required, but no authorisation to administer the medication occurred, the following process will occur:
 - The Educator will call the parent and inform them of the need to administer medication.
 - The Educator will then text or email the parent the details of dosage as noted on the medication with a note stating the person authorising the administering of medication will sign the authorisation on arrival to collect the child.
 - The parent will text or email back their authorisation in writing stating they give permission for the Educator (note their name) to administer the medication, this will include the name of the child, name of medication, dosage, time of the last dosage and agree that they will sign the Medication Record Permission on their arrival at the Educator's residence
- in the case of an emergency verbal permission can be given to an Educator by a parent or person named in the child's enrolment record as authorised to consent to the administration of medication, or if this permission cannot be readily obtained a registered medical practitioner or the emergency services will be contacted for advice. The Educator will:
 - Contact the Nominated Supervisor as soon as possible (that day)
 - Complete the Medication Record Permission and ensure the authorised person signs this on arrival
 - Complete an Incident, Injury, Illness, and Trauma Record and ensure this is received by the service the day of the incident. (if the Educator requires support to complete, they will call the Service and support will be provided).
- store medical information in a safe and secure place. Children's Health Management Plans or Medical Management Plans will be kept with medication and out of reach of children.
- maintain confidentiality with regard to a child's medical condition.
- ensure the administration of homeopathic, naturopathic, over the counter, or non-prescribed medications (including cold preparations, and paracetamol) have a chemist label or letter from the prescribing practitioner accompanying the product before this is administered. This includes the provision of a signed Medication Record Permission by the parent or authorised nominee, written instructions and dosage on the medication or from the health professional that dispensed the medication.
- not give unidentified medication or medication to a child where the instructions are not clear to the Educator, e.g. in an unfamiliar language to the Educator; in this case, a letter from the practitioner will be required.
- Inform parents of service requirements on the administering of medications and permissions when parents are requesting them to administer medication.
- comply with the Health Management Plan or Medical Management Plan and have in place a Risk Minimisation Plan for each child with chronic health problems, such as asthma, epilepsy, diabetes, severe allergy, or anaphylaxis.

- ensure medications are stored correctly and securely away from access by children, high enough to be out of reach of children (more than 1.7 meters, if in the fridge in a locked box or locked cupboard)
- discuss any concerns about administering medication with parents and, if necessary, Coordination Unit staff.
- for administering of medication to a child without authorisation in the case of an anaphylaxis or asthma emergency. See 4.14 Anaphylaxis Management 4.15 Asthma Management Procedures for guidance.

4.16.3 Medication Authorisation

Parents will give the Educator written authority for the administration of all medication and in what circumstances and the manner medication is to be administered; including natural therapies, specifying:

- o the time and date/s,
- o name of the child,
- o name of the medication,
- o dosage, and
- o time of administration and
- o time of the last dose together
- o parent's signature authorisation on the Medication Record Permission.

PLEASE NOTE: If a child has not had a prescribed medication before, it is requested that the first dose of the medication be administered to the child, a few hours, if possible, before the child comes into care to ensure there are no harmful side effects. Where the child has a significant response to the medication, for example, good/moderate/slight, the Educator is to note this response and advise the parent

The Educator will:

- include written notification to the parent of the medication administered.
- have a separate page for each child to ensure confidentiality.
- follow the child's Health Management Plan or Medical Management Plan.
- encourage families to provide additional instructions in the administration of the medication where appropriate in the form of Health Management Plan and may include advice on the use of special equipment.
- before the Educator administers any medication, they will:
 - o Check the parent instructions against the instructions on the packaging,
 - In case of any discrepancy (e.g., dosage or time), the Educator will administer the dosage as stated on the packaging.

- when the Medication Record Permission is full, the Educator must forward the form to the Service office. The form will be retained until 3 years after the child's last attendance.
- ensure all unused medication is returned to the parent on the collection of the child.
- only administer medication if it is dated before the expiry or use by date.
- where possible seek verbal permission or used the blanket permission to administer paracetamol and notify the Service and parent, that a dose of paracetamol is to be administered and the reason for this; and
- complete the Medication Record Permission, and the parent will sign the form at the end of the day, noting they have been informed.
- if the child does not improve after a reasonable amount of time and requires further medication, the parent will be contacted to collect their child, and the Service will be informed. Educators will complete the Incident, Injury, Illness, and Trauma Record (refer to the 4.9 Incident, Injury, Illness, and Trauma Procedure for guidance on completing this record).
- in the event of anaphylaxis or an asthma attack, Educators may administer medication to a child without authorisation. However, the child's parent and emergency service will be contacted as soon as possible.
- on the administration of any medication, Educators will complete the Medication Record Permission before this occurs or in an emergency as soon as possible.
- if an epi/ana pen is used, an ambulance is to be called immediately, the parent, and the Service will be notified immediately.
- Seek immediate emergency medical treatment after use. Refer 4.14. Anaphylaxis Management Procedure for guidance on the management of Anaphylaxis.
- in the event of an emergency, the Educator/Service will aim to obtain verbal consent to administer the necessary medication when no written authorisation has been provided by seeking permission from the parent or if necessary, a registered medical practitioner or emergency service personnel. Refer to Reg 93(5)

<u>Aspirin should never be given to children</u> as it may cause stomach upsets, gastric bleeding, and is associated with a rare but potentially fatal condition called Reye's Syndrome". Staying Healthy in Child Care edition 5th edition.

4.16.4 Record on the medication being administered

The Authorisation to Medication Record Permission must collect the following information:

- The name of the child

- Name of medication (check to see if the child's name is noted and medication is in original packaging/container with instructions.
- Expiry/use-by date
- Date and time of the last dosage
- Date and time to be administered
- The method by which the medication is to be administered (instructions) orally, topically, eye drops or ear drops, injection.

4.16.5 Self administration by a child over preschool age

As defined in the *Education and Care Services National Regulations 2011*, the service may allow a child over preschool age to self-administer medication.

The service considers their duty of care when determining under what circumstances they will allow the parent permission to be granted for a child to self-administer medication.

The age at which children are ready to take care of and be responsible for their medicines varies and is to be taken into consideration when transferring responsibility to a child. There may be circumstances where it is not appropriate for a child of any age to self-manage their health care needs. A health professional assess with parents and children the appropriate time to make this transition and will provide this advice to the service for consideration.

Where an Educator doesn't believe the child is competent at self-administering medication they can refuse (refer to Policy 2.5 Acceptance and Refusal to Authorisation for guidance)

Children who can self-administer may be encouraged and supported to take responsibility to manage their medicines, as agreed by and negotiated with their parents.

Only children who are over preschool age are permitted to self-administer medication providing the following is adhered to:

- Written permission (Medication Record Permission) must be provided by the parent/guardian before children are permitted to self-administer their medications.
- Parents/guardians will provide written details of the medical information and administration protocols from the child's medical/specialist medical practitioner(s).
- The self-administration of medication or medical procedures by children over preschool age will be undertaken only under the supervision of an Educator or Educator Assistant or staff member with approved first aid qualification.
- Educators must complete the appropriate documentation regarding the administration of the medicine (Medication Record Permission)
- Consideration needs to be given where the medication will be stored, bearing in mind the safety of the other children in care.

Review

	Date	Details
Revision 00	07/2015	Original Policy Issued
Revision 01	12/2016	Reviewed
Revision 02	08/2017	Reviewed
Revision 03	10/2020	Reviewed and separated from
		Policy

Related Documents

Policies

4.3 Serious Incident and Emergencies Policy

- 4.4 Medical Conditions
- 4.6 Administering First Aid
- 4.5 Administration of Medication

Forms

Incident, Injury, Illness, Trauma Record Health Management Plan Medication Record Permission

Reference

Refer to 4.5 Administration of Medication Policy