

4.5 Administration of Medication Policy

1. Purpose

My Place Family Day Care acknowledges that administering medication should be considered a high-risk practice. Authority must be obtained from a parent or authorised nominee named on the Child Enrolment form before Educators administer any medication (prescribed or non-prescribed). Parents place a high level of trust and responsibility on Educators when they are administering medication to children or observing older children self-administering medication.

2. Scope

This policy applies to Nominated Supervisors, Coordinators, Educators, Educator Assistants, parents and children

3. Definitions

Approved Provider: Inala Community House (ICH) has approval from the Federal Government to operate an approved FDC service.

Service: My Place Family Day Care, whose Approved Provider is Inala Community House.

Parent/Guardian: The person responsible for the payment of fees and who is paid the Child Care Subsidy. Referred to as the Parent/s. **PLEASE NOTE: do not include a parent who is prohibited by a court order from having contact with the child**

Authorised Nominee: in relation to a child, means a person who has been given permission by a parent or guardian to collect the child from the FDC Educator.

Authorised Person: Means a person who is a parent or family member of the child who is being educated and cared for by the family day care Educator. **PLEASE NOTE; A parent or family member does not include a person whose access to the child is prohibited or restricted by a court order or tribunal of which the approved provider, nominated supervisor or FDC Educator is aware.**

Educator: A suitably qualified person who is registered with the Service.

4. Policy

My Place Family Day Care aims to provide care for children who require authorised medication, either on a short or long-term basis.

The responsibility for the administration of medication will be negotiated and established between the parent and Educator.

Parents will be 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, teething gels and non-invasive medication such as topical skin medication.

Educators will only administer medication with permission from a parent, unless this relates to Asthma or Anaphylaxis and in accordance with this policy.

Before an Educator administers any medication, a check of parent's instructions and a check of the instructions on the packaging, in relation to specific time and dosage should be made.

4.1 Administration of Medication

Administering medication should be considered a high-risk practice.

Educators will only administer medication with permission unless this relates to an Asthma or Anaphylaxis attack and in accordance with instructions.

Before an Educator administers any medication, they will do a check of Parent's instructions and a check of the instructions on the packaging, in relation to specific time and dosage

- The name of the child if prescribed by a medical practitioner,
- Name of medication, in original packaging/container with instructions,
- Expiry/use by date,
- Date and time of last dosage,
- Date and time to be administered,
- Method by which the medication is to be administered (instructions) – orally, topically, eye drops or ear drops, injection.

4.2 Self Administration of Medication

The age at which children are ready to take care of and be responsible for their own 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.

A medical or health care professional will assess with parents and children the appropriate time to make this transition and provide written advice to the Service.

The Parent of the child able to self-administer medication must give written permission for self-administration of medication to occur.

The self-administration of medication or medical procedures by children will be undertaken only under the supervision of an Educator or Educator Assistant.

5. Review

This policy remains in effect unless otherwise determined by resolution of the Board of Directors. This policy will be reviewed every two years or sooner as required.

	Date	Details
Revision 00	07/2015	Original Policy Issued
Revision 01	12/2016	Reviewed
Revision 02	08/2017	Reviewed
Revision 03	11/2019	Reviewed
Revision 04	01/2021	Reviewed

6. Related Documents

Policies

- 4.2 Incident, Injury, Trauma and Illness Policy
- 4.3 Serious Incident Policy
- 4.4 Medical Conditions Policy
- 4.6 Administration of First Aid Policy

Procedures

- 4.12 Incident, Injury, Trauma and Illness Procedure
- 4.16 Responding to Medical Emergency Procedure
- 4.17 Responding to Other Emergencies Procedure
- 4.19 Medical Conditions Procedure
- 4.20 Anaphylaxis Procedure
- 4.21 Asthma Procedure
- 4.22 Diabetic Procedure
- 4.23 Epilepsy Procedure
- 4.24 Administration of Medication Procedure
- 4.25 Self Administration of Medication Procedure
- 4.26 Administration of First Aid Procedure

Forms

- Child enrolment
- Health Management Plan
- Medication Record Permission

References

Family Law Act 1975 (S61B-Cth)

Asthma Australia, retrieved 23/8/2017, from: www.asthmaaustralia.org.au

Community Health Queensland Government, retrieved 20/10/2019, from:
<http://www.health.qld.gov.au/services/default.asp>

Education & Care National Regulations 2011

R.92 Medication Record

R.93 Administration of Medication

R.94 Exception to authorisation requirement – anaphylaxis or asthma

R.95 Procedure for administration of medication

R.96 Self administration of medication

ACECQA (2017). Family Day Care Educator Compliance Responsibilities under the National Law and the National Regulations: Compliance Guide

ACECQA (2017). Guide to National Quality Framework October 2017, retrieved from
<https://www.acecqa.gov.au/nqf/about/guide> Guide to the National Quality Framework 2018

Chapter 2 The National Quality Standards, Quality Standard 2: Children’s Health and Safety
2.1.2: Health practices and procedures – effective illness and injury management and hygiene practices are promoted and implemented

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

ACECQA (2017). Requirements for Family Day Care Educators (From 1 Oct 2017) Info Sheet

Australian Government National Health and Medical Research Council (2013). Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th Edition), retrieved from <https://www.nhmrc.gov.au/guidelines-publications/ch55>