

**Rationale/Aim:**

The Gunnedah Preschool recognises its duty of care to ensure the health and well-being of workers, children and families at all times. This can often depend on the use of medication, which needs to be administered as prescribed by a medical practitioner. If families request the administration of medication they will be required to adhere to the following guidelines. Workers will also adhere to these guidelines in order to ensure the safe administration of medication.

Relevant Legislation/Related Documents/References:

- Education & Care Services National Regulations 2014
 - Regulation 90 (Medical conditions policy)
 - Regulation 91 (Medical conditions policy to be provided to parents)
 - Regulation 92 (Medication Record)
 - Regulation 93 (Administration of medication)
 - Regulation 94 (Exception to authorisation requirement – anaphylaxis or asthma emergency)
 - Regulation 95 (Procedure for administration of medication)
 - Regulation 96 (Self-administration of medication)
- National Quality Standard, Element 2.1.1, 2.1.4, 2.3.2, 7.3
- Children (Education and Care Services National Law Application) Act 2010, Section 167
- Public Health Act 1991
- Staying Healthy in Child Care, 5th Edition, 2012
- ECA Code of Ethics
- “Health and Safety in Children’s Services, Model Policies and Practices 2003”, Firth, Kambouris & O’Grady.
- National Health and Medical Research Council- www.nhmrc.gov.au
- NSW Department of Health – www.health.nsw.gov.au
- Health Insite- www.healthinsite.gov.au
- Centre for Community Child Health – www.rch.org.au
- Work Health and Safety Act 2011
- “Managing OHS in Children’s Services”, Lady Gowrie

Procedures/Strategies:

It is preferred that the child’s parents administer medication. If parental administration is not feasible, Educators will administer medication.

In order for a child to be administered medication a *Medication Authorisation Record* form must be completed by the parent or person named on the child’s enrolment form as authorised to consent to administration of medication, with assistance from an Educator. The form will request the following details:

To be completed by parent/guardian:

- The name of the child.
- Child’s date of birth.
- The authorisation to administer medication, signed by a parent or person named in the child’s enrolment

record as authorised top consent to administration of medication.

- The name of the medication to be administered.
- Time and date medication was last administered.
- The time and date the medication is to be administered.
- The dosage of the medication to be administered.
- Method of administration.
- Signature of parent/guardian.

To be completed by the educator when administering:

- Time and date of medication administered.
- Dosage administered.
- Method of administration.
- Name of the educator administering the medication.
- Signature of the educator administering the medication.
- Name of the educator who witnessed the administration of medication.
- Signature of the educator who witnessed the administration of medication.

The administration of medication to a child who does not have a 'medication authorisation' form will only be authorised if, in an emergency:

- A parent or person named on the child's enrolment form as authorised to consent to administration gives verbal permission, or
- If a parent or person named on the child's enrolment form as authorised to consent to administration cannot reasonably be contacted, and a registered medical practitioner or emergency services worker gives verbal permission.

If medication is administered with verbal permission, a 'medication authorisation' form will be completed and a copy given to the parent or other family member as soon as practicable.

Medication may be administered to a child without an authorisation in the case of an anaphylaxis or asthma emergency. If medication is administered in this case then the parents and the emergency services must be notified as soon as practicable.

All medication must be administered from its original container, bearing the original label. The container and the label must be intact. The label must be easily readable and must clearly state:

- (a) the name of the child to whom the medication is to be administered
- (b) the issuing pharmacist or doctor's name
- (c) the dosage and time to be taken
- (d) any specific instructions for administration
- (e) the expiry date

Medication will only be given to the child that it was prescribed for. Medication will not be given if it has expired.

Medication will be administered in accordance with any instructions attached to the medication or any written or verbal instructions from a registered medical practitioner.

Medication will be administered by two Educators. One of these will have a current accredited First Aid qualification, as per regulation and legislation. Both educators will check the 'medication authorisation' form, the prescription label, the dosage and the identity of the child. Both Educators will sign date and enter the time of administering the medication onto the medication form.

Medication will be returned to its appropriate, safe storage immediately it had been administered.

Children will be appropriately supervised whilst taking medication eg nebulisers.

Educators are not permitted to forcibly administer medication to any child. If a child refuses to take medication a parent/guardian is contacted immediately.

The parent/guardian collecting the child is informed that the medication has been administered that day.

All medication is stored out of reach of children, in the kitchen, an area which is locked so that children do not have access. Medication which requires refrigeration will be stored appropriately. Medication which does not require refrigeration will be stored in a labelled container on top of the fridge.

Under no circumstances is medication to be left in a child's bag or in a place accessible to children. The parent/carer must hand the medication to a staff member. This also applies to children who travel on the preschool bus. Children who travel on private buses are the bus company's responsibility until signed in at the preschool. It is recommended that medication be handed to the bus driver to hand to preschool staff. If this is not possible the parent should phone the preschool to let them know the child has medication in their bag. It is then removed immediately the child arrives and stored appropriately.

'Medication Authorisation' forms will be stored in the First Aid, Accident/Illness and Hazard/Near Miss Register located in the clerical worker's office. Forms are archived quarterly.

Children who are taking antibiotics will be excluded from care while symptoms of the illness remain and for 24 hours from commencing antibiotics to ensure they have no side effects to the medication. Children will also be excluded during the infectious period of their illness.

Non-prescription drugs and herbal medications/remedies will not be administered without a letter from a registered medical practitioner stating the name of the child, the reasons for the medication, the dosage and administration instructions and the period of time the medication is required for. The above procedures are to be followed. Non-prescription drugs include such items as throat lozenges, cough drops, paracetamol and cough mixture. Children on such medication will only be able to attend if the *Responsible Person* feels they are well enough to do so.

Any Educators who have concerns about medication will consult with the *Responsible Person* who may seek further information from the family, medical practitioner or the Public Health Unit.

Families are asked to notify workers if their child is on any medication at home or has had any medication prior to arriving at the Preschool. This includes short or long term medications. If long term medication is required then the 'Medical Conditions Policy' (3.27) must be followed.

Families will be informed of this policy on enrolment. Workers will be informed of this policy during orientation.

Evaluation: Educators effectively administer appropriate medication in accordance with regulatory guidelines. Open communication between workers and families is maintained to ensure children receive medication safely. Appropriate documentation is completed and stored.

Endorsement:

Policy signed:

Date:

Name:

Position:

Review: May 2019