# Medication Administration Policy and Procedure





Introduction	Studies of children in care have found that on any one day 5% of children are on medication for an illness. Many children have chronic health problems such as asthma, diabetes, epilepsy and allergies and may be at risk of a medical emergency while in care, requiring emergency treatment or medication.  This policy refers to general guidelines and requirements stated in the Education and Care Services National Regulations regarding administration of prescribed and emergency medication by children's program staff to children in their care and the administration of non-invasive medications such as oral and topical (skin) medications.
Outcome Area	National Quality Standards – Quality Area 2: Children's Health and Safety National Quality Standards – Quality Area 7: Leadership and Service Management
Eligibility	The policy applies to all staff employed in Learning Links Education and Care Services.
Policy	Preschool staff are responsible for the effective care and health management of children in their care who are taking medications for health problems, prevention and management of acute episodes of illness or medical emergencies by safely administrating medication.  All staff responsible for administering medication receive comprehensive training to ensure they understand their duty of care requirements, can respond to the needs of individual children and situations.  All staff, including casual staff, educators and volunteers/ students, are informed of all children diagnosed with a medical condition and the risk minimisation procedures for these children.
Definitions	An incident, situation or event where there is an imminent or severe risk to the health, safety and wellbeing of any person present at the service.  Medication A medicine, or a set of medicines or drugs, used to manage/improve a condition or illness.  Health Management Plan A plan developed by the parents in consultation with their child's nominated treating doctor. The Medical Management Plan must detail the following:  • The specific health care need, allergy, or relevant medical condition including the severity of the condition • Any current prescribed medication • The response required from our service in relation to the emergence of symptoms • Medication required to be administered in an emergency • The response required if the child does not respond to initial treatment • When to call an ambulance for assistance  Anaphylaxis  Anaphylaxis Anaphylaxis is a severe, life-threatening allergic reaction. The most common causes in young children are eggs, peanuts, tree nuts, cow milk, sesame, bee or other insect stings, and some medications.

#### **Asthma**

Asthma is lung condition which causes sufferers to have sensitive airways that react to triggers, causing a 'flare-up'. In a flare-up, the muscles around the airway squeeze tight, the airways swell and become narrow, and there is more mucus making it hard to breathe.

#### **Diabetes**

Diabetes is a serious complex medical condition which can affect the entire body. Diabetes requires daily self-care and management to minimise the risk of complications developing that can have a significant impact on quality of life and future health outcomes.

#### **Epilepsy**

Epilepsy is a disease characterised by a predisposition to generate seizures and by the neurobiological, cognitive, psychological, and social consequences of this condition. A seizure is an event and epilepsy is the disease involving recurrent unprovoked seizures.

#### Allergy

A damaging immune response by the body to a substance - generally a particular food, pollen, fur, or dust - to which it has become hypersensitive.

#### **Authorised nominee**

A person who is authorised by a parent/legal guardian of the child to be contacted in the case the child's parents/guardian cannot be reached for the purpose of:

- an emergency, and or
- collect the child from the service, and or
- for administration of medication.

#### **Fever**

It is usually not necessary to reduce a fever, because a fever in itself is not harmful. However, medication is sometimes given to 'bring a fever down' because there is no doubt that a fever can make a person feel miserable.

Some studies show that giving medication to reduce the fever can actually slow down the body's immune response to infection. In most cases, do not worry about treating the fever itself—instead, focus your attention on:

- The way the child looks and behaves,
- · Their level of alertness,
- Whether there are any other symptoms that indicate serious infection, such as vomiting, coughing or convulsions.

#### Key things to remember about fever:

- Fevers are common in children.
- If the child seems well and is happy, there is no need to treat a fever.
- If the child is unhappy, treatment is needed to comfort them.
- Give clear fluids and, if the parents give permission, paracetamol.
- Watch the child and monitor how they are feeling.

# Storage of Medication

## **Storage of Medication**

- Prescribed medications must be provided to the service for storage in original packaging. All prescribed medications must have a current use by date evident.
- Medications will be stored securely as per prescription instructions e.g. in the fridge, and out of reach of children.
- Children's Panadol is stored in the RFF First Aid Kit.

#### **Actions**

# Procedure for administering prescribed medication

An educator with current and approved first aid qualifications to refer to the Medication Authority Form and Medical Administration record and confirm there is written authorisation to administer medication.

Check the instructions on the Medication Authority Form are consistent with the doctor's instructions and the prescription label.

#### Step 2

Follow handwashing procedures.

#### Step 3

Check that the prescribed medication is in its original container, has the child's name, dose and time/frequency of administration.

#### Step 4

Organise for another educator to witness the medication administration procedure.

Administer the medication as per the Prescription and Medical Practitioner's instructions.

# Step 6

Complete the Medical Administration Record (date, time, dosage, method and sign and obtain witness signature.

#### Step 7

Return medications to correct storage areas immediately following the administration of the medication.

#### Step 8

On arrival of parent/guardian, parents are required to sign medical administration form

# <u>Procedure for administering medication for an incident, illness, injury or trauma occurring at the service</u>

#### Step 1

Educators will:

Refer to a Medication Administration record for the child and confirm that written authorisation from the parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication (Regulation 92(3)(b)) has been completed if it is safe to do so as a result of an illness, incident, injury or trauma arising at the service.

#### Step 2

Follow hand washing procedures before and after administering medication.

#### Step 3

If the medical incident is relevant to a known health condition and there is a health plan in place check that the prescribed medication is in its original container bearing the child's name, dose and time/frequency of administration.

#### Step 4

If the medical incident is not relevant to a known condition and there is no specific health care plan in place a first aid qualified staff member will follow the procedure for a first aid response. This could include the administration of medication.

#### Step 5

Administer the medication as per the Medical Practitioners and or Health Management Plan instructions, with two Educators in attendance, one of whom must have an approved first aid qualification. One educator will be responsible for the administration and the other adult will witness the procedure.

## Step 6

Complete the Educator section of the Medical Administration Record (Date, time, dosage, method and sign off name/signature of both adults).

#### Step 7

Ensure that the Incident, Injury, Trauma and Illness Record documents any medication given if it is in response to one of these needs arising.

#### Step 8

Ensure that medications are stored away as per the instructions (fridge or otherwise) in the labelled medication container inaccessible to children.

#### Step 9

Ensure that written and verbal notifications are given to a parent or other authorised person as soon as practicable, if medication is administered to the child in an

emergency, e.g. asthma or anaphylaxis when consent was either verbal, written or provided by medical practitioners.

#### Step 10

Ensure that if medication is administered without authorisation in the event of an asthma or anaphylaxis emergency that emergency services are notified as soon as practical.

#### Step 11

Inform the Nominated Supervisor (or delegate) of any medication administered in an emergency.

# <u>Procedure for administering Children's Panadol and treatment of fever</u> Step 1

The child's temperature will be taken by under arm thermometer or if not possible to use under arm thermometer an ear thermometer can be used.

#### Step 2

If the temperature is 38 degrees Celsius or above, children's Panadol may be administered.

A parent(s)/guardian will be informed via phone call and asked for permission to give paracetamol. If the parent(s)/guardian cannot be contacted, the staff member will check the child's Enrolment Form to ensure consent has been given to administer paracetamol.

During the phone call the parent/guardian will be advised to collect their child ASAP.

With signed approval (enrolment form) administer a single dose of paracetamol following the directions on the paracetamol bottle following child age dosage.

# Step 3

Remove the child's excess clothing if necessary. DO NOT place child under shower.

#### Step 4

Encourage the child to drink fresh water to prevent dehydration.

#### Step 5

Monitor the child's symptoms and call for an ambulance if child's condition deteriorates.

## Step 6

Complete the Medical Administration Record (date, time, dosage, method and sign and obtain witness signature.

#### Step 7

Return medications to correct storage area immediately following the administration of medication.

# Step 8

On arrival of parent/guardian, they are required to sign medical administration form

NOTE: Aspirin must never be given to a child under any circumstances.

# Roles and Responsibilities

# **Approved Provider**

- Ensuring that medical and medication administration policies are current and communicated to staff.
- Ensuring staff training systems clearly communicate accountabilities and responsibilities.

#### **Nominated Supervisor**

- Ensuring that enrolment records contain details required for the safe administration of medications including the details of persons permitted to authorise the administration of medication.
- Obtaining written consent from families to administer emergency medication if required e.g. Epipen and Ventolin.
- Ensuring that medication records are completed as required and stored confidentially.
- Ensuring that medication is not administered to a child unless:

- 1) There is a signed medication authority in child's enrolment form or administration of medication form
- 2) The prescribed medication must be within expiry date and in its original packaging.
- 3) The medication administered is in accordance with prescription/ package instructions
- 4) Is a medical emergency
- Ensuring that the parent is advised immediately following medication being administered to the child in an emergency.
- Notifying Emergency Services if medication was administered during an emergency immediately following the incident and providing medication form
- During a serious incident or medical emergency (ambulance or hospital intervention required) notification lodge with NQATS portal within 24 hours.
- If NQAT is notified, Simone Montgomery and Diane Peacock- Smith (General Managers) must be notified ASAP.

#### **Educators**

Educators will (with support from the Nominated Supervisor):

- NOT administer any prescribed medication without authority except in the case
  of an emergency.
- Ensuring medications are within expiry date and are securely stored as per the original packaging instructions.
- Ensuring that two educators always sighted during administration of medications and follow the established protocol.
- Signing, dating and noting the time on the Medication Administration Record when medication has been administered and by whom.
- Following hand washing procedures before and after administering medication.
- Ensuring that the instructions on the Medication Authority form match the prescription label in accordance with the doctor's instructions.
- Completes all required Incident, Injury, Trauma and Illness Record documentation.
- Notifying a child's family if medication is due to expire or running low.
- If serious incident advise Nominated Supervisor and/or Responsible Person for notification to NQAT.

#### **Child's Parents/Guardians**

If you require medication to be administered to your child, you are responsible for:

- Notifying educators when your child is taking any medications.
- Completing a administration form.
- Supplying a health management plan as applicable.
- Participating in creation of a Risk Minimisation and Communication Plan
- Keeping prescribed medications in original prescription packaging.
- Ensuring all medications are given to an educator on arrival to the service and NOT leaving medication in your child's bag.
- Ensuring medication is within expiry and providing medication as required.
- Providing any over the counter medication must detail either from a doctor or pharmacy label child's name and dosage.

# Related Legislation, Standards, Documents

#### Legislation

- Education and Care Services National Law Act: Section 173
- Education and Care Services National Regulations: Regulations 90, 91, 96
- Health Records Act
- National Quality Standards
- Children (Education and Care Services National Law Application) Act
- NSW Work Health and Safety Act 2011: 128

## **National Standards**

- 2.1.1 Each child's health is promoted
- 2.1.3 Effective hygiene practices are promoted and implemented
- 2.1.4 Steps are taken to control the spread of infectious diseases and the manage illness and injuries, in accordance with recognised guidelines

- 2.3.1 Children are adequately supervised at all times.
- 2.3.3 Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.
- 7.3.1 Records and information are stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements.
- 7.3.5 Service practices are based on effectively documented policies and procedures that are available at the service and reviewed regularly.

# **Sources**

- Early Years Learning Framework, reference 3 Children have a strong sense of wellbeing
- Guide to the National Quality Framework, ACECQA
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011
- Staying Healthy in Child Care 5th Edition (2012)
- NSW Health: <u>www.health.nsw.gov.au</u>

# **Learning Links Documentation**

- Medical Conditions Policy and Procedure
- Incident, Injury, Trauma and Illness Policy and Procedure
- Child Safe Environment
- Enrolment form contacts details, authority for emergency administration of Panadol, Asthma and Anaphylaxis Medication.

#### Review

This policy and guidelines will be reviewed every two years and will incorporate current information, legislation and feedback as required.

The service will ensure that families of children enrolled at the service are notified at least 14 days before making any change to a policy or procedure that may have significant impact on the provision of education and care to any child enrolled at the service.

This policy is owned by: Preschool

Policy updated on: 31 May 2023 Policy updated by: Director, Preschool

Version number: 2.0

This version approved by: GM, Service Quality, Risk and Compliance

This document can be viewed on: Learning Links Intranet, Learning Links Preschool

Website

Policy due for review: 31 May 2025