



East Preston Islamic College

ADMINISTRATION
OF
MEDICATION
POLICY

The Approved Provider must ensure that when staff administer medication, they must follow the guidelines of this policy and the procedures outlined in Attachment 1 – Procedures for the safe administration of medication.

A medication record must be completed with the following information:

- a) the name of the child
- b) the authorisation to administer medication (including self-administration, if applicable) signed by a parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication
- c) the name of the medication to be administered
- d) the time and date the medication was last administered
- e) the time and date or the circumstances under which the medication should be next administered
- f) the dosage of the medication to be administered
- g) the manner in which the medication is to be administered
- h) if the medication is administered to the child:
 - i) the dosage that was administered
 - ii) the manner in which the medication was administered
 - iii) the time and date the medication was administered
 - iv) the name and signature of the person who administered the medication
 - v) the name and signature of the person who checked the dosage, if another person is required under Regulation 95 to check the dosage and administration of the medication.

Services which provide education and care to a child over preschool age (as defined in the Education and Care Services National Regulations 2011) may allow a child over preschool age to self-administer medication. Where a service chooses to allow self-administration of medication, the Approved Provider must consider the risks associated with this practice and their duty of care, and develop appropriate guidelines to clearly specify the circumstances under which such permission would be granted and the procedures to be followed by staff at the service.

Definitions

Approved first aid qualification: The list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website: www.cecqa.gov.au

Illness: Any sickness and/or associated symptoms that affect the child's normal participation in the activities or program at the service.

Infectious disease: A disease that can be spread, for example, by air, water or interpersonal contact. An infectious disease is designated under Victorian Law or by a health authority (however described) as a disease that would require the infected person to be excluded from an education and care service.

Injury: Any harm or damage to a person.

Medication: Prescribed and non-prescribed medication as defined below.

Non-prescribed medication: Over-the-counter medication including vitamins and cultural herbs or homeopathic medications that may have been recommended by an alternative health care professional such as a naturopath.

Prescribed medication: Medicine, as defined in the Therapeutic Goods Act 1989 (Cth), that is:

- x authorised by a health care professional
- x dispensed by a health care professional with a printed label that includes the name of

Related Policies

- x Administration of First Aid Policy
- x Anaphylaxis Policy
- x Asthma Policy
- x Dealing with Infectious Diseases Policy
- x Dealing with Medical Conditions Policy
- x Enrolment and Orientation Policy
- x Excursions and Service Events Policy
- x Incident, Injury, Trauma and Illness Policy
- x Privacy and Confidentiality Policy

Procedure

The Approved Provider and Persons with Management and Control are Responsible for:

- x ensuring that medication is only administered to a child being educated and cared for by the service when it is authorised, except in the case of an anaphylaxis or asthma emergency (Regulations 93, 94)
- x ensuring that the medication is administered in accordance with Attachment 1 – Procedures for the safe administration of medication (Regulation 95)
- x ensuring that if a child over preschool age at the service is permitted to self-administer medication (Regulation 96), an authorisation for the child to self-administer medication is recorded in the medication record for the child
- x ensuring that a medication record that meets the requirements set out in Regulation 92(3) is available at all times for recording the administration of medication to children at the service (Regulation 92). (Refer to the template Medication Record: Error! Hyperlink reference not valid.www.acecqa.gov.au)
- x ensuring that parents/guardians are given written notice as soon as is practicable if medication has been administered in an emergency and where authorisation has been given verbally (Regulation 93(2))

- x communicating with parents/guardians about the procedures outlined in this policy and the parent/guardian responsibilities when requesting medication be administered to their child, and making the medication record available for parents/guardians to record information during operational hours
- x ensuring that all details in the medication record have been completed by parents/guardians/authorised persons in accordance with Regulation 92(3) prior to administering medication
- x obtaining verbal authorisation for the administration of medication from the child's parents/guardians/authorised person (as recorded in the child's enrolment record), or a registered medical practitioner or medical emergency services when an authorised person cannot reasonably be contacted in an emergency (Regulation (93)(5)(b))
- x ensuring that two staff members, one of whom must be an educator, are present when verbal permission to administer medication is received, and that details of this verbal authorisation are completed in the medication record
- x ensuring that verbal permission is followed up with a written authorisation as soon as is practicable
- x ensuring that parents/guardians take all medication home at the end of each session/day.

Parents and Guardians are Responsible for:

- x ensuring that any medication to be administered is recorded in the medication record kept at the service premises
- x providing a current medical management plan when their child requires long-term treatment of a condition that includes medication, or their child has been prescribed medication to be used for a diagnosed condition in an emergency
- x ensuring that prescribed medications to be administered at the service are provided in their original container with the label intact, bearing the child's name, dosage, instructions and the expiry date (Regulation 95(a)(i))
- x ensuring that medications to be administered at the service are within their expiry date
- x physically handing the medication to a staff member and informing them of the appropriate storage and administration instructions for the medication provided
- x clearly labelling non-prescription medications and over-the-counter products (for example sun block and nappy cream) with the child's name. The instructions and use-by dates must also be visible
- x ensuring that no medication or over-the-counter products are left in their child's bag or locker
- x taking all medication home at the end of each session/day
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- x has the child's name on it (if the medication was prescribed by a registered medical practitioner)
- x is the required dosage, as listed in the medication record
- x has not passed its expiry date.

4. Check that non-prescription medication:

- x is in the original container, bearing the original label and instructions
- x is the correct medication, as listed in the medication record
- x has the child's name on it
- x is the required dosage, as listed in the medication record
- x has not passed its expiry date.

5. When administering the medication, ensure that:

- x the identity of the child is confirmed and matched to the specific medication
- x the correct dosage is given
- x the medication is administered in accordance with the instructions attached to the medication, or any written or verbal instructions provided by a registered medical practitioner
- x both staff members complete the medication record (Regulation 92(3)(h)) and store any remaining medication appropriately, such as in the refrigerator if required
- x the Nominated Supervisor or Certified Supervisor informs the parent/guardian on arrival to collect the child that medication has been administered and ensures that the parent/guardian completes the required details in the medication record.

Administration of Medication

Where a child is diagnosed with a condition that requires ongoing medication or medication to be administered in emergencies, parents/guardians may authorise the administration of the medication for a defined period. In these cases:

- x a medical management plan completed by the child's doctor should be provided and attached to the child's enrolment form (and on display, where appropriate)
- x the medical management plan should define:
 - the name of the medication, dosage and frequency of administration
 - conditions under which medication should be administered
 - what actions, if any, should be taken following the administration of the medication
 - when the plan will be reviewed.
- x when medication is required under these circumstances, staff should:
 - follow the procedures listed above
 - ensure that the required details are completed in the medication record
 - notify the parents as soon as is practicable.

Refer to the Dealing with Medical Conditions Policy for further information.

Administration of paracetamol

There may be times when a child develops a fever while at the service. A high fever in a young child can be a sign of infection and must be investigated to find the cause. However, fever itself is not necessarily an indicator of serious illness. The normal temperature range for a child is up to 38°C. Fevers are common in children and if the child appears happy and well, there is no need to treat a fever, but it is important to watch the child for signs that the fever is a symptom of an illness that may worsen.

In the case of a high fever, parents/guardians will be notified and asked to collect the child as soon as possible to take the child to a doctor/hospital, or an ambulance will be called to the service. While the service is waiting for the child to be collected by the parent/guardian, staff will use measures, such as removing clothing and encouraging the intake of fluids, to keep the child cool, comfortable and well hydrated.

Paracetamol is not appropriate first aid or emergency treatment, and will be treated as any other medication, including requiring prior written and signed consent for its administration.

If parents/guardians request that educators/staff administer paracetamol, educators/staff should:

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