



Medication

Children's Services Policy No 2.1

Date issued: June 2007

Replaces issue/policy: Medication Policy

Date effective: June 2007

Date revised and updated: April 2009; January 2012; April 2015; and May 2019

Aim:

- To effectively manage the administration of medication for children with long-term health issues, acute illnesses, and during medical emergencies. Staff and parents/guardians will be aware of their individual responsibilities in relation to the administration of medication to children.

Background Information:

Children are often unwell and require medication during the recovery period of an illness. Within an education and care setting there are children who suffer from chronic conditions such as asthma, anaphylaxis, diabetes, allergies and epilepsy.

This policy relates to the guidelines for administration of medication to children by staff as required by the Education and Care Services National Regulations.

Relevant Legislation:

- Education and Care Services National Amendment Regulations (modified July 2018)
- Public Health Amendment (Review) Act 2017
- NSW Public Health Regulation 2012
- Work Health and Safety Act 2011
- Work Health and Safety Regulation 2011 (NSW)
- Children (Education and Care Services National Law Application) Act 2010
- NSW Public Health Act 2010

Resources:

- Staying Healthy: Preventing Infectious Disease in Early Childhood Education and Care Services, (5th Edition), National Health and Medical Research Council, 2013
- National Quality Standards – Quality Area 2 – Standard 2.1, Element 2.1.2, Element 2.1.3 and Standard 2.2, Element 2.2.2.

Note:

In this policy "staff" refers to staff employed by Willoughby City Council and Educators registered with Council's Family Day Care Scheme.

Practices:

Parents/guardians must ensure that their child, even if taking medication, is well enough to attend the service.

**** If at any time the service staff/educator believes that the child is too unwell to be at the service parents/guardians will be required to take the child home/collect their child from the service. The staff/educator will care for the child and monitor their wellbeing until the parent arrives.**

**** Please refer to Policy 2.7 – Infection Control for exclusion times during and after periods of illness.**

General:

Medication will only be administered to a child if the service has been provided with parental/carer permission on the signed medication form and/or doctors letter and under the following circumstances:

1. Staff at the service will only administer medications prescribed by a doctor, or as required by the Incident, Injury, Trauma, Illness and First Aid (including treatment of fever and minor ailments).
**** Please refer to Children’s Services Policy 2.2 – Incident, Injury, Trauma, Illness, Fever, Minor Ailments and First Aid.**
2. Over the counter medications – such as Panadol and cough medicine – will only be administered if accompanied by a doctor’s letter of authorisation stating:
 - the child’s name
 - the dosage required; and the time to be administered (except for Panadol for temperatures and pain relief as per Policy 2.2 – Incident, Injury, Trauma, Illness, Fever, Minor Ailments and First Aid).
3. Over the counter creams, such as ‘nappy rash’ creams can be administered without a doctor’s letter of authorisation and provided that the parent/guardian has given permission on the medication form or enrolment form.
4. A child is not to attend the service if:
 - Paracetamol or ibuprofen products have been administered on the day of attendance.

Prescription medication must:

- be given to staff on arrival;
- in the original packaging;
- clearly labelled, intact and legible;
- be in date;
- be current (or for long term medication supplied with a current doctors letter confirming dose and usage details); and
- have the correct child’s name on the prescription/label.

If the prescription label is damaged or illegible the medication **will not** be administered.

Medications are to be stored out of reach of children, and where possible in a locked medication cupboard, or in a locked box in the refrigerator. Medications must not be left in a child’s bag.

Long Term Medications or Emergency Medications:

Where a child is prescribed medication for a long period of time, the parents/guardians may be asked to provide a Doctor’s letter stating the reasons for the medication, the expected duration and any possible long term side effects of the medication.

**** Parents/guardians are still required to complete the Medication form to cover the period it is to be administered.**

Where a child may require medication in the event of the onset of a diagnosed illness, such as asthma or anaphylaxis, the parents/guardians/carers are required to complete an Action Plan with their Doctor, which the service will implement in the event of an emergency. This Action Plan should be reviewed and resubmitted every 12 months. Please refer to Policy 2.3 - Medical Conditions – Asthma, Anaphylaxis, Diabetes and other for further details.

Parental/Carer Responsibilities:

Where a child enrolled in the service requires medication a parent/guardian is required to complete a medication form for each day that the medication is required.

Parents/guardians/carers are required to provide the following information about the medication to be administered:

- the name of the child;
- the name and signature of the parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication;
- the name of the medication to be administered;
- the time and date the medication was last administered;
- the time and date, or the circumstances, under which the medication should be next administered;
- the dosage of the medication to be administered; and
- the manner in which the medication is to be administered.

If the medication has been administered to the child, staff are to note:

- the dosage that was administered;
- the manner in which the medication was administered;
- the time and date the medication was administered;
- the name and signature of the person who administered the medication; and
- the name and signature of the person who witnessed the administration of the medication (excluding Family Day Care Educators).

Parents/guardians/carers must inform a staff member/educator that they have completed the medication form and give the medication to a staff member/educator.

Staff/Educator Responsibilities:

Only permanent staff can administer medication to a child from its original packaging.

In OOSH Services casuals who regularly work at the service are permitted to administer medication **only** if a permanent staff member is not available.

In the case of prescription medication, this must only be administered to the child for whom it has been prescribed, from a container bearing the child's name and with a current use by date.

Staff/Educators are to ensure that the medication is stored in the medication cupboard or refrigerator as required.

The staff member who takes the medication from the parent/guardian is responsible for informing the other staff working with that child that the child will require medication during the day.

Administering Medication:

When administering medication to a child the staff are to:

- Check the details of the prescription, including name of medication, dose required, and expiry date of medication.
- Wash hands and wear gloves prior to administering medication.
- Child's first and last name against the signed medication form.
- Prepare the medication.
- Ensure that disposable syringes are to be used to administer the correct dosage of medicine.
- Check the dosage and have a second staff member to witness the medication being administered to the child.

- Two staff are to sign the medication record after it is administered.
- Parents/guardians are to sign the medication record on pick up times.

If medication is forgotten, or administered at a different time from the parents/guardians/carers instructions, this information **must** be noted on the medication record beside the parents/guardians/carers instructions. The parent/guardian should check the medication record when they collect their child.

Medication left at the centre without authorisation will only be administered with written/e-mailed authorisation.

Staff medications should be stored in a safe place, inaccessible to children and not in the playrooms.

Children with a contagious illness requiring medication will only be able to return to the service when a doctor's certificate states they are no longer contagious or the educator/staff member is satisfied that obvious symptoms are no longer evident, (e.g. chicken pox).

Emergency Situations:

Where emergency medication is required, staff are to follow the Action Plan for the child, including contacting emergency services.

Further information can be found in the Children's Services Policy 2.3 - Medical Conditions – Asthma, Anaphylaxis, Diabetes and Other.

Self-Administration of Medication - School Aged Services Only (OOSH):

A parent/guardian of a school aged child is able to give permission for children to self-administer medication. This approval will be sought on the medication form. Parents/guardians/carers should only give approval for this if they know that their child is able to successfully administer the medication, e.g. Ventolin.

Guidelines for Self Administration of Medication:

- Staff are required to check that the medication form has been completed and that the medication is as stated on the medication form.
- Staff are to check the dose prior to the child administering the medication
- Two staff are to at all times witness the self-administration of medication and to sign the form.
- Should staff feel that the child is not able to successfully administer the medication then they reserve the right to administer it on behalf of the child.



Child's Medication Record – Under School Age Services

Child's Name: _____

Date of Birth: _____

For Parents to Complete							For Staff to Complete						Parent				
Date	Name of Medication + Expiry Date		Date & Time of last dose		Dose to be given	Time to be administered (or Circumstance for it to be given next)	Method of administration e.g.; eye dropper, spacer, measuring device	Parents Authorisation Name & Signature							Name & Signature of staff who administered medication	Staff Witness Name & Signature	Parent Sign
	Name	Expiry	Date	Time					Name of medicine	Expiry Date	Dose given	Date	Time	Method			
								Name							Name	Name	
								Sign							Sign	Sign	
								Name							Name	Name	
								Sign							Sign	Sign	
								Name							Name	Name	
								Sign							Sign	Sign	
								Name							Name	Name	
								Sign							Sign	Sign	



Child's Medication Record – School Aged Services (single dose)

Child's Name: _____ Date of Birth: / / Date: _____

For Parents to Complete								
Name of Medication + Expiry Date		Date & Time of last dose		Dose to be given	Time to be administered (or Circumstance for it to be given next)	Method of administration eg; eye dropper, spacer, measuring device	Self administration allowed Yes or No	Parents Authorisation Name & Signature
Name	Expiry	Date	Time					
								Name
								Sign

For Staff to Complete							Parent	
						Name & Signature of staff who administered medication	Staff Witness Name & Signature	Parent Sign
Name of medicine	Expiry Date	Dose given	Date	Time	Method			
						Name	Name	
						Sign	Sign	