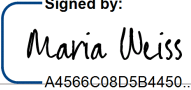


# Policy

## Early Years Policy - Administration of Medication

<b>Date of Adoption</b>	10 April 2013		
<b>Adoption Method</b>	<input type="checkbox"/> Council	<input type="checkbox"/> CEO	<input checked="" type="checkbox"/> Director Community
<b>Director Signature</b>	Signed by:  <small>A4566C08D5B4450...</small>		<b>Date</b> 06-09-2024
<b>Responsible Officer and Unit</b>	Samantha Waymouth, Coordinator Early Years Services		
<b>Nominated Review Period</b>	<input checked="" type="checkbox"/> Annually	<input type="checkbox"/> Every 4 years	<input type="checkbox"/> Other ( <i>please specify</i> )
<b>Last Endorsement Date</b>	October 2020		
<b>Next Endorsement Date</b>	September 2025		

Macedon Ranges Shire Council acknowledges the Dja Dja Wurrung, Taungurung and Wurundjeri Woi Wurrung Peoples as the Traditional Owners and Custodians of this land and waterways. Council recognises their living cultures and ongoing connection to Country and pays respect to their Elders past, present and emerging. Council also acknowledges local Aboriginal and/or Torres Strait Islander residents of Macedon Ranges for their ongoing contribution to the diverse culture of our community.

DOCUMENT HISTORY	Version	Date	Author
Initial Draft			
Second Draft			
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Approval			

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## Purpose/Objective

This policy defines the:

- responsibilities of staff and parents/guardians to ensure the safe administration of medication at Council's Early Years Services
- requirements for the secure storage of medication
- procedures to be followed when a child requires medication whilst attending a Council Early Years Service.

## Scope

This policy applies to the approved provider, staff, contractors, students on placement at kindergartens, volunteers, parents/guardians, children and others attending the programs and activities of Council's Early Years Services, including during offsite excursions and activities.

## Background/Reasons for Policy

### Authorisation to administer medication

Medication (including prescription, non-prescription, over-the-counter and homeopathic medications) must not be administered to a child at a service without the authorisation of a parent/guardian or person with the lawful authority to consent to the administration of medical attention to the child.

In the case of an anaphylaxis or asthma emergency, where the child does not have a medical management plan or other form of authorisation, first aid treatment is provided as described in the Early Years policies: Anaphylaxis and Allergic Reactions; and Asthma. In this circumstance, the child's parent/guardian and/or emergency services must be contacted as soon as possible after first aid has commenced (Regulation 94). In these instances, notifications of serious incidents (refer to Definitions) must be made to the regulatory authority (refer to Definition) as soon as is practicable, but not later than 24 hours after the occurrence (National Law: Section 174(2), Regulation 175, 176) (refer to Early Years Policy - Incident, Injury, Trauma and Illness).

In the case of all other emergencies, it is acceptable to obtain verbal consent from a parent/guardian, or to obtain consent from a registered medical practitioner or medical emergency services if the child's parent/guardian cannot be contacted.

### **Administration of medication**

The approved provider must ensure that when early childhood teachers/ educators are to administer medication, they follow the guidelines of this policy and the procedures outlined in Attachment 1.

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 and brand 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

## Gender Impact Assessment

In accordance with the Gender Equality Act 2020, a Gender Impact Assessment was not required in relation to the subject matter of this policy.

## Definitions

Term	Definition
Approved first aid qualification	A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the Australian Children's Education & Care Quality Authority (ACECQA) website: <a href="https://www.acecqa.gov.au/qualifications/nqf-approved">https://www.acecqa.gov.au/qualifications/nqf-approved</a>
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.
Prescribed medication	Medicine, as defined in the <i>Therapeutic Goods Act 1989</i> , that is: <ul style="list-style-type: none"> <li>authorised by a health care professional</li> <li>dispensed by a health care professional with a printed label that includes the name of the child being prescribed the medication, the medication dosage and expiry date.</li> </ul>

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.
Medication record	Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website: <a href="https://www.acecqa.gov.au/media/22731">https://www.acecqa.gov.au/media/22731</a>

## References

- > ACECQA Medication record template: <https://www.acecqa.gov.au/media/22731>
- > Guide to the Education and Care Services National Law 2010 and the Education and Care Services National Regulations 2011: <https://www.acecqa.gov.au/nqf/national-law-regulations>
- > Guide to the National Quality Standard: <https://www.acecqa.gov.au/nqf/national-quality-standard>
- > Allergy & Anaphylaxis Australia: <https://allergyfacts.org.au/>
- > Asthma Australia: [www.asthma.org.au](http://www.asthma.org.au)
- > Department of Health: <https://www.health.vic.gov.au/>
- > Healthdirect: <https://www.healthdirect.gov.au/>

## Related Policies

- > Early Years Policy – Acceptance and Refusal of Authorisation for a Child to Leave the Service
- > Early Years Policy - Dealing with Medical Conditions

- > Early Years Policy - Administration of First Aid
- > Early Years Policy - Excursions and Service Events
- > Early Years Policy - Incident, Injury, Trauma and Illness
- > Early Years Policy - Anaphylaxis and Allergic Reactions
- > Early Years Policy - Asthma
- > Early Years Policy - Diabetes
- > Early Years Policy – Epilepsy and Seizures
- > Early Years Enrolment and Fee Policy
- > Early Years Policy – Orientation and Settling In
- > Early Years Policy – Dealing with Infectious Diseases (including Child Immunisation)
- > Privacy Policy (Council)

## Related Legislation

- > *Education and Care Services National Law Act 2010*
- > *Education and Care Services National Regulations 2011*
  - *Specific Regulations: 92, 93, 94, 95, 96*
  - *Related Regulations: 90, 91, 160, 161, 162, 168, 177, 178, 181–184*
- > *Health (Infectious Diseases) Regulations 2001*
- > *Health Records Act 2001*
- > *National Quality Standard, Quality Area 2: Children’s Health and Safety*
  - *Standard 2.1: Each child’s health is promoted*
  - *Elements 2.1.1 and 2.1.4*

- > *Occupational Health and Safety Act 2004*
- > *Public Health and Wellbeing Act 2008 (Vic)*
- > *Public Health and Wellbeing Regulations 2009 (Vic)*
- > *Therapeutic Goods Act 1989 (Cth)*

## Policy

Mandatory – Quality Area 2

### Responsibilities

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
R indicates legislation requirement, and should not be deleted					
Ensuring that parents/guardians are provided with access to this policy	R	✓	✓		
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	R	✓	✓		



Responsibilities	Contractors, volunteers and students	Parents/guardians	Early childhood teacher, educators and all other staff	Nominated supervisor and persons in day-to-day charge	Approved provider and persons with management or control
Ensuring that all teachers and educators on duty have a current, approved first aid qualification, anaphylaxis management training and asthma management training (Regulation 136)				✓	R
Ensuring that all staff are familiar with the procedures for the administration of medication (refer to Attachment 1)			✓	✓	R
Ensuring that each child's enrolment form provides details of the name, address and telephone number of any person who is authorised to consent to medical treatment of, or to authorise administration of medication to the child (Regulation 160(3)(iv))			✓	✓	R

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
Ensuring that medication is only administered to a child being educated and cared when it is authorised (written or verbal), except in the case of an anaphylaxis or asthma emergency (Regulations 93, 94)	R	✓	✓		
Ensuring that a medication record (refer to References) meets the requirements set out in Regulation 92(3) and is always available for recording the administration of medication to children at the service	R	✓	✓		
Ensuring that all details in the medication record (refer to References) have been completed by parents/guardians/authorised persons in accordance with Regulation 92(3) prior to administering medication	R	✓	✓		
Ensuring that medication records are kept and stored securely until the end of three years after the last date on which the child was educated and cared for by the service (Regulation 183(2)(d))	R	✓	✓		

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
Ensuring that the medication is administered in accordance with Regulation 95, and 96 if relevant (refer to Attachment 1)	R	R	R		
Informing the early childhood teacher or educator if any medication has been administered to the child before bringing them to the service, and if the administration of that medication is relevant to or may affect the care provided to the child at the service				✓	
Physically handing the medication to a staff member and informing them of the appropriate storage and administration instructions for the medication provided				✓	
Ensuring that no medication or over-the-counter (refer to Definitions) products are left in their child's bag or locker				✓	
Ensuring that medication is not accessible to children and is stored in a childproof container (including in the refrigerator for medications requiring refrigeration)	R	✓	✓		✓

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
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))	R	✓	✓		
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))	R	✓	✓		
Ensuring that the parent/guardian of the child and emergency services are notified as soon as is practicable when medication has been administered in an anaphylaxis or asthma emergency (Regulation 94(2))	R	✓	✓		✓

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
Being aware of children who require medication for ongoing conditions or in emergencies, and ensuring that the medical management plans are completed and attached to the child's enrolment form (Regulation 162), and displayed for use by those caring for children (being sensitive to privacy requirements)	R	✓	✓		✓
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				✓	
Developing and reviewing procedures for the authorisation and administration of medication required for the treatment or management of long-term conditions (refer to Attachment 1)	✓	✓	✓		

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
Documenting situations in which an authorised person has provided verbal authorisation but has refused to confirm the authorisation in writing (these notes are to be kept with the child's enrolment record)	✓	✓	✓		
Informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect medication or incorrect dose, staff forgot to administer the medication or the medication was administered at the wrong time. Staff must also ensure that any medication that is accidentally dropped is not administered to a child or returned to the original container, and that parents/guardians are informed if an incident of this nature occurs	R	✓	✓		✓
Informing parents/guardians that non-prescribed medication (with the exception of sunscreen) will only be administered for a maximum of 48 hours, after which a medical management plan from a doctor will be required for its continued use	✓	✓	✓		

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
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		✓	✓		✓
Informing parents/guardians that paracetamol is not supplied by the service and that the administration of paracetamol will be in line with the administration of all other medication (refer to Attachment 2)	✓	✓	✓		
Ensuring medication is taken home at the end of each session/day. Unless the medication is stored at the service as part of the child's medical management plan (refer to Early Years Policy - Dealing with Medical Conditions)		✓	✓	✓	✓
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	R	✓	✓		

Responsibilities	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
Determining under what circumstances a child over preschool age will be allowed to self-administer their own medication and ensuring there are appropriate procedures in place for staff to follow in these instances (Regulation 96) (refer to Early Years Policy - Dealing with Medical Conditions)	R	✓			

## Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the approved provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify all stakeholders, including parents/guardians, at least 14 days before making any changes to this policy or its procedures unless a lesser period is necessary due to risk (Regulation 172 (2))

## Attachments



- Attachment 1: Procedures for Safe Administration of Medication (D23-74281)
- Attachment 2: Administration of Paracetamol (D23-74274)