



Medication Policy

Aim:

To ensure appropriate & safe administration of medication to children that attend our centre.

Legislative requirements / Sources:

Education and Care Services National Regulation 2011 (Regulation 92: Medication record; Regulation 93: Administration of medication; Regulation 94: Exception to authorisation requirement- anaphylaxis or asthma medication; Regulation 95: Procedure for administration of medication; Regulation 96: Self administration of medication)

Education and Care Services National Law Act 2010

Staying Healthy in Childcare 5th Edition

Implementation:

- Staff will administer prescription medication to children that attend our service if it has a prescription label with the child's name on it accompanied with a medication form completed by the child's parents/guardians.
- Upon enrolment parents/guardians are given the opportunity to sign the consent for Panadol to be administered to their child in the case of a high temperature (38.0c or higher). Permission will also be sought verbally via telephone if Panadol is to be administered. If a parent/guardian cannot be reached than permission from an emergency contact as listed on the child's enrolment form will be sought. If an emergency contact cannot be contacted, a medical practitioner or emergency service will be.
- Upon enrolment parents/guardians are given the opportunity to sign the consent for the administration of sunscreen, insect repellent, baby wipes, baby powder, nappy change creams and lotions that are supplied by the centre.

- All 'over the counter' medications such as: creams & gels, any eye, ear & nose drops, thumb sprays, eczema creams and sunscreen etc. WILL ONLY BE ADMINISTERED IF accompanied by a completed medication form by the parent/guardian of the child/ren and if it is to be administered for an extended period a letter needs to be signed by the parent/guardian stating this.
- Only permanent staff that have a current first aid certificate will be allowed to witness and administer medication.
- No medication will be administered by the staff without a MEDICATION FORM being completed by the parent or caregiver.
- ALL MEDICATION (including over the counter medicine prescribed by a doctor) must be in the original container and bear the original label detailing the child's name, the dosage & times to be given and expiry date.
- If this information is not contained on the medication bottle the medication WILL NOT BE ADMINISTERED by the staff.
- If a child is prescribed antibiotics they will be excluded from the centre until 24 hours has elapsed from their first dose. Children must be on antibiotics for a minimum of 24 hours before returning to day care. This is to ensure that your child is no longer contagious and that there are no adverse reactions to the medication.
- Long term medication (such as asthma puffers & Epi pens) will be regularly checked by the staff in each room to ensure the expiry date has not passed.

Asthma medication

- An asthma management plan is required for each child requiring asthma medication whilst at our service. This is to be completed by a medical practitioner and should include:
 - The date the action plan was created
 - The name & D.O.B of the child
 - The medication required
 - Amount of medication required
 - Signs and symptoms of a worsening condition
 - Instructions if symptoms worsen
 - Name and contact details of treating medical practitioner
 - Name and contact details of parent/guardian
 - Any triggers for their child's asthma
 - Signs and symptoms of asthma developing in their child
- This asthma management plan must be UPDATED EVERY 6 MONTHS by a medical practitioner
- A medication form must also be filled out by the parent/guardian giving permission for the administration of asthma medication.
- All asthma medication is to have a label with the child's name (this label can be from a pharmacist)

Anaphylaxis/Severe allergy Medication

- An anaphylaxis or severe allergy medication plan is required for each child requiring allergy or anaphylaxis medication. This is to be completed by a medical practitioner and detail:
 - The date action plan was created
 - The name and D.O.B of the child
 - The child's allergy
 - Signs and symptoms of a reaction
 - Action plan in the case of an allergy
 - Action plan in the case of worsening symptoms
 - Details and dosage of any medication
 - A photo of the child
 - The contact details of parents/guardians
 - The name and contact details of treating medical practitioner

Diabetes Medication

- A diabetes action plan is required for each child who has diabetes attending our service. This is to be completed by a medical practitioner and detail:
 - The date action plan was created
 - The name & D.O.B of the child
 - A photo of the child
 - Daily diabetes management
 - Any medication and dosage required
 - The child's signs and symptoms of hypoglycaemia and hyperglycaemia
 - Emergency diabetic action plan (hypoglycaemia and hyperglycaemia)
 - Contact details of parents/guardians
 - Name and contact details of treating medical practitioner

Exception to Authorisation Requirement

- Medication may be administered to a child in the case of an asthma or anaphylaxis emergency. The parent/guardian of the child and emergency services will be notified of this as soon as practicable
- A medication form will be filled out by staff and the child's parent/guardian will be asked to sign it as soon as practicable

Category 2 Medical Procedures

These are procedures that parents, caregivers & staff are able to perform after having received the appropriate training. These procedures can include but aren't limited to: Changing of a colostomy bag, cleaning of a colostomy tube & emergency injection of EpiPen.

Appropriate training for staff means:

- The staff member holds a current First Aid certificate
- The staff member has received the appropriate training from a qualified health professional that pertains to the child's individual medical condition or medication requirements.

Review:

This policy is the intellectual property of Maryland Care & Early Education Centre and is created with the consultation of staff and families attending the service.

This policy is available in other languages upon request

Reviewed: November 2016

Next Review: November 2018