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| Melton logo colour - low res | **Administration of Medication Policy** |
| **Version No.** | Version 3.0 November 2021 (approved) |
| **Authorisation** | General Manager Community Services |
| **Expiry Date** | Policy to be reviewed by 1 December 2024  |
| **Responsible Officer** | Manager Families and Children |
| **Policy Owner** | Early Childhood Coordinator |

# Purpose

Melton City Council is committed to ensuring safe administration of Medication to children accessing Melton City Council Early Childhood services.

# This policy has been adapted from *PolicyWorks* Manual - National Quality Framework released by the Early Learning Association Australia.

# Scope

This policy applies to services responsible for the direct education and care of children covering the administration of both Prescribed and Non-Prescribed Medication at Melton City Council programs including offsite excursions and activities. This policy applies to the Approved Provider, Persons with Management or Control, Nominated Supervisor, Persons in day-to-day Charge, , educators, staff, students on placement, volunteers, parents/guardians, children and others attending Melton City Council programs and activities.

# Background

Medication (including prescription, non-prescription, over-the-counter and homeopathic Medications, self-administered medications) must not be present and/or 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 emergency, 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.

In the case of an Anaphylaxis or Asthma emergency, Medication may be administered to a child without authorisation following the direction of the child’s Medical Management Plan. In this circumstance, the child’s parent/guardian and/or emergency services must be contacted as soon as possible after the event (National Regulations 94).

When educators are required to administer Medication, they must abide by specific regulatory requirements, such as obtaining written consent, and 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 include the following information:

* the name of the child
* the authorisation to administer Medication (including self-administration, if applicable) signed by a parent/guardian or a person named in the child's enrolment form 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
* the manner in which the Medication is to be administered.

# If the Medication is administered to the child:

* 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
* the name and signature of the person who witnessed and checked the dosage, if another person is required under National Regulations 95 to check the dosage and administration of the Medication.

# The Vacation Care and Family Day Care Service provides education and care to children over preschool age (as defined in National Regulations 2011) and may allow these children to self-administer Medication.

# Where the service chooses to allow self-administration of Medication, the Approved Provider will consider the risks associated with this practice, their Duty of Care and have developed appropriate guidelines below to clearly specify the circumstances under which such permission would be granted and also within the procedures to be followed by staff at the service.

# Children over school age will only be permitted to self-administer Medication if the parent/guardian has given written authority to the service, and the parent confirms the child is capable and willing.

# Definitions

The terms defined in this section relate specifically to this policy and related procedures. For commonly used terms e.g. Approved Provider, Regulatory Authority etc. refer to the *Glossary of Terms*.

| **Word/Term** | **Definition** |
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| **Approved First Aid, Anaphylaxis Management and Emergency Asthma Management 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. |
| **Duty Of Care** | A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonably foreseeable risk of injury. |
| **Illness** | Any sickness and/or associated symptoms that affect the child’s usual behaviors and/or participation in the activities at the service. |
| **Infectious Disease** | A disease that can be spread, for example, by air, water or interpersonal contact. An Infectious Disease 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. |
| **Medical Management Plan** | A document that has been provided by the parent to the service, prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child’s specific medical condition, required medication and includes the child’s name and a photograph of the child. An example of an Action Plan can be found on the Australasian Society of Clinical Immunology and Allergy (ASCIA) website (refer to *Sources*). |
| **Medication** | **Prescribed**Medicine, as defined in the *Therapeutic Goods Act* 1989 (Cth), that is:* authorised by a health care professional
* 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.

**Non-Prescribed**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 self-administered or 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 another person is required to check the dosage and administration of the Medication (National Regulations 95c).A sample *Medication Record* is available on the ACECQA website. |

# Policy

Melton City Council Families and Children Services is committed to:

* providing a safe and healthy environment for all children, educators, staff and other persons attending the service
* responding immediately to the needs of a child who is ill or becomes ill while attending the service
* ensuring safe and appropriate administration of Medication in accordance with legislative and regulatory requirements.

# Responsibility/Accountability

# The Approved Provider, according to Regulations is responsible for the implementation of this policy. This will be achieved through the Leadership Group and their service staff:

* Medication is not administered to a child being educated and cared for by the service unless it is authorised, and the Medication is administered in accordance with the procedures prescribed in National Regulations 95
* If a child over preschool age at the service is permitted to self-administer Medication (National Regulations 96), an authorisation for the child to self-administer Medication is recorded on the Medication Record for the child
* Medication Records meet the requirements set out in National Regulations 92 is available at all times for recording the administration of Medication to children at the service.
* Parents/guardians are given written notice as soon as is practicable if Medication has been administered in an emergency or where authorisation has been given verbally (National Regulations 93)
* 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 (National Regulations 94)
* At least one educator in services under the National Regulations holds a current Approved First Aid qualification, is trained in Anaphylaxis Management and Emergency Asthma Management (refer to *Definitions*) and is in attendance and immediately available at all times that children are being educated and cared for by the service (National Regulations 136).
* developing and reviewing procedures for the authorisation and administration of Medication required for the treatment or management of long-term conditions ensuring that all educators are familiar with the procedures for the administration of Medication
* 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 (National Regulations 183)
* 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 (National Regulations 96).

# The Nominated Supervisor/ Person in day to day charge is responsible for:

* ensuring that Medication is only given to, or been self-administered by, a child where authorisation has been provided and Medication is administered in accordance with legislation and this policy (National Regulations 93)
* 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 (National Regulations 94)
* ensuring that Medication is not accessible to children and is stored in an individually labeled container with the child’s name (including in the refrigerator for Medications requiring refrigeration)
* being aware of children who require Medication for ongoing conditions or in emergencies
* ensuring that the Medical Management Plans are completed and attached to the child’s enrolment form or stored on the software system e.g. QikKids, Harmony.
* A copy of the child’s Medical Management Plan must be displayed, easily accessible and considering the child’s privacy.
* Documenting emergency 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 form or stored on the software system)

# Responsible Person’s, educators, staff, are responsible for:

* ensuring that each child’s enrolment form provides details of the name, address and telephone number of any person who has Lawful Authority to request and permit the administration of Medication to the child (National Regulations 160)
* administering Medication in accordance with National Regulations 95 and the guidelines set out in this policy.
* Staff must also ensure that any Medication that is accidentally dropped causing damage to the container, impacted the effectiveness/hygiene of medication in any way or spilt, is not administered to a child, returned to the original container, and that parents/guardians and the person in charge are informed if an incident of this nature occurred as soon as practical
* communicating with parents/guardians about the procedures outlined in this policy and the parent/guardian responsibilities, when requesting Medication to be administered to their child,
* making the Medication Record available for parents/guardians to record information, ensuring that all details in the Medication Record have been completed by parents/guardians/authorised persons in accordance with National Regulations 92 prior to administering Medication
* obtaining verbal authorisation for the administration of Medication from the child’s parents/guardians/authorised person (as recorded in the child’s enrolment form), or a registered medical practitioner or medical emergency services when an authorised person cannot reasonably be contacted in an emergency (National Regulations 93)
* ensuring that two staff members / educators (or as per Regulations), are present when verbal permission to administer Medication is received, and that details of this verbal authorisation are completed in the Medication Record
* ensuring that verbal permission is followed up with parents/guardian written authorisation as soon as is practicable
* informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect Medication or incorrect dose as prescribed in the Medication Record, staff forgot to administer the Medication or the Medication was administered at the wrong time, or refusal by the child to self-administer.
* 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 and a Communication and Risk Minimisation Plan will be required for its continued use
* informing parents/guardians that Paracetamol is not supplied by Melton City Council and that the administration of Paracetamol will be in line with the administration of all other Medication.
* ensuring that parents/guardians take all Medication home at the end of each session/day and sign the medication out as ‘collected’ on the Medication Record.

# Parents/guardians are responsible for:

* ensuring that any Medication to be administered is recorded in the Medication Record kept at the service premises
* ensuring the Medication Record is completed fully and each time the medication is handed over to staff
* providing a current Medical Management Plan when their child requires long-term treatment of a condition (more than 48 hours) that includes Medication, or their child has been prescribed Medication to be used for a diagnosed condition in an emergency
* ensuring that the details of authorised persons are kept up to date.
* ensuring that their child’s enrolment details are up to date, including providing current details of persons who have Lawful Authority to request or permit the administration of Medication.
* 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 (National Regulations 95)
* ensuring that prescribed Medications to be administered at the service are within their expiry date
* physically handing the Medication to a staff member and informing them of the appropriate storage and administration instructions for the Medication provided
* clearly explaining to staff in the circumstance where a child is to self-administer medication, the authorised child is over preschool age, capable and willing to do so and will follow all instructions authorised in the medical record and any verbal support from staff in relation to self-administration
* clearly labeling non-prescription Medications and over-the-counter products (for example sun block and nappy cream) with the child’s name and instructions and ensuring expiry dates are visible
* ensuring that no Medication or over-the-counter products are left in their child’s bag or locker
* taking all Medication home at the end of each session/day
* informing the service 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

# Volunteers and students, while at the service, are responsible for following this policy and its procedures.

# References, Sources, Links to Legislation and Other Documents

# Related service policies:

# *Administration of First Aid Policy*

# *Anaphylaxis Policy*

# *Asthma Policy*

* + MCC Child Safe Policy, Procedure and Code of Conduct

# *Dealing with Infectious Diseases Policy*

# *Dealing with Medical Conditions Policy*

# *Enrolment and Orientation Policy*

# *Excursions and Service Events Policy*

# *Incident, Injury, Trauma and Illness Policy*

# *Privacy and Confidentiality Policy*.

# Attachments

# 8.1 Refer to Administration of Medication Procedure

8.2 Medication Record