

# BEACONSFIELD KINDERGARTEN INC.

## ADMINISTRATION OF MEDICATION POLICY

Best Practice – Quality Area 2

### PURPOSE

This policy will clearly define the:

- procedures to be followed when a child requires medication while attending Beaconsfield Kindergarten
- storage of medication
- responsibilities of the Nominated Supervisor, Early Childhood Teacher, educators, staff, parents/guardians and the Approved Provider to ensure the safe administration of medication at Beaconsfield Kindergarten.

### POLICY STATEMENT

#### VALUES

Beaconsfield Kindergarten Inc. is committed to:

- providing a safe and healthy environment for all children, educators, staff and other persons attending the service
- responding appropriately 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
- protecting children’s privacy and ensuring confidentiality
- maintaining a duty of care to the children at the service.

#### SCOPE

This policy covers the administration of both prescribed and non-prescribed medication at Beaconsfield Kindergarten, including during offsite excursions and activities.

This policy applies to the Approved Provider, Persons with Management or Control, Nominated Supervisors, Persons in day-to-day Charge, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Beaconsfield Kindergarten Inc.

### RESPONSIBILITIES

<b>RESPONSIBILITIES</b>	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	<b>R</b>	√	√		
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	<b>R</b>	√	√		
Ensuring that at least one educator on duty has a current approved first aid qualification, anaphylaxis management training and asthma management training ( <i>Regulation 136</i> ). As a demonstration of duty of care and best practice, Beaconsfield Kindergarten requires that all educators have current approved first aid qualifications, anaphylaxis management training and asthma management training.	<b>R</b>	√			
Ensuring that all staff are familiar with the procedures for the administration of medication ( <i>refer to Attachment 1</i> )	<b>R</b>	√	√		
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 ( <i>Regulation 160(3)(iv)</i> )	<b>R</b>	√	√		
Ensuring that medication is only administered to a child being educated and cared for by Beaconsfield Kindergarten when it is authorised (written or verbal), except in the case of an anaphylaxis or asthma emergency ( <i>Regulations 93, 94</i> )	<b>R</b>	√	√		
Ensuring that a medication record ( <i>refer to Sources</i> ) meets the requirements set out in <i>Regulation 92(3)</i> and is always available for recording the administration of medication to children at the service	<b>R</b>	√	√		
Ensuring that all details in the medication record ( <i>refer to Sources</i> ) have been completed by parents/guardians/authorised persons in accordance with <i>Regulation 92(3)</i> prior to administering medication	<b>R</b>	√	√		
Ensuring that medication records are kept and stored securely until the end of 3 years after the last date on which the child was educated and cared for by the service ( <i>Regulation 183(2)(d)</i> )	<b>R</b>	√	√		
Ensuring that the medication is administered in accordance with <i>Regulation 95, and 96</i> if relevant ( <i>refer to Attachment 1</i> )	<b>R</b>	<b>R</b>	<b>R</b>		
Informing the ECT 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				√	
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 ( <i>Regulation 95(a)(i)</i> )	<b>R</b>	<b>R</b>	<b>R</b>	√	
Ensuring that 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				√	
Ensuring that no medication or over-the-counter ( <i>refer to Definitions</i> ) 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	√	√		√
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 ( <i>Regulation (93)(5)(b)</i> )	R	√	√		
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			√		
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 ( <i>Regulation 93(2)</i> )	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 ( <i>Regulation 94(2)</i> )	R	√	√		
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 ( <i>Regulation 162</i> ), and available 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 ( <i>refer to Attachment 1</i> )	√	√	√		
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	√	√	√		
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 Beaconsfield Kindergarten and that the administration of paracetamol will be in line with the administration of all other medication.	√	√	√		
Ensuring medication is taken home at the end of each session/day or the medication is stored in the designated area in the kitchen or Allergy Buddy as per the child's medical management plan ( <i>refer to Dealing with Medical Conditions Policy</i> )		√	√	√	√
Ensuring that if a child over preschool age at the service is permitted to self-administer medication ( <i>Regulation 96</i> ), an authorisation for the child to self-administer medication is recorded in the medication record for the child	R	√	√		

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## PROCEDURES

- Procedures for the safe administration of medication - *refer to Attachment 1*
  - Procedures for signing in medication – *refer to Attachment 2*
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## BACKGROUND AND LEGISLATION

### 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 *Anaphylaxis and Allergic Reactions Policy* and *Asthma Policy*. In this circumstance, the child's parent/guardian and emergency services must be contacted as soon as possible after first aid has commenced (Regulation 94). In these instances, notification of a serious incident (*refer to Definitions*) must be made to the regulatory authority (DE) as soon as is practicable but not later than 24 hours after the occurrence (National Law: Section 174(2), Regulation 175, 176) (*refer to Incident, Injury, Trauma and Illness Policy*).

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 staff administer medication, they must follow the guidelines of this policy and the procedures outlined in Attachment 2 – Procedures for the safe administration of medication.

A medication record<sup>1</sup> 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.

## Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
  - *Education and Care Services National Regulations 2011*
  - *Health Records Act 2001*
  - *National Quality Standard, Quality Area 2: Children's Health and Safety*
  - *Occupational Health and Safety Act 2004*
  - *Public Health and Wellbeing Act 2008*
  - *Public Health and Wellbeing Regulations 2009*
  - *Therapeutic Goods Act 1989 (Cth)*
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## 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.acecqa.gov.au](http://www.acecqa.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.

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<sup>1</sup> A template of a medication record can be downloaded from: [www.acecqa.gov.au](http://www.acecqa.gov.au)

**Injury:** Any harm or damage to a person.

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

**Non-prescribed/over-the-counter medication:** Refers to medicine that you can buy without a prescription, 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:

- 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.
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## SOURCES AND RELATED POLICIES

### Sources

- Australian Children's Education and Care Quality Authority (ACECQA), Medication Record sample template: <https://www.acecqa.gov.au/resources/applications/sample-forms-and-templates>
- Allergy & Anaphylaxis Australia: [www.allergyfacts.org.au](http://www.allergyfacts.org.au)
- Asthma Australia: [www.asthma.org.au](http://www.asthma.org.au)
- Department of Health: [www2.health.vic.gov.au](http://www2.health.vic.gov.au)
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011* [www.acecqa.gov.au](http://www.acecqa.gov.au)
- *Guide to the National Quality Standard* (ACECQA) [www.acecqa.gov.au](http://www.acecqa.gov.au)
- Healthdirect: [www.healthdirect.gov.au](http://www.healthdirect.gov.au)

### Related policies

- *Acceptance and Refusal of Authorisations Policy*
  - *Administration of First Aid Policy*
  - *Anaphylaxis and Allergic Reactions Policy*
  - *Asthma Policy*
  - *Dealing with Infectious Diseases Policy*
  - *Dealing with Medical Conditions Policy*
  - *Diabetes Policy*
  - *Enrolment and Orientation Policy*
  - *Epilepsy and Seizures Policy*
  - *Excursions and Service Events Policy*
  - *Incident, Injury, Trauma and Illness Policy*
  - *Privacy and Confidentiality Policy*
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## 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 affected by this policy 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 the safe administration of medication
- Attachment 2: Procedures for signing in medication

## **AUTHORISATION**

This policy was adopted by the Approved Provider of Beaconsfield Kindergarten Inc. on 17<sup>th</sup> March 2014.

**REVIEW DATE:** 17-/06/2024

**REVIEW FREQUENCY:** Two-yearly

**NEXT REVIEW DUE:** June 2026

## ATTACHMENT 1

### Procedures for the safe administration of medication

Medication can **only** be administered:

- if it has been prescribed by a registered medical practitioner, from its original container with the original label including the name of the child for whom it is prescribed, before the expiry or use-by date, or
- from its original container, with the original label and instructions and before the expiry or use-by date, and in accordance with any instructions attached to the medication or provided by a registered medical practitioner, either verbally or in writing.

Two staff, one of whom must be an educator, are responsible for the administration of any medication<sup>2</sup>. At Beaconsfield Kindergarten, one of these people should be the ECT. At least one of these persons must hold a current approved first aid qualification.

One person will check the details (including dosage and the identity of the child who is given the medication) and witness its administration, while the other person will administer the medication (Regulation 95(c)).

Before administering any medication to a child, it is extremely important for staff to check if the child has any allergies to the medication being administered.

#### Procedure for administration of medication

1. Wash and dry hands thoroughly before administering any medication. If appropriate, gloves are recommended wherever possible.
2. Check the medication record to confirm date, time, dosage and the child to whom the medication is to be administered.
3. Check that *prescription medication*:
  - is in its original container, bearing the original label and instructions
  - is the correct medication, as listed in the medication record
  - has the child's name on it (if the medication was prescribed by a registered medical practitioner)
  - is the required dosage, as listed in the medication record
  - has not passed its expiry date.
4. Check that *non-prescription medication*:
  - is in the original container, bearing the original label and instructions
  - is the correct medication, as listed in the medication record
  - has the child's name on it
  - is the required dosage, as listed in the medication record
  - has not passed its expiry date.
5. When administering the medication, ensure that:
  - the identity of the child is confirmed and matched to the specific medication
  - the correct dosage is given
  - 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
  - both staff members complete the medication record (Regulation 92(3)(h)) and store any remaining medication appropriately, such as in the refrigerator if required

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<sup>2</sup> Note: under Regulation 95(c), this is not a requirement in an education and care service that is permitted to have only one educator to educate and care for children.



- one person will check the details (including dosage and the identity of the child who is given the medication) and witness its administration, while the other person will administer the medication and monitor the effect of the medication (*Regulation 95(c)*)
- inform the parent/guardian on arrival to collect the child that medication has been administered and ensure that the parent/guardian completes the required details in the medication record.

### **Administration of medication for ongoing medical conditions**

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:

- a medical management plan completed by the child's doctor should be provided and attached to the child's enrolment form (and in the Allergy Buddy)
- 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.
- a medication record should be started, noting the information from the medical management plan, and attached to the child's enrolment form
- when medication is required under these circumstances, educators/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.

## ATTACHMENT 2

### Procedures for signing in medication

Any child who has medication stored at the service must have a medication record completed and stored with their enrolment record. This applies to asthma, allergy and anaphylaxis medications as well as temporary medications that might need to be administered.

Upon receipt of the medication, the medication record must be completed and stored with the child's enrolment record.

\*Steps 1–4 and 6–8 relate to children with allergies, anaphylaxis and asthma. For short-term medications, refer only to Step 5.

1. Ensure that the family provides an up to date medical management plan that has been signed by a doctor.
2. If this medical management plan is not on Beaconsfield Kindergarten's preferred template, transfer the information to the template and keep with the plan signed by the doctor.
3. Email copies of relevant service policies to the family. Ask the family to reply to your email indicating that they have read the policies. File a copy of this email with the enrolment form.
  - Asthma: *Asthma Policy, Dealing with Medical Conditions Policy*
  - Allergy: *Dealing with Medical Conditions Policy*
  - Anaphylaxis: *Anaphylaxis Policy, Dealing with Medical Conditions Policy*
  - Dietary intolerance: *Nutrition, Active Play & Oral Health Policy*
  - Other Medical Condition: *Dealing with Medical Conditions Policy, Diabetes/Epilepsy Policy* as appropriate
4. Complete a Risk Minimisation Plan for the child. ECT completes the form, including the date that relevant policies were emailed to the family and the date that the medical condition and risk minimisation strategies were discussed with co-educators.
5. When the child's medication is brought in to the service, start a medication record (Bellbird form) for the child, completing relevant details as per the child's medical plan. The medication record should be filed with the child's enrolment form.
6. Medication and a copy of the medical management plan should be stored in the Allergy Buddy.
7. **Each term**, discuss the child's medical plan and risk minimisation plan with educators and the child's family. Sign and date when this is completed, and record any relevant notes on the child's enrolment form.
8. **Each term**, medication should be checked and signed in again.