# Administration of Medication Policy

In supporting the health and wellbeing of our children, the use of medications may be required for children whilst attending care. Any medication must be administered as prescribed by medical practitioners and first aid guidelines followed to ensure the health, safety and wellbeing of the child.

**National Quality Standard (NQS):**

| Quality Area 2: Children's Health and Safety | | |
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| **2.1.1** | Wellbeing and comfort | Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation. |
| **2.1.2** | Health practices and procedures | Effective illness and injury management and hygiene practices are promoted and implemented. |
| **2.2** | Safety | Each child is protected. |
| **2.2.1** | Supervision | At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard. |
| **2.2.2** | Incident and emergency management | Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented. |

**Education and Care Services National Law and Regulations:**

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| S.2A | Paramount consideration – safety, rights and best interests of children |
| S.166 A | Offence relating to inappropriate conduct |
| S.167 | Offence relating to protection of children from harm and hazards |
| 12 | Meaning of serious incident |
| 85 | Incident, injury, trauma and illness policy |
| 86 | Notification to parent of incident, injury, trauma or illness |
| **90** | Medical conditions policy |
| **90 (1) (a)** | The management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis |
| **91** | Medical conditions policy to be provided to parents |
| **92** | Medication record |
| **93** | Administration of medication |

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| **94** | Exception to authorisation requirement - anaphylaxis or asthma emergency |
| **95** | Procedure for administration of medication |
| **136** | First Aid qualifications |
| **162 (c)(d)** | Health information to be kept in enrolment record |
| **168** | Education and care service must have policies and procedures |
| **170** | Policies and procedures are to be followed |
| **175** | Prescribed information to be notified to Regulatory Authority |
| **176** | Time to notify certain information to Regulatory Authority |
| **183** | Storage of records and other documents |

**Purpose:**

To ensure all educators at Birra-Li understand their legal obligations, responsibilities and duty of care to meet each child's individual health care needs. All educators are informed of children diagnosed with a medical condition and strategies to support their individual needs. All qualified educators are specifically trained to safely administer children's required medication with the written consent of the child's parent or guardian. Educators will follow relevant procedures to promote the health and wellbeing of each child enrolled at Birra-Li.

**Scope:**

This policy applies to educators, families, staff, management, the Nominated Supervisor, volunteers and visitors of Birra-Li.

**Implementation:**

Families requesting the administration of medication to their child will be required to follow the guidelines developed by Birra-Li to ensure the safety of children and educators. Birra-Li will follow legislative guidelines and adhere to the Education and Care Services National Regulation to ensure the health of children, families, and educators at all times.

For children with a diagnosed health care need, allergy or relevant medical condition, a Medical Management Plan must be provided prior to enrolment and updated on an annual basis or if any changes are made to the management plan. A Risk Minimisation Plan must be developed in

consultation with parents/guardians to ensure strategies are developed to minimise any risk to the child.

**General considerations:**

A parent or guardian must have administered or applied the initial dose of any medication to the child before Birra-Li can administer it.

This excludes emergency situations e.g., EpiPens and Ventolin.

- Parents/guardians are asked to consider whether their child that requires medication is well enough to be at the centre, and to keep them home if they are unwell.
- If children are receiving medication at home but not at the centre, the centre should be advised of the nature of the medication, its purpose and any possible side effects it may have.
- Children with allergies are required to have their doctor complete an ASCIA Action Plan or Medical Management Plan which explains what the child's reaction is likely to be, and what action/s educators should take if an allergic reaction occurs.

A Doctor's Clearance Certificate stating that the child is "fit for child care" and will not jeopardise the health of other children or staff, or a Medical Care Plan, will need to be provided in the following situations.

- If a child requires more than one medication.
- When a child is on regular medication for a chronic condition.
- If a child requires over the counter medication.

***Medication will NOT be put into a baby's bottle or drinking cup at any time.***

**The Nominated Supervisor and management will ensure:**

- Obligations under the Education and Care Services National Law and Regulations are met.
- Children with specific health care needs or medical conditions have a current Medical Management Plan detailing prescribed medication and dosage by their medical practitioner.
- Medication may only be administered with written authorisation signed by the child's parent or by a responsible person listed on the child's enrolment record who has been authorised by the parent to make decisions about medication administration.
- Medication provided by the child's parents must adhere to the following guidelines:

- The administration of medication is authorised by a parent/guardian in writing.
- Medication is prescribed by a registered medical practitioner (with instructions either attached to the medication or in written form from the medical practitioner).
- Medication needs to be in the original container/packaging.
- Medication has the original label clearly showing the name of the child.
- Medication is before the expiry/use by date.

- A Medication Record is completed for each child attending Birra-Li who requires medication including:
- Name of medication.
- Time and date medication was last administrated.
- Time and date medication is to be administrated (or circumstances to be administered).
- Dosage of medication.
- Method of administration.
- Parent/guardian name and signature.

- A separate form must be completed for each medication if more than one is required.
- Any person delivering a child to Birra-Li does not leave medications in the child's bag. Medication must be given directly to an educator for appropriate storage upon arrival.
- If a child becomes unwell or is injured while in care and a parent or authorised emergency contact provides verbal authorisation over the phone for Panadol to be administered:
- The authorisation must be documented.
- Verbal and written notification must be provided to the person collecting the child.
- The person collecting the child must sign to acknowledge they have been informed.
- The parent must sign the medication record and any related documentation at the earliest opportunity.

- If medication is administered without authorisation in the event of an allergy, asthma or anaphylaxis emergency, the parent/guardian of the child and emergency services are notified as soon as practicable. (The only medication that will be administered in the case of an emergency will be, EpiPen devices and Ventolin).

- Educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical conditions as detailed in *Medical Management Plans, Asthma* or *Anaphylaxis Action Plans*.
- Medication records are kept in a secure and confidential manner and archived for the regulatory prescribed length of time.
- Written consent is requested from families on the enrolment form to administer emergency asthma, anaphylaxis, or other emergency medication or treatment if required.
- A review of practices is conducted following an incident involving incorrect administration of medication or failure to follow proper medication procedures, including an assessment of areas for improvement.
- That every attempt to contact parents them for verbal permission will be made by educators prior to administering any form of emergency medications.
- Families are informed of medical and medication policies through emails, newsletters and access to policies and procedures upon request at any time.
- Safe practices are adhered to for the wellbeing of both the child and educators at all times.
- The regulatory authority is notified within 24 hours if a child is involved in a serious incident at the Service.

**Educators will:**

- Not administer any medication without the authorisation of a parent or person with authority, except in the case of an emergency, when the verbal consent from an authorised person, a registered medical practitioner or medical emergency services will be acceptable if the parents cannot be contacted.
- Ensure that medications are stored in the refrigerator in a sealed and labelled medication container, inaccessible to children. For medications not requiring refrigeration, they will be stored in the first aid cabinets located in each room, inaccessible to children.
- Ensure adrenaline devices and asthma medication are kept out of reach of children and stored in a cool dark place at room temperature. They must be readily available when required and not locked in a cupboard. A copy of the child's medical management plan will be stored near the adrenaline devices or asthma medication.

- Ensure that two qualified educators administer and witness medications at all times. All educators have approved First Aid qualifications in accordance with current legislation and regulations. Both educators are responsible for:
- Checking the *Administration of Medication Record* is completed by the parent/guardian.
- Checking the prescription label for:
    - The child's name.
    - The dosage of medication to be administered.
    - The method of dosage/administration.
    - The expiry or use-by date.
    - Confirming that the correct child is receiving the medication.
    - Signing and dating the *Administration of Medication Record*.
    - Returning the medication back to the sealed medical container.
- Follow hand-washing procedures before and after administering medication.
- Discuss any concerns or doubts about the safety of administering medications with the Nominated Supervisor to ensure the safety of the child. (Checking if the child has any allergies to the medication being administered).
- Seek further information from the family, the prescribing doctor, or the Public Health Unit before administering medication if required.
- Ensure that the instructions on the *Administration of Medication Record* are consistent with the doctor's instructions and the prescription label.
- Ensure if there are inconsistencies, medication is not to be administered to the child.
- Ensure that the *Administration of Medication Record* is completed and stored correctly including name and signature of witness, time and date of administration.
- Ensure that if after several attempts of encouraging the child to take medication, but they still refuse, parent or guardians are contacted. Educators will not use restrictive practices to make a child take medication unless the medication is required for emergency treatment.
- Observe the child post administration of medication to ensure there are no side effects.
- Respond immediately and contact the parent/guardian for further advice if there are any unusual side effects from the medication.

- Contact emergency services on **000** immediately if a child is not breathing, is having difficulty breathing, or shows signs of unusual side effects requiring immediate attention following administration of any medication.

**Families will:**

- Provide management with accurate information about their child's health needs, medical conditions and medication requirements on the enrolment form.
- Provide Birra-Li with a *Medical Management Plan* for their child prior to enrolment if required.
- Develop a *Risk Minimisation Plan* for their child in collaboration with management, educators and the child's medical practitioner for long-term medication plans.
- Notify educators when children are taking any short-term medications at home.
- Complete and sign an *Administration of Medication Record* for their child requiring any medication to be administered by educators whilst they are at the Service.
- Update *Medical Management Plans* annually or as the child's medication needs change.
- Keep prescribed medications in original containers with pharmacy labels.
- Adhere to our *Incident, Injury, Trauma and Illness* and *Dealing with* I*nfectious Disease Policies*.
- Keep children at home while any symptoms of an illness remain.
- NOT leave any medication in children's bags.
- Give any medication for their children to an educator who will provide the family with an *Administration of Medication Record* to complete.
- Provide any non-prescription medications with a letter from the doctor detailing the child's name and dosage, or be at the discretion of the Nominated Supervisor.

Please understand that no medication will be administered without written consent from a parent or authorised person unless in the case of an emergency. Medication will only be administered as directed by the medical practitioner and only to the child whom the medication has been prescribed for. Expired medications will not be administered.

**Applications of ointments or creams:**

- Birra-Li provides a SPF 50+ sun screen, nappy rash cream etc., to offer protection from the sun, or to soothe nappy rash.

- Families are to give permission for the application of the above creams upon enrollment.
- When choosing ointments, creams and applications for use at the centre, every attempt will be made to choose a product that is appropriate to the age of the children and contains no additives that may cause allergic reactions in some children. The advice of a pharmacist will be sought where necessary.
- Educators will not apply ointments, creams or applications to children whose parents have not provided their written consent.

**Guidelines for administration of paracetamol:**

- Paracetamol will be kept in the First Aid cabinet in the Babies Room for emergency purposes.
- If a child presents with a temperature over 38° C whilst at Birra-Li, the parents will be notified immediately and asked to organise collection of the child as soon as possible.
- Paracetamol will be administered as per dosage instructions indicated on the label.
- Administration of Paracetamol must follow the procedure for *Administration of Medica*tion requiring two qualified educators to witness the administration and complete the required documentation.
- An *Administration of Medication* form will be completed with both educator's full name, signature and time and date of administration clearly recorded.
- While waiting for the child to be collected, educators will:

- Remove excess clothing to cool the child down.
- Offer fluids to the child.
- Encourage the child to rest.
- Monitor the child for any additional symptoms.
- Maintain supervision of the ill child at all times, while keeping them separated from children who are well.

**Medication kept at Birra-Li:**

- A list of First Aid Kit contents and expiry dates inventory is checked every 2 months. Items running low will be given to the Health and Safety Officer who will arrange for the purchase of replacement supplies.

- Any medication, cream or lotion kept on the premises will be stored out of reach of children and checked every 2 months for expiry dates.
- Management will ensure only authorised personnel purchase medication for the Service
- Expired medication will be disposed of safely.
- If a child's individual medication is due to expire or running low, the family will be notified by educators that replacement items are required.
- It is the responsibilities of families to ensure that they have checked the expiry date of any emergency medications brought into the centre.
- It is the responsibility of families to take home medications at the end of each day.
- Families are required to complete an *Administration of Medication Record* for lotions to be administered. (Long-term medication form).

**Medication will not be administered if it has passed the product expiry date.**

**Emergency administration of medication:**

- In the case of an emergency and where the administration of medication must occur, an attempt to receive verbal authorisation by a parent, or person named in the child's enrolment form who is authorised to consent to the administration of medication will be made.
- If all the child's nominated contacts are non-contactable, the Service must contact a registered medical practitioner or emergency service on 000.
- In the event of an emergency and where the administration of medication must occur, written notice must be provided to a parent of the child or other emergency contact person listed on the child's enrolment form as soon as practicable.
- The Nominated Supervisor will contact the regulatory authority within 24 hours in the case of a serious incident (if urgent medical attention was sought or the child attended hospital).

**Emergency involving anaphylaxis or asthma:**

For anaphylaxis or asthma emergencies, medication/treatment will be administered to a child without authorisation, following the *Asthma or Anaphylaxis Action Plan* provided by the parent/guardian.
In the event of a child not known to have asthma and appears to be in severe respiratory distress, the *Administration of First Aid Procedure* must be followed immediately:

- An ambulance must be called.
- Place child in a seated upright position
- Give 4 separate puffs of a reliever medication (e.g., Ventolin) using a spacer if required.
- Repeat every 4 minutes until the ambulance arrives.

In the event of a children not known to be diagnosed with anaphylaxis and appears to be anaphylaxis emergency where any of the following symptoms are present, the ASCIA First Aid Plan for Anaphylaxis will be followed and an adrenaline device must be administered:

- Difficulty/noisy breathing
- Swelling of the tongue/swelling or tightness in throat
- Difficulty talking
- Wheeze or persistent cough
- Persistent dizziness or collapse pale and floppy
- Pale and floppy
- Abdominal pain

The Nominated Supervisor/responsible person will contact the following (as required) as soon as practicably possible:

- Emergency Services 000
- A parent of the child and if not contactable an Authorised Emergency Contact Person.
- The regulatory authority within 24 hours (if an ambulance was called).

The child will be comforted, reassured, and removed to a quiet area under the direct supervision of a suitably experienced and trained educator whilst waiting for the ambulance.

**Continuous improvement:**

The *Administration of Medication Policy* will be reviewed every 18 months or earlier if there are changes to legislation, ACECQA guidance or any incident related to our policy in conjunction with families, educators, staff and management.

**Sources:**

Australian Children's Education & Care Quality Authority. (2026). *Guide to the National Quality Framework*

Australian Children's Education & Care Quality Authority. (2021). *Dealing with Medical Conditions in Children*. Policy Guidelines.
Australian Society of Clinical Immunology and Allergy. ASCIA. https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis
Australian Government Department of Education. (2022). *Belonging, Being and Becoming: The Early Years Learning Framework for Australia. V2.0.*
Early Childhood Australia (2016). *Code of Ethics.*
Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2011
National Health and Medical Research Council. (2024). *Staying Healthy: preventing infectious diseases in early childhood education and care services* (6th Ed.). NHMRC. Canberra.
Western Australian Legislation Education and Care Services National Law (WA) Act 2012
Western Australia Legislation Education and Care Services National Regulations 2012

**Review:**

| Policy Reviewed | Modifications | Next Review Date |
|---|---|---|
| **June 2026** | Removal of related policies section. Revised content. Added child safe legislation amendments – paramount consideration and inappropriate conduct. Updated reference to adrenaline autoinjectors to adrenaline devices. Additional information added 'Medications kept at the Service, over the counter medications.' | **December 2027** |