NQS2 Children's Health & Safety Procedure
Administration of Medication

Medication poisoning or accidental overdose

1. If a child collapses, is experiencing difficulties breathing or becomes unresponsive, **immediately telephone 000** for an ambulance and follow operator directions.
2. Do not wait for symptoms to occur, **immediately telephone Poisons Information Centre (13 11 26)** and follow their directions.
3. Do not make child vomit or give them anything to eat or drink.
4. Monitor child closely until medical attention is sought/ambulance arrives, and paramedics take over care.

Background

The safe administration of medication requires meticulous attention and strict adherence with this procedure. Forgetting to administer medication, administering medication late, under-administering or accidentally administering too much medication can lead to serious and sometimes life-threatening consequences for children. This procedure outlines responsibilities and steps to safely administer medication for:

- **Short-term illnesses** e.g. Antibiotics for ear infection, liquid Paracetamol for unwell child with fever.
- **Long-term diagnosed health conditions** e.g. Antihistamines for allergies, EpiPen for medically diagnosed Anaphylaxis, medication for diagnosed neurodevelopmental conditions such as Attention-Deficit/Hyperactivity Disorder.
- **Asthma and Anaphylaxis Medical Emergencies**.

For the purposes of this procedure:

- **Medications** are 'classified registered medicines' by the Australian Register of Therapeutic Goods which include medicines prescribed by a registered medical practitioner and over the counter medicines supplied by a pharmacist.
- A **Registered Medical Practitioner** is a general practitioner (GP), a medical specialist or credentialled diabetes educator.

Over the counter creams and ointments are not medications and are not in scope of this procedure. Instead refer to *Insect Repellent, Creams and Ointments Procedure*.

General Responsibilities

Parents/Guardians will:

- Inform centre when regular medication is administered to their child at home i.e. medication name, purpose and possible side effects.
- Upon centre arrival, hand medication directly to a teacher/educator or when instructed, place in nominated medication storage location. Do not leave medication in child's bag under any circumstances.
- Provide medication in its original container or in a pharmacy-dispensed blister pack with pharmacy label.
- When tablet medication must be scored or spilt, supply medication in a pharmacy-dispensed blister pack with pharmacy label. Teachers and educators are not permitted to cut, score or split tablets.
- Complete *Medication Authorisation Record* (and *Diabetes Daily Glucose Monitoring and Response Record* for diabetes related medication) each day, upon arrival, when child requires medication to be administered. Parent/guardian written instructions must be consistent with the registered medical practitioner's instructions on pharmacy label and/or child's Medical Management Plan.
- Provide an adequate supply of required medication, ensuring medication is not expired.
- Supply necessary equipment to administer medication such as an oral syringe or measuring cup.
- Upon collection of child, review completed *Medication Authorisation Record* and collect medication. If applicable, speak with child's teacher/educator about child's medication needs. Long-term medication (such as Asthma Reliver and EpiPen) may be kept at centre.

Nominated Supervisor/Centre Director or Responsible Person in Charge will:

- Communicate and reinforce the above responsibilities with parents/guardians at and throughout enrolment. Display and when appropriate provide parents/guardians a copy of the *When you child needs medication Poster*.
- Outline this procedure during teacher/educator induction. Display *Medication Administration Process Poster* near where medication is stored.
- When a teacher/educator is administering medication for the first time at the centre, supervise and provide guidance as needed.
- Periodically monitor and assess teacher/educator compliance with this procedure.
- In consultation with the centre team, establish a medication reminder centre protocol (e.g. timer, watch or iPad alarm or 'medication administrator' wears reminder bracelet) to ensure medication is administered at the scheduled time.
- Upon receipt of a new enrolment, review child's KidSoft Record:

- If child requires regular medication at the centre, request parent/guardian to complete a *Medication Authorisation Record* . If medication is for a diagnosed medical condition, follow *Medical Condition Procedure*.
- If written parent/guardian consent to administer liquid Paracetamol or emergency medication has not been provided, promptly contact the parent/guardian to clarify and confirm their understanding and intent. If consent is not provided, ensure all team members are informed.

- Assess whether it is safe and appropriate for a child to attend the centre if their prescribed medication has not been supplied by the parent/guardian. Consider: Is the medication required for a life-threatening medical condition? Can the child safely and fully participate in the program without the medication? If assessed as unsafe or not appropriate, inform parent/guardian their child is unable to attend the centre until the prescribed medication is supplied.

Teachers and educators will:

- When administering medication for the first time at the centre, complete under the direct observation of a permanently employed and experienced teacher/educator.
- Establish and maintain open channels of communication with parents/guardians about their child's medication needs.
- When a child requires new medication to be administered, undertake a review of the completed *Medication Authorisation Record* and discuss the following with their parent/guardian upon their arrival at centre: the reason for medication, (if known) any possible side effects, time and frequency of medication, prescribed dosage, method of administration (e.g. oral, topical), how to use administering device (e.g. inhaler, oral syringe) and any strategies to support their child.
- Support colleague understanding and implementation of this procedure. When needed, intervene and offer guidance and direction.
- Complete (and document via the *Daily Safety Checklist)* a weekly check of expiry dates of liquid Paracetamol, emergency medications and long-term medications stored at centre. A centre may choose to set a Kidsoft or Outlook reminder 6 weeks prior to expiry dates.

Medication Administrator and Medication Witness

Teachers and educators will:

- Follow administering medication process steps (pages 4 to 6 of this procedure).
- Have an adequate level of literacy to confidently read, understand and follow written instructions AND an adequate level of numeracy to accurately interpret and measure dosages.
- Set a reminder (timer, watch or iPad alarm or wear a medication reminder bracelet) to ensure medication is administered at the scheduled time.
- Retrieve medication from the nominated storage location immediately prior to administration AND return medication to the nominated storage location immediately after medication has been administered.
- Keep medication out of reach of children whilst administering the medication.
- If applicable, wear prescription glasses to adequately read instructions and measure dosage.
- Complete process in a well-lit location to clearly read instructions and measure dosage.
- Be physically close to the medication administration/witness, as well as to the child receiving the medication.
- Remain present and focused. Avoid distractions.
- Point to and verbally affirm (POINT & CALL) then do each item of the 'medication check'.
- Measure (or observe the measurement of) the prescribed dose with care and attention. Understand dosage amounts of liquid medication may vary and could be less or more than 1 ml.
- Administer Antibiotics at scheduled intervals as per the registered medical practitioner instructions on the pharmacy label. If necessary, wake a sleeping child to administer a scheduled dose.

Medication Storage and Disposal

Teachers and educators will:

- Store medications as per their product instructions, in a nominated location that is:
  - inaccessible to children
  - easily accessible and known to all teachers/educators
  - kept unlocked (except for medication requiring refrigeration)
  - out of direct sunlight or heat
  - clearly signed.
- Store medication requiring refrigeration in a locked box in a refrigerator. Ensure all teachers/educators are aware of key location.
- Never store EpiPens and Asthma reliever medication in a refrigerator.
- Store EpiPens in an insulated container, when storing at room temperature (15-25°C) is not possible.
- Provide unused and expired C&K emergency medications and liquid Paracetamol, to a local pharmacy for disposal. Return long-term unused and expired medications, provided by parents/guardians, to parents/guardians for disposal.

Medication permitted to be administered

Medication can be administered to a child when:

- Two first aid trained teachers/educators are available and physically present to administer medication. When possible, teacher/educator 1 (the 'Medication Administrator') will be a permanent employee.
- Prior parental/guardian written authorisation and instructions have been provided via a *Medication Authorisation Record* or *Diabetes Blood Glucose/Ketone Medication Authorisation Record* (for diabetes medication) AND prior registered medical practitioner written authorisation and instructions have been provided via a pharmacy label affixed to the medication container or child's medical management plan (except for liquid Paracetamol and emergency Asthma and Anaphylaxis medication).
- Parent/guardian and registered medical practitioner administration authorisation and instructions are consistent.
- Medication has been supplied in its original container OR in a pharmacy-dispensed blister pack with pharmacy label.
- An appropriate medication administering device, such as an oral syringe, measuring cup, has been supplied by the parent/guardian.

Medication NOT permitted to be administered

Teachers and educators will NOT:

- Administer expired medication.
- Score and split tablet medication. Instead, instruct parents/guardians to supply medication in a pharmacy-dispensed blister pack with pharmacy label.
- Administer medication when parent/guardian and register medical practitioner written instructions are inconsistent, unclear or illegible.
- Administer medication that is inconsistent with a child's Medical Management Plan.
- Administer "over the counter" cold or flu medication. Unwell children should not attend the centre.
- Administer Schedule 8 medication, including medicinal cannabis, unless prior written approval has been obtained from the C&K Legal, Risk and Governance Team (branch centres). Affiliated centres should seek direction from their insurance provider. This requirement is due to additional insurance and compliance obligations. Approval must be sought in advance, and no administration may occur until confirmation is received. All relevant documentation, including storage, administration records, and handling procedures, must comply with current regulatory and insurance standards.
- Administer homeopathic medication, homemade medication or essential oil products* without written authorisation and instructions of a registered medical practitioner provided via a pharmacy label affixed to original container.

Anaphylaxis and Asthma Emergency Medication

Nominated Supervisor/Centre Director or Responsible Person in Charge will:

- Maintain the below supply of Adrenaline (EpiPen) and Reliever Inhaler (Zempreon) in case of an undiagnosed child experiences a suspected Anaphylaxis or Asthma medical emergency.

1-unit kindergartens	1 x EpiPen Jnr + 1 x Zempreon Inhaler
Childcare centres, 2-unit & 3-unit kindergartens	2 x EpiPen Jnr + 2 x Zempreon Inhaler
Outside School Hours Centre (OSHC)	2 x EpiPen Snr + 2 x Zempreon Inhaler

- Branch centres only: Emergency medications are ordered annually by C&K Central. Seek Early Childhood Education Manager prior email approval before ordering additional sets of emergency medications.

Teachers and educators with current first aid qualifications:

- Are permitted to administer Adrenaline (EpiPen) or Reliever Inhaler (Zempreon) to a child (not previously diagnosed with Anaphylaxis or Asthma) experiencing a suspected Anaphylaxis or Asthma medical emergency WITHOUT prior parent/guardian and registered medical practitioner written authorisation. (Reg 94) This exception can be relied upon even where a parent/guardian has responded "No" to the administration of an EpiPen and Reliever inhaler medication consent questions in their child's *Enrolment Booklet/Online Form*.
- Will immediately telephone Triple 0 (000) and notify the child's parent/guardian as soon as practical after administering Adrenaline (EpiPen) or Reliever Inhaler (Zempreon) in a suspected medical emergency. (Reg 94)
- Will follow Triple 0 (000) operator instructions and refer to the *Anaphylaxis and Allergies Procedure* and *Asthma Procedure* for further instructions, including emergency first aid steps.

***Note:** Essential oil sticker patches (e.g. Buzz Patch products) have been identified as a choking hazard. Parents/guardians may affix patches to their child's clothing at home before or immediately upon arrival at centre. However, teachers and educators are not permitted to apply or reapply essential oil sticker patches to children and will ask parent/guardian for product name and source a Safety Data Sheet for centre chemical register/folder, immediately dispose of patches when located on the ground and remove patches from children's clothing before sleep and rest routines.

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Administering Medication Process

Teachers and educators will complete the below steps to administer medication:

Teacher/Educator One Medication Administrator will:	Teacher/Educator Two Medication Witness will:
1. Locate: ○ If applicable, your reading glasses ○ *Medication Authorisation Record* and pen ○ Medication and administration device ○ If applicable, disposal gloves ○ If applicable, child's Medical Management Plan ○ Second teacher/educator - 'medication witness' ○ Child requiring medication. 2. Wash hands	1. If applicable locate your reading glasses

Complete Medication Checks

3. Under the direct observation of the 'Medication Witness': POINT & CALL, then DO each item of medication check	2. Under the direct observation of the 'Medication Administrator', POINT & CALL, then DO each item of medication check
☑ ☞ **CHECK:** Parent/guardian *Medication Authorisation Record* instructions AND registered medical practitioner instructions on pharmacy label or Medical Management Plan **consistent**?	
☑ ☞ **CHECK:** Medication in original container OR pharmacy-dispensed blister pack with pharmacy label?	
☑ ☞ **CHECK:** Medication has not expired?	
Medication Administrator puts on gloves (if required)	
Medication Administrator measures correct dose in administration device	
☑ ☞ **CHECK:** Measured dose **consistent** with parent/guardian *Medication Authorisation Record* instructions AND registered medical practitioner instructions on pharmacy label or Medical Management Plan?	
☑ ☞ **CHECK:** This is the child that requires medication?	
Medication Administrator administers medication to child*	

4. Complete Part B of *Medication Authorisation Record* 5. If required, clean and sanitise administration device 6. Immediately return *Medication Authorisation Record,* medication, and administration device to nominated storage location(s) 7. Wash hands	3. Complete Part B of *Medication Authorisation Record*

***Note:** As per Regulation 96, a child enrolled in an Outside School Hours Centre who is attending primary school, may self-administer medication when prior parent/guardian written authorisation to self-administer has been provided via the *Medication Authorisation Record*. All other steps listed above must be completed.

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Administering Liquid Paracetamol for Fever

Nominated Supervisors/Centre Directors (or RPIC) will maintain an adequate supply of liquid Paracetamol.

Teachers and educators will administer one dose of liquid Paracetamol to an unwell child with a fever where prior parent/guardian written authorisation has been obtained via the *Enrolment Booklet/Online Form* AND the child's parent/guardian (or emergency contact, nominated doctor, Triple 0 - 000) verbal authorisation (via the telephone) has been obtained. Prior registered medical practitioner written authorisation is NOT required. Refer to *Exclusion Due to Illness Procedure* (page 3).

Teachers and educators will complete the below steps to administer one dose liquid Paracetamol to an unwell child with a fever:

Teacher/Educator One
Medication Administrator will:

1. Via KidSoft, confirm the child's parent/guardian has provided written authorisation to administer liquid Paracetamol
2. Telephone child's parent/guardian to obtain verbal authorisation to administer liquid Paracetamol
3. Locate:
   - If applicable, your reading glasses
   - *Medication Authorisation Record* and pen
   - *Centre Child Incident Record*
   - Liquid Paracetamol and oral syringe (supplied by centre)
   - Second teacher/educator - 'medication witness'
   - Child unwell with fever
4. Wash hands

Teacher/Educator Two
Medication Witness will:

1. If applicable, locate your reading glasses

Complete Medication Checks

5. Under the direct observation of the 'Medication Witness': POINT & CALL, then DO each item of medication check

2. Under the direct observation of the 'Medication Administrator', POINT & CALL, then DO each item of medication check

☑ ☞ **CHECK:** Liquid Paracetamol in original bottle supplied by centre?

☑ ☞ **CHECK:** Liquid Paracetamol has not expired?

Medication Administrator measures dose in oral syringe as per product instructions on liquid Paracetamol bottle

☑ ☞ **CHECK:** Measured dose **consistent** with product instructions on the liquid Paracetamol bottle?

☑ ☞ **CHECK:** Is this the unwell child with fever requiring liquid Paracetamol?

Medication Administrator administers measured dose of liquid Paracetamol orally to child

6. Complete Part B of *Medication Authorisation Record* and *Centre Child Incident Record*
7. Clean and sanitise oral syringe
8. Immediately return *Medication Authorisation Record, Centre Child Incident Record*, liquid Paracetamol, and oral syringe to nominated storage locations
9. Wash hands

3. Complete Part B of *Medication Authorisation Record*

*** Child must be collected by their parent/guardian as soon possible after Paracetamol has been administered ***

Administering Teething Gel

The Australian Therapeutic Goods Administration (TGA) classifies teething gel as a Schedule 2 medicine. The sale of teething gel is restricted to pharmacies.

Teachers and educators can administer teething gel when:

- A child is demonstrating signs of teething pain (e.g., irritability, flushed cheeks, finger/fist sucking, ear pulling) AND all other methods of relieving teething pain have been attempted e.g., teething rings, rusks.
- The teething gel has been purchased and supplied by the child's parent/guardian with an affixed pharmacy label with the child's full name and application instructions AND prior parent/guardian written authorisation and instructions (*Medication Authorisation Record*) are consistent with the pharmacy label instructions. Written authorisation from a registered medical practitioner is NOT required.

Teachers and educators will complete the below steps to apply teething gel:

Teacher/Educator One Medication Administrator will:	Teacher/Educator Two Medication Witness will:
1. Locate: ○ If applicable, your reading glasses ○ *Medication Authorisation Record* and pen ○ *Centre Child Incident Record* ○ Teething gel supplied by parent/guardian and oral syringe ○ Disposal gloves ○ Second teacher/educator as act as a 'medication witness' ○ Child requiring teething gel 2. Wash hands	1. If applicable, your reading glasses

Complete Medication Checks	
3. Under the direct observation of the 'Medication Witness': POINT & CALL, then DO each item of medication check	2. Under the direct observation of the 'Medication Administrator': POINT & CALL, then DO each item of medication check
☑ ☞ **CHECK:** Parent *Medication Authorisation Record* instructions AND registered medical practitioner instructions on pharmacy label **consistent**?	
☑ ☞ **CHECK:** Teething gel in original container?	
☑ ☞ **CHECK:** Teething gel has not expired?	
Medication Administrator puts on disposable gloves	
Medication Administrator measures dose on gloved finger	
☑ ☞ **CHECK:** Measured dose **consistent** with parent/guardian *Medication Authorisation Record* instructions and pharmacy label instructions?	
☑ ☞ **CHECK:** Is this the child requiring teething gel?	
Medication Administrator applies teething gel to child	

4. Remove and dispose of gloves 5. Complete *Centre Child Incident Record* and Part B of *Medication Authorisation Record* 6. Immediately return *Medication Authorisation Record* and teething gel to nominated storage locations 7. Wash hands	3. Complete Part B of *Medication Authorisation Record*