

Medication Policy

Policy/Procedure Number: **QA2 - 8**

Policy/Procedure Requirement: National Quality Standards 2; Regulations 92-96, 178, 181-184

Policy Statement

Administering medication is a high-risk practice. Written authorisation must be obtained from a parent/guardian or authorised person listed on the child's Enrolment Form before Educators can administer any medication (prescribed or non-prescribed needs to be labelled).

Rationale

It is preferred that medication be administered by parents/guardians, however if that is not possible, this policy should apply.

The **Service does not approve the administration of pain relief or cough and cold medication for children under the age of 6 years of age.** Pain relief or cough and cold medication for children aged 6-11 years can be administered only on the advice of a doctor, pharmacist, or nurse practitioner.

Strategies and Practices

Responsibilities of the Coordinators:

The Coordinators will:

- Provide all families with relevant information about health management policies and practices on enrolment and regularly after that through newsletters
- Provide forms for Educators to record relevant health and medication details
- Support families and Educators when dealing with health management matters
- Confidentially **store health and medical details on children until they reach the age of 24 years**
- Request families to update their child Enrolment Forms annually to ensure medical authorisations and conditions are updated
- Prepare Medical Risk & Communication Plans for children with medical conditions

Responsibilities of the Educators:

The Educators will:

In relation to administering medications:

- Administer medication based on the following principles:
 - The right child
 - The right medication
 - The right dose
 - The right method
 - The right date and time
- These basic principles are the first steps in ensuring that medication is administered safely to any person and should be documented by the parent or legal guardian before administering medication to a child
- Educators should check a medication's expiry date before administering it to a child and **ensure prior written parental authorisation/consent is obtained**

- Families can expect that educators will always act in the best interests of the children in their care and meet the children's individual health care needs
- Act in the best interests of the safety and health of the child
- **Not administer the first dose of a newly prescribed medicine.** The parent(s) or medical/nursing professionals should administer it
- **Ensure all medication (both prescribed and non-prescribed) administered is in the original packaging, bearing the original label.** This rule should **apply to all medications**, regardless of whether they are non- prescribed, such as **teething gels or nappy creams** or prescribed medications such as antibiotics. Parents should ask pharmacies to provide dispensing labels and dosage instructions for non-prescribed medications.
- All medication must be labelled with the child's name and must state on the label the medication name and strength, the date of prescription, dosage and times to be administered, as well as the expiry date of the preparation
- **Not give to a child medication that is unidentified or the instructions are not clear** to the Educator e.g. in an unfamiliar language to the Educator
- Ensure that prescribed medication is only used on the basis that the child has seen a doctor and the doctor has directed, by script or in writing, that such medication is appropriate. A doctor's written instructions or pharmacist's label will normally be sufficient
- Store medication appropriately and in a safe and secure place as per instructions on product label
- Medication must not be left in the child's bag. It must be out of reach of children at all times
- Ensure Parent/guardian completes the parent section of the '**Medication Record**' form for all medication that has to be administered. This shall include the **time and dose and a summary of the doses of medication administered by the parent at home** in the **previous 24-hour period**
- Educators will check to ensure that written instructions of the family are consistent with the instruction on the labelled medication or as prescribed by a doctor
- Administer medication to children strictly in accordance with the instructions and the permission form. The record of the dose being given must be completed. Any medication that is spilled or spoiled should also be recorded on the medication form
- **Ensure all long-term medication is accompanied by written permission from the doctor, outlining the likely length of time that the child is to be treated with this medication.** The doctor should also outline a review plan, indicating a time for reassessing treatment
- **Ensure ongoing medication taken on an irregular basis has written permission and specific instructions to indicate when administration is appropriate.** The doctor should also outline a review plan, indicating a time for reassessing treatment
- Document the time and dose following administering of all medication on the **Medication Record**. Parents should be notified of all medication that has been administered
- Consult with the Coordinators any concern about a request to administer a medication
- Comply with the Medical Management Plans of children with chronic health problems, such as asthma, epilepsy, diabetes, severe allergy and anaphylaxis
- Return **Medication Record** forms to the Co-ordination Unit at the end of each calendar year /or when a child has ceased care. **These forms must be kept until the child is 24 years old for liability/insurance purposes.** After reaching maturity at age 18, a child could still have 3 (or less likely 6) years in which to sue for negligent use of medication. This is only in the very unlikely instance that the parent of the child had not sued before then
- **Medication can be administered to a child without an authorisation** in the case of an

anaphylaxis (child's own EpiPen/AniPen) or Asthma emergency, in accordance with their own Medical Management Plan. In this case the Educators will ensure the parent of the child and/or emergency services and the Coordinators are notified as soon as practicable

Administering Paracetamol:

- Families must provide their own paracetamol for use as directed by a medical practitioner. Educators must keep Paracetamol securely for emergency purposes should the parent/ authorised person not be contactable
- Educators **must not administer paracetamol** for teething or other discomfort without a doctor's letter, even if requested by parents
- To safeguard against the **over use** of paracetamol, and minimise the risk of masking the underlying reasons for high temperatures, Educators **will only administer paracetamol** if it is **accompanied by a doctor's letter stating the reason for administering, the dosage and duration** it is to be administered for

Medication must not be administered by FDC Educators/Co-ordination unit staff if:

- It is complex and requires skill to use and the FDC Educator has not received suitable training
- It is out of date
- Child's name not on medication packaging or no supporting documentation from a doctor
- The container has no label
- The FDC Educator does not have an appropriate measuring glass or spoon
- It is in any way outside the guidelines set in this policy, or the rules of this policy have not been followed
- Immediately after administration of a dose, the medication must be returned to the appropriate storage area. Medications must not be left within reach of children, or unattended at any time

Practices for self-administration of medication e.g. cough drops, nasal spray, creams, Ventolin

If a child self-administers medication, Educators must ensure the correct procedure is followed. A child **over preschool** age may self-administer medication under the following circumstances:

- Written authorisation is provided by the person with the authority to consent to the administration of medication on the child Enrolment Form
- Medication is to be provided to the Educator for safe storage, and they will provide to the child when required
- Self-Administration of medication for children over preschool age will be fully supervised by the Educator

Responsibilities of Parents:

The Parents will:

- Provide a summary of their child's health, doctors name/address/phone number, and where applicable medications, allergies, and a health management plan approved by a doctor to the Coordinators and Educator prior to starting care and ongoing as required
- Keep the Educator up to date with any changes to a child's medical condition or health management plan
- Provide medication in its original package
- Complete the parent authorisation to administer medication form to their child, on a daily basis or as required, and sign on pick up

- Request the Educator to administer only the recommended dosage on the original medications package

Resources and Further Readings

- ACECQA (2023) Guide to the National Quality Framework
- ACECQA (2023) Information Sheets
- Education and Care Services National Law Act 2010 (Amended 2023)
- Education and Care Services National Regulations (Amended 2023)
- ACECQA National; Quality Framework Resource Kit www.acecqa.gov.au

Related FDC Policies, Procedures & Documents

- Incident, Injury, Trauma & Illness
- Nutrition and Dietary Requirements
- Administration of First Aid
- Interactions with Children
- Acceptance and Refusal of Authorisations
- Parent Agreement Form
- Authorisation of Medication Form
- Medication Self Administration Form
- Medical Management Plan

Last Reviewed: October 2025

Next Review: October 2026