



Growing & Learning...TOGETHER

Lobethal Kindergarten Medication policy

Policy Number **9**

Issue Number **4**

Link to NQS for ECE Principals: **1.2.2**
2.1.1
2.1.3
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Policy statement

Lobethal Kindergarten has a duty of care to ensure that all staff and children are provided with a high level of protection during the hours of the service's operation.

- Lobethal kindergarten's medication policy reflects the following principles:
- Safe principles and practices to administer medication
- Hygiene practices
- An acute attention to detail
- The maintenance of accurate records
- Up to date professional development knowledge of administering techniques
- First aid qualifications
- Licensing and/or legislative requirements
- Recommended advice and practices from a medical source
- Open communication between staff/carers, families and children: and the accountability of staff when administering medication.

The basic principles of medication administration will be adhered to at all times in the service.

The five principles are correct:

- Child
 - Medication
 - Dose
 - Method
 - Date and time; and expiry of the medication
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Medication can only be administered when the kindergarten **medication log** has been completed and signed by the child's parent or legal guardian. Staff will also note any medication to be administered in the day book, and timer set as a reminder.

At Lobethal kindergarten medication is administered to a child by a staff member only.

The service will ensure that staff are witnessed by another person when administering medication to children.

It is understood by staff, children and families that there is a shared responsibility between the service and other stakeholders that the medication policy and procedures are accepted as a high priority.

In meeting the kindergarten's duty of care, it is a requirement under the workplace health and safety act that staff implement and endorse the service's medication policy and procedures.

The kindergarten reserves the right to contact a health care professional if staff are unsure about administering medication to a child, even if the parent or legal guardian has requested the medication to be administered.

Rationale

Administering medication should be considered a high risk practice. Families place a high level of trust and responsibility on staff/carers when they are administering medication to children. Authority must be obtained from a parent or legal guardian before staff/carers administer any medication (prescribed or non-prescribed)

Please refer to:

National health and medical research council (2005). *Staying healthy in childcare: preventing infectious disease in child care* (4th edition). Canberra: Author

Strategies and practices

Definition of medication

The term "medication" can be defined either as prescribed or non-prescribed. For the purpose of this policy, "prescribed" medication is:

- Authorised by a health care professional, and
- Dispensed by a pharmacist with a printed label, which includes the name of the child being prescribed the medication, the medication dosage and expiry date.
- All medication that does not meet the criteria for prescribed medication, can be considered non-prescribed. This includes over-the-counter medication, medication dispensed by a naturopath/homeopath; or considered complementary or alternative such as vitamins and cultural herbs or remedies
- Examples of prescribed medication include antibiotics; ventolin for asthma; Ritalin for ADHD

Examples of non-prescribed medication include topical or antifungal creams for nappy rashes or eczema; paracetamol, ibuprofen; antihistamine for an allergy; or teething gel.

Hand washing and hygiene practices

- Remove band aids and discard in the bin
- Lather hands and wrists with soap
- Rub areas between fingers as well as palms and backs of hands
- Rub for at least 15 seconds
- Rinse thoroughly under running water
- Dry hand thoroughly
- Re apply any band aids required

Please refer to the centres Hygiene and Infection Control Policy.

Maintaining clean and hygienic environments

Staff maintain a clean and hygienic environment by-

- Spray and wipe toilet area at the end of each session, during lunch and/or at the end of the day, or earlier if needed (refer to cleaning register located in the bathroom)
- Wash and sanitise dishes after each session
- Clean and disinfect tables at the end of each session and after lunch
- Sweep, mop and vacuum floors at the end of each day.

Wash and disinfect children's toys on a regular basis

Please refer to the centre's Hygiene and Infection Control Policy.

Assessing the need for administering medication

- Staff will observe children's symptoms, condition and overall wellbeing in relation to the information provided by parents/carers.
- If concerned staff will attempt to contact parents to confirm the use of medication and document the call.
- Staff will complete documentation required for the administration of medicine.

Exclusive guidelines

- There are specific exclusion periods required when children have communicable conditions, these are clearly detailed in the "You've got what" 4th edition 2009 SA Health. <http://www.health.sa.gov.au/pehs/ygw/index.htm>
- Kindergarten staff are required by law to enforce these exclusion limits for the safety of all adults attending the centre.
- Parents will be clearly notified of when their child can return, this may be a time constraint or a physical determination (eg scabs falling off)

Ultimately the safety and welfare of children is the first priority of a service and all medication should be administered in accordance to the service's Medication Policy, in conjunction with a parent or guardian authorisation, and legislative guidelines.

Authorising the administration of medication

- Parents must fill in the Medication Log and sign it before staff are able to administer any medication, prescribed or not. If for any reason a parent has not completed the form and staff feel the medication is required they will do everything possible to contact the parent for verbal consent.

Staff are required to enforce this policy at all times.

Medication plan

- A medication plan is to be completed by the treating doctor when medication is to be administered on an ongoing basis. This plan needs to cover the following details:
 - ❖ Child's name who requires the medication
 - ❖ Child's parent or guardian's name and signature
 - ❖ Name of the medication
 - ❖ Dose required
 - ❖ Method of administration, for example, oral, eye, ear, inhaled
 - ❖ Time and date of administration
 - ❖ Expiry date of the medication
 - ❖ Special instruction, such as medication that needs to be administered an hour before a meal or before a child falls asleep; and
- known family history history to allergies involving medication. If so, what are the symptoms?

Storage and disposal of medication

Medications have the potential to be dangerous to other people and so safety/security of the medications must be paramount. Storage must cater for the individual requirements of the medication:

Correct temperature

Exposure to air/sunlight

Safety

Disposal of medication is the parent/carers responsibility

In line with DECD Policy all site spacers are for a single use only and will be disposed of afterwards

Medications will be kept in the first aid cupboard, in children's individual pouches including photos and medication plans. All medications kept in the fridge will be stored in a locked medications tin.

Administering medication to a child

At Lobethal kindergarten only staff are allowed to administer medication

Procedure

- Staff member to check the written instructions as recorded in the medication plan or medication log.
- Staff member to check the expiry date on the medication
- Staff member checks that they have the correct child by asking the child and confirming with another staff member.
- Staff member checks that they have the correct medication for the correct child
- Staff member checks the correct dose by comparing the medication log to the container
- Staff member checks the time of administration against the log and the container
- Staff member checks the correct method of administration against the log and container
- Staff member administers medication while observed by another staff member
- Staff members document the administration of medication and counter sign

- Staff members continue to observe child to check that the medication has had the desired effect.
- Staff member confirms with parent/carer that the medication was administered and returns medication (if not permanently located at kindy) to parent.

The importance of a witness

When administering medication it is preferable to involve a second staff member throughout the entire process.

Documenting the administration of medication

All administration of medication will be documented on the medication logs which will be filed and archived as per DECS instructions.

Prolonged use of medication

Will require the parents/carers to provide the centre with a completed medication plan filled out by their medical professional.

Staff professional development opportunities

- Lobethal kindergarten aims to maintain and strengthen the skills and knowledge of all staff in relation to administering medication to children.
- Staff will complete DECD-ECD PEFA Ed and care training, CPR refresher training, asthma training, epi-pen/anaphylaxis training in an ongoing manner to maintain their skills.

Excursions

Lobethal kindergarten believes in the inclusion of all children in all kindy experiences, including excursions. Strategies to support this with children on medication are as follows:

- Staff will take the completed medication log/plan on the excursion
- Staff will take the required medication (with parental approval) in a temperature controlled pack inside the emergency bag.
- Staff will take the parent/carers contact information on the excursion
- Staff will complete the administration protocol as normally required kindy.

Policy review

Lobethal kindy staff will review the medication policy and procedures and related documents, including behaviours and practices every 12 months.

Families are encouraged to collaborate with the service to review the policy and procedures

Staff are essential stakeholders in the policy review process and will be encouraged to be actively involved

Procedures

The following are example of procedures that Lobethal kindergarten may employ as part of its daily practices

Examples:

- Induction procedure (Staff, volunteers, student)
- Policy development and review procedure

Links to other policies

The following are a list of examples:

- Enrolment of new children and families to the service
- First aid
- Hygiene and infection control
- Illness
- Workplace health and safety
- Privacy and confidentiality
- Supporting children's individual needs
- Allergy aware
- Supervision

Sources and further reading

- Frith, J. Kambouris, N., & O'Grady, O. (2003). Health and safety in children's centres: Model policies and practices (2nd edition). NSW: School of Public Health and Community Medicine, university of NSW
- Matthews, C. (2004). Healthy children: A guide for child care (2nd ED). NSW: Elsevier.
- National health and Medical research Council. (2005). Staying healthy in child care: preventing infectious disease in child care (4th Ed). Canberra: Author.
- Oberklaid, F. (2004). Health in early childhood settings. NSW: Pademelon Press.
- Poisons information centre listing. (n.d). retrieved June 28, 2007, from <http://ausdi.hcn.net.au/poisons.html>
- Therapeutic goods administration. (2007). Scheduling of medications and poisons: National Drugs and Poisons Schedule Committee (NDPSC). Retrieved June 28 2007, from <http://www.tga.gov.au/ndpsc/index.htm>

Useful websites

Anaphylaxis Australia- www.allergyfacts.org.au/foodalerts.asp

Asthma foundations Australia- www.asthmaaustralia.org.au

Healthinsite –www.healthinsite.gov.au

Immunise Australia program- www.immunise.health.gov.au

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1/07/11

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This policy was reviewed by staff and presented to Lobethal community kindergarten Governing Council for approval and ratification on 12/02/2015

Signatures:

Director :

Governing Council Chairperson: