

ADMINISTRATION OF MEDICATION PROCEDURE

In supporting the health and wellbeing of children, the use of medications may be required for children at the Service. All medications must be administered according to the instructions provided by medical practitioners or as directed for over-the-counter medications as instructed and first aid guidelines to ensure the continuing health, safety, and wellbeing of the child.

Under the *Education and Care Services National Law and Regulations*, early childhood Services are required to ensure medication records are kept for each child to whom medication is or is to be administered by the Service (Reg. 92).

Working in conjunction with the *Administration of Medication Policy*, this procedure provides detailed steps for educators to follow when administering medication to children at the Service.

Education and Care Services National Law or Regulations (*S. 167. R .90, 91, 92, 93, 94, 95*) NQS QA 2: *Element 2.1.2 Health practices and procedures*

Related Policy: *Administration of Medication*

Step 1: AUTHORISATION OF MEDICATION	
1	The approved provider, nominated supervisor and educators will review the Service’s <i>Administration of Medication Policy</i> annually to ensure awareness of administrating medication
2	The nominated supervisor will ensure educators are aware of the <i>Administration of Medication Policy</i> upon employment and make provisions to ensure medication is only administered by the Service with written authority signed by the child’s parent or other responsible person named and authorised in the child’s enrolment record to make decisions about the administration of medication
3	An educator will assist the parent or guardian to complete the <i>Administration of Medication Record</i> to ensure all details are submitted and correct before leaving the child at the Service
4	An educator will take the medication from the parent/guardian and either store it in the refrigerator in a labelled and locked medication container. For medications not requiring refrigeration, they will be stored in a labelled and locked medication container with the key kept in a separate location, inaccessible to children.
5	Children who are at risk of anaphylaxis will not be permitted to enter the Service without the adrenaline auto-injector kit as per Medical Management Plan completed by parent/guardian.
6	Adrenaline autoinjectors (EpiPen® / AnaPen®) should be 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 should be stored with the adrenaline autoinjector.

7	Children who are at risk of Asthma will not be permitted to enter the Service without Asthma reliever medication as per medical management plan completed by parent/guardian	
8	Asthma reliever medication should be 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 should be stored with Asthma reliever medication.	
9	Children who require medication as per their medical management plan will not be permitted to enter the Service without medication as listed on the medical management plan completed by parent/guardian	

Step 2: AUTHORISATION OF MEDICATION

1	<p>Medication prescribed by a medical practitioner must:</p> <ul style="list-style-type: none"> • be authorised by a parent or guardian in writing • have the original label clearly showing the name of the child • be in its original container/packaging • have clear instructions detailing time of administration and dosage and method of administration • show the expiry or use-by date 	
2	<p>Medication purchased over-the-counter must:</p> <ul style="list-style-type: none"> • be authorised by a parent or guardian in writing • be in its original container/packaging • have clear instructions detailing time of administration and dosage and method of administration • show the expiry or use-by date • where possible, medication contains a label showing the child’s name 	

Step 3: ADMINISTRATION OF MEDICATION

1	Educators will create an alert or alarm as a reminder for when medication for the child is to be administered	
2	Educators will ensure medication is only administered to one child at a time	
3	When it is time to administer the medication, the educator will collect the <i>Administration of Medication Record</i> , medication and syringe/plunger or measuring cup	
4	The educator will collect the child from their play area at the time recorded on the medication record	
5	The educator will ask another educator to witness the administration of medication, one of these educators will have an approved First Aid qualification	

6	The educator administering the medication will ensure another educator checks all details on the <i>Administration of Medication Record</i> are correct prior to administering the medication to the child	
7	Before administering medication, both educators will check the following details on the <i>Administration of Medication record</i> : <ul style="list-style-type: none"> • check the parent or authorised person has signed the record • check the name of the medication is consistent with the name on the medication container/packaging • check the identity of the child is consistent with the name on the medication container/packaging • check dosage is consistent with what is on the container/packaging 	
8	Before administering medication, both educators will: <ul style="list-style-type: none"> • check the medication is in its original container, bearing the original label with the child’s name (if medication is prescribed by a medical practitioner) • check the expiry or use by date 	
9	Both educators will read through the <i>Administration of Medication Record</i> and check the instructions provided on the medication record match the instructions labelled on the packaging of the medication	
10	If there are any inconsistencies between the <i>Administration of Medication Record</i> and label on medication, the educator must not administer medication to the child. The educator will advise the nominated supervisor and the parent for further instructions.	
11	Once medication details have been confirmed the educator will administer the medication to the child	
12	The educator will wash hands prior to administration of medication following hand washing protocols	
13	The educator will measure the required dosage of medication using syringe/plunger or measuring cup	
14	The educator will administer the medication as per instructions provided and record the relevant details into the <i>Administration of Medication Record</i>	
15	Both educators are to complete the <i>Administration of Medication Record</i> with full name and signature along with time and date medication was administered	
16	If after several attempts of encouraging the child to take medication, but they still refuse, contact the parent or guardian. Educators cannot use restrictive practices to make a child take medication at any time.	

Step 4: FOLLOWING ADMINISTRATION OF MEDICATION

1	The educator will encourage the child to return to their play or routine time	
2	The educator will wash hands following administration of medication as per hand washing protocols	

3	The educator will return medication to the locked medication storage area or secure location for adrenaline autoinjectors	
4	The educator will wash medication utensil	
5	Educators will observe the child post administration of medication should be made to ensure there are no side effects	
6	Educators will contact an ambulance immediately if the child displays serious symptoms (breathing, drowsiness or unresponsiveness, looking pale or blue or feeling cold) or if multiple symptoms develop or if symptoms rapidly get worse following the administration of medication	
7	Educators will contact the parent/guardian as soon as practical if an ambulance is called	
8	The educator will detail any behaviours post administration on an <i>Incident injury trauma and illness Record</i>	
9	The approved provider/nominated supervisor will notify the regulatory authority within 24 hours if a child is involved in a serious incident at the Service	
10	The approved provider/nominated supervisor will conduct a review of practices following an incident involving incorrect administration of medication or failure to follow proper medication procedures, including an assessment of areas for improvement	
11	At the end of the day the educator will ensure medication goes home with the parent/guardian	
12	The approved provider/nominated supervisor will ensure all child medication records will be kept as per our <i>Record Keeping and Retention Policy</i> .	

Step 5: EMERGENCY ADMINISTRATION OF MEDICATION

1	In the event of an emergency where the administration of medication must occur the nominated supervisor/responsible person must attempt to receive verbal authorisation by the parent of the child named in the child’s enrolment form who is authorised to consent to the administration of medication	
2	If a parent of a child is unreachable, the nominated supervisor/responsible person will endeavour to obtain verbal authorisation from an emergency contact of the child named in the child’s enrolment form, who is authorised to approve the administration of medication	
3	If all the child’s nominated contacts are non-contactable, the nominated supervisor/responsible person must contact a registered medical practitioner or emergency service on 000	
4	In the event of an emergency and where the administration of medication must occur, written notice must be provided within 24 hours to a parent of the child or other emergency contact person listed on the child’s enrolment form	
5	The child will be comforted, reassured, and removed to a quiet area under the direct supervision of a suitably experienced and trained educator	

6	The approved provider/nominated supervisor will notify the regulatory authority within 24 hours as soon as practicably possible if urgent medical attention was sought or the child attended hospital	
---	---	--

REVIEW OF PROCEDURE			
Date procedure created	27 May 2025	To be reviewed	27 May 2026
Approved by	Jason Williams	Signature	
Procedure Reviewed Date			