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2.3 Medication and Administering Policy

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Aims

Cootamundra Preschool aims to actively support children's wellness and wellbeing in the way it manages its medication procedures for those children who need to take medication during their time at the centre.

The administration of medication is considered a high risk practice and as such carries obligations for both staff and parents/guardians. The administering of medication requires attention to detail, meticulous record keeping, teamwork and common sense as incorrect administration has potential health and litigation risks (National Health Medical Research Council 2006).

The Director must ensure that at least one educator (but not necessarily the same person) has (1) a current approved First Aid certificate, (2) undertaken anaphylaxis management training and (3) undertaken emergency asthma management training (Education & Care Services National Regulation No. 136) and that these are updated as required

Legislative Requirements

Education and Care Services National Regulations 2011
Poisons and Therapeutic Goods Act 1996 (NSW)

Public Health Act 1991

Occupational Health and Safety Act 2000

Occupation Health & Safety Regulations 2001

Who Is Effected By This Policy?

Child

Staff

Families

Management

Relevant Early Childhood Professional Standards

Early Childhood Code of Ethics: 1-6, III-1

Early Years Learning Framework: Outcomes – 1.1, 3.1, 3.2, . Principles – 1, 2, 4,

Education & Care Services Australian National Regulations: 89, 136, 90-96, 168(2d),

National Quality Framework: Quality areas – 2.1.2, 2.2.2, 4.1.1, 5.1.1, 6.2.1, 7.1.2, 7.1.3

Sources/References

Education and Care Services National Regulations 2010

National Health Medical Research Council (2007) Staying healthy in child care: Preventing infectious diseases in childcare. (4th ed)

<http://www.nhmrc.gov.au/publications/synopses/files/ch43.pdf> (Retrieved January 2012)

NSW government: NSW Health. Paracetamol usage

http://www.health.nsw.gov.au/policies/pd/2009/pdf/PD2009_009_.pdf (Retrieved January 2012)

Date reviewed by staff: June 2020

Date reviewed by committee: June 2020

Next review date: June 2023

Procedures

1. General procedures

Medication can be either prescribed medication which is prescribed by a doctor or other authorised health care professional and dispensed by a pharmacist with a printed label that includes the child's name, dosage and expiry date.

The following procedures are to be followed at all times:

1.1 Both prescribed and non-prescribed medication jars etc must be bought to the centre in its original container/bottle. The actual medication container must have the normal commercial label citing the child's name, dosage, expiry date, name of dispensing pharmacy and any special conditions relating to its administration.

1.2 The centre's Medication Authority Form must be signed, dated and must include the details of the medication – dosage, time to be administered, method of administration (oral, ear, inhaled etc), and any special instructions such as whether it is to be administered before or after food, etc. This must be completed at the initial enrollment interview or before any medication can be administered to a child at the centre

1.3 Two staff members must check the medication, dosage amount and then sign and date the Medication Authority Form once the medication has been administered and witnessed

1.4 If non prescribed medication is to be given to a child longer than five days, staff will ask parents to seek advice from a doctor, pharmacist or local early childhood health clinic nurse concerning the continued use of the medication, or will do so themselves

1.5 All medication will be securely stored in a locked cupboard or placed out of reach of children. Should the medications require refrigeration they will be placed at the back of the refrigerator on the top shelf, in a childproof container. The fridge will be closed and locked by a childproof lock on the door.

1.6 If there is a disagreement about a child's medication between family members, including between custodial and non-custodial parents, NSW Family and Communities will be contacted for advice. No medication will be given until advice has been obtained by NSW Family and Communities.

1.7 If in the event that a child refuses to take their medication, staff will not force them but parents will be contacted immediately

1.8 All medication will be cross checked and administered using the 5 rights:

Right Child

Right Medication

Right Time

Right Dose

Right Manner (indicated on medication label (eg to be taken with food))

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1.9 Staff will not administer (1) unlabelled medication - whether prescribed or non prescribed or (2) out of date medication

1.10 Parents must give the child's medication to the staff upon arrival at the centre. Staff must be informed by parents of any medication administered to the child before coming to preschool

1.11 The centre's Director will clearly explain the Medication Policy to parents at the initial enrolment interview and will ensure parents sign a Medication Authority Form. All forms when returned to the Director, will be considered as confidential and will be kept in a locked filing cabinet

1.12 In case of any emergency situation regarding medications the centre will ring the Poison Information on 131126.

1.13 Staff should wash their hands before and after administering medication .

1.15 If a child has been to the doctors and has been prescribed an antibiotic, the child is unable to attend the preschool until they have been on the antibiotics for 24hrs.

2. Administering paracetamol

Paracetamol should only be used if a child has a fever of over 38.5C and is clearly uncomfortable. With less intense fever there is limited evidence that paracetamol is effective in lowering a fever. Fever generation may be a protective mechanism; therefore reducing a mild fever with pharmacological agents may be counterproductive to the body's efforts to mount an immunological response to viral infection. It also needs to be remembered that paracetamol can be toxic for children if an overdose is taken

2.1 If the child's temperature is below 38.5C staff will help them feel comfortable by removing some clothing, sponging with luke warm water and fanning the child. This will not reduce a fever however. If the child becomes too cool, dress him/her again. The child will be encouraged to drink small, frequent amounts of water. Staff should not administer paracetamol for mild fever (under 38.5C), gastroenteritis or as a sedative

2.2 In the event that a single dose of paracetamol needs to be administered, staff will contact the parent, guardian or nominated person and obtain consent by phone (ensure another staff member witnesses the conversation). This action is a recommended legal procedure and is in addition to any general prior agreement made by the parent including written authority for administering paracetamol at the initial enrolment interview. The parent will be asked to come and collect their unwell child.

2.3 If a child has accidentally swallowed paracetamol or has inadvertently been given an excessive dose, medical advice should be sought immediately. It may cause liver toxicity even if it appears there has been no effect at the time. If an overdose occurs, staff should contact the Poisons Information Line on 131126 or call for an ambulance, dial 000

2.4 If paracetamol is to be administered to a child for fever, staff should only administer it to a child who has a temperature above 38.5C and is in discomfort or pain

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2.5 Staff should administer only one dose of paracetamol in any situation. NSW Health recommends that with children under 12 years. Staff will administer the paracetamol according to the instructions on the bottle and will check it is within its 'use by' date

2.6 Staff should only use preparations that contain paracetamol, not a cold or flu syrup or other combined medicinal preparations.

2.7 Staff must ensure that an injury or acute illness report, along with Administration of paracetamol form is completed for any situation where a child develops an acute illness or fever and requires the emergency administration of paracetamol

The Director will ensure that this policy is maintained and implemented at all times.

Incident, injury, trauma and illness record

Details of person completing this record

Name: Position/role:

Date and time record was made/...../..... Signature:

Child details

Child's full name:

Date of birth:/...../..... Age: Gender : ☐ Male ☐ Female

Incident details

Incident date:/...../..... Time: am/pm Location:

Name of witness:

Witness signature: Date:/...../.....

General activity at the time of **incident/injury/trauma/illness**:

.....

Cause of **injury/trauma**:

.....

Circumstances surrounding any **illness**, including apparent symptoms:

.....

Circumstances if child appeared to be **missing** or otherwise unaccounted for (incl duration, who found child etc):

.....

Circumstances if child appeared to have been **taken or removed** from service or was **locked in/out** of service (incl who took the child, duration):

.....

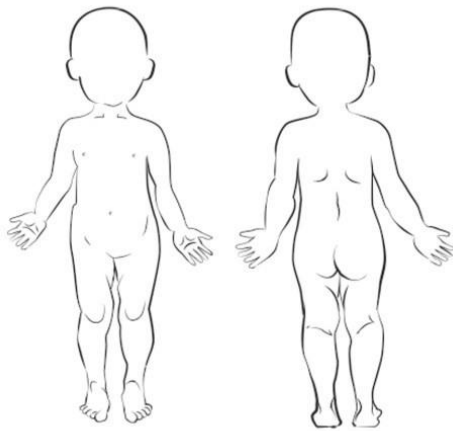
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Nature of injury/trauma/illness:

Indicate on diagram the part of body affected



- | | |
|---|---|
| <input type="checkbox"/> Abrasion / Scrape | <input type="checkbox"/> Eye injury |
| <input type="checkbox"/> Allergic reaction (not anaphylaxis) | <input type="checkbox"/> Infectious disease (incl gastrointestinal) |
| <input type="checkbox"/> Amputation | <input type="checkbox"/> High temperature |
| <input type="checkbox"/> Anaphylaxis | <input type="checkbox"/> Ingestion / inhalation / insertion |
| <input type="checkbox"/> Asthma / respiratory | <input type="checkbox"/> Internal injury / Infection |
| <input type="checkbox"/> Bite wound | <input type="checkbox"/> Poisoning |
| <input type="checkbox"/> Bruise | <input type="checkbox"/> Rash |
| <input type="checkbox"/> Broken bone / fracture / dislocation | <input type="checkbox"/> Respiratory |
| <input type="checkbox"/> Burn / sunburn | <input type="checkbox"/> Seizure /unconscious/ convulsion |
| <input type="checkbox"/> Choking | <input type="checkbox"/> Sprain / swelling |
| <input type="checkbox"/> Concussion | <input type="checkbox"/> Stabbing / piercing |
| <input type="checkbox"/> Crush / jam | <input type="checkbox"/> Tooth |
| <input type="checkbox"/> Cut / open wound | <input type="checkbox"/> Venomous bite/sting |
| <input type="checkbox"/> Drowning (non-fatal) | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Electric shock | |

Action Taken

Details of action taken (including first aid, administration of medication etc):

Did emergency services attend?: Yes / No

Was medical attention sought from a registered practitioner / hospital?: Yes / No

If yes to either of the above, provide details:

Have any steps been taken to prevent or minimise this type of incident in the future?:

Notifications (including attempted notifications)

Parent/guardian: Time: am/pm Date:/...../.....

Director/educator/coordinator: Time: am/pm Date:/...../.....

Other agency (if applicable): Time: am/pm Date:/...../.....

Regulatory authority (if applicable): Time:am/pm Date:/...../.....

Parental acknowledgement:

I

(name of parent/guardian)

have been notified of my child's incident/injury/trauma/illness.

(Please circle)

Signature: Date:/...../.....

Additional notes:

Cootamundra Preschool

RECORD OF PARACETAMOL ADMINISTRATION

Date: _____ Name of Child: _____ Age: _____

Record of Temperature _____ Time temperature was 1st taken: _____

Temp checked by: _____ Witnessed by: _____

Any other apparent symptoms: _____

Methods used to lower temperature: _____

Temperature recorded following this: _____

Parent/ emergency contact, contacted by: _____ at _____

Comments: _____

Name of person giving verbal permission to administer Paracetamol as per the required dose on the bottle:

Paracetamol administered at: _____

Dose: administered: _____

Follow up: _____

Form completed by: _____ Signature: _____

Staff witness: _____ Signature: _____

Authorised Supervisors Signature: _____

Parent Signature: _____