Cheltenham Community Centre Early Learning Childcare

E25. Administration of Medication

1. Policy

1.1 This policy will clearly define the:
- procedures to be followed when a child requires medication while attending CCC Early Learning Childcare
- storage of medication
- responsibilities of nominated supervisor, early childhood teacher, educators, staff
- parents/guardians and the approved provider to ensure the safe administration of
- medication at CCC Early Learning Childcare.

1.2 CCC Early Learning Childcare is committed to:
- providing a safe and healthy environment for all children, early childhood educators, staff and other persons attending the service
- responding appropriately to the needs of a child who is ill or becomes ill while attending the service
- ensuring safe and appropriate administration and storage of medication in accordance with legislative and regulatory requirements
- protecting child privacy and ensuring confidentiality
- maintaining a duty of care to children at the service.

1.3 This policy applies to the approved provider, persons with management or control, nominated supervisor, persons in day-to-day charge, early childhood educators, staff, students, volunteers, parents/guardians, children, and other attending the programs and activities of CCC Early Learning Childcare.

1.4 In order to assess whether the values and purposes of this policy have been achieved, we will:
- Welcome feedback from everyone affected by this policy regarding its effectiveness
- Monitor the implementations, compliance, complaints, and incidents in relation to this policy
- Keep the policy up to date with current legislation, research, policy, and best practice
- Revise the policy and procedures as part of the service's policy review cycle, or as required, and
- Notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

2. Procedures:

2.1 **Authorisation to administer medication:**
Medication (including prescription, non-prescription, over the counter and homeopathic medications) must not be administered to a child at a service without the authorisation of a parent/guardian or person with the lawful authority to consent to the administration of medical attention to the child. In the case of an anaphylaxis or asthma emergency, where the child does

not have a medical action plan or other form of authorisation, First Aid treatment is provided as described in the Responding to Medical Conditions – including anaphylaxis, allergies, asthma & diabetes policy. In this circumstance, the child's parent/guardian and emergency services must be contacted as soon as possible after First Aid has commenced. In these instances, notifications of serious incidents must be made to the regulatory authority (DET) as soon as is practicable but not later than 24 hours after the occurrence.

In the case of all other emergencies, it is acceptable to obtain verbal consent from a parent/guardian, or to obtain consent from a registered medical practitioner or medical emergency services if the child's parent/guardian cannot be contacted.

2.2 **Administration of medication**

The approved provider must ensure that when early childhood educator administers medication, they must follow the guidelines of this policy, and the procedures outlined:

A medication record must be completed with the following information:

- the name of the child
- the authorisation to administer medication signed by a parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication
- the name of the medication to be administered
- the time and date the medication was last administered
- the time and date or the circumstances under which the medication should be next administered
- the dosage of the medication to be administered
- the way the medication is to be administered
- if the medication is administered to the child:
    - the dosage that was administered
    - the way the medication was administered
    - the time and date the medication was administered
    - the name and signature of the person who administered the medication
    - the name and signature of the person who checked the dosage, if another person is required under **Regulation 95** to check the dosage and administration of the medication.

2.3 **Medication can only be administered:**

- If it has been prescribed by a registered medical practitioner, from its original container with the original label including the name of the child for whom it is prescribed, before the expiry or use by date or
- Form its original container, with the original label and instructions and before the expiry or use by date, and in accordance with any instructions attached to the medication or provided by a registered medical practitioner, either verbally or in writing.

Two staff, one of whom must be an educator, are responsible for the administration of any medication. At least one of these persons must hold a current approved First Aid qualification.

One person will check the details (including dosage and the identity of the child who is given the medication) and witness its administration, while the other person will administer the medication.

Before administering any medication to a child, it is extremely important for educators to check if the child has any allergies to the medication being administered.

2.4 **Procedure for administration of medication:**

- Wash and dry hands thoroughly before administering any medication. If appropriate, gloves are recommended wherever possible.
- Check the medication record to confirm date, time, dosage and the child to whom the medication is to be administered

- Check that prescription medication:
  - Is in its original container, bearing the original label and instructions
  - Is the correct medication, as listed in the medication record
  - Has the child's name on it (if the medication was prescribed by a registered practitioner)
  - Is the required dosage, as listed in the medication record
  - Has not passed its expiry date.
- Check that non-prescription medication:
  - Is in the original container, bearing the original label and instructions
  - Is the correct medication, as listed in the medication record
  - Has the child's name on it
  - Is the required dosage, as listed in the medication record
  - Has not passed its expiry date
- When administering the medication, ensure that:
  - The identity of the child is confirmed and matched to the specific medication the correct dosage is given
  - The medication is administered in accordance with the instructions attached to the medication, or any written or verbal instructions provided by a registered medical practitioner
  - Both staff members complete the medication record and store any remaining medication appropriately, such as in the refrigerator if required
  - One person will check the details (including dosage and the identity of the child who is given the medication) and witness its administration, while the other person will administer the medication and monitor the effect of the medication
  - Inform the parent/guardian on arrival to collect the child that medication has been administered and ensure that the parent/guardian completes the required details in the medication record

2.5 **Administration of medication for ongoing medical conditions**

Where a child is diagnosed with a condition that requires ongoing medication or medication to be administered in emergencies, parents/guardians may authorise the administration of the medication for a defined period. In these cases:

- A medical action plan completed by the child's doctor should be provided and displayed, where appropriate.
- Parents/guardians are also to complete a Medical Risk Minimisation and Communication Plan with the childcare coordinator
- The medical action plan should define:
- The name of the medication, dosage and frequency of administration
- Conditions under which medication should be administered
- What actions, if any, should be taken following the administration of the medication
- When the plan will be reviewed
- When medication is required under these circumstances, educators should:
- Follow the procedures listed above
- Ensure that the required details are completed in the medication record
- Notify the parents as soon as is possible

2.6 **Administration of paracetamol**

There may be times when a child develops a fever and/or becomes unwell while at CCC Early Learning Childcare. It is advisable in the first instance to contact the parent/guardian to discuss any concerns about the health status of the child, and taking a precautionary approach, requests the parent/guardian collect their child from CCC Early Learning Childcare as soon as possible.

If there is uncertainty if a child is unwell an educator with First Aid training can take the child's temperature to support decision making of whether a child should be collected and taken home.

While CCC Early Learning Childcare is waiting for an unwell child to be collected by the parent/guardian, educators will use precautionary measures, such as:

- Isolate the unwell child in an appropriate space with suitable supervision
- Encourage the intake of fluids, to keep the child cool, comfortable and well hydrated
- Practice hand hygiene, physical distancing and where possible utilise a face mask
- Face masks should not be used in situations where a child is unable to safely or practically tolerate a mask (e.g. a child with complex medical needs, including existing respiratory needs, and younger children)
- Follow cleaning procedures ensuring the area the child was waiting is disinfected

If parents/guardians request that educators/staff administer paracetamol, educators/staff should:

- Administer only to a child who has a temperature above 38.5°C and is in discomfort or pain
- If request/permission is given over the phone, two educators are required to hear the request/permission
- Administration of paracetamol is recorded in medication report and attached to the child's profile on Xplor
- Request the parent/guardian to collect their child as soon as possible
- Administer only one dose of paracetamol in any instance and ensure that the child has not had any other medicine containing paracetamol in the last four hours
- Use preparations that contain paracetamol only, not a 'cold and flu' or combined preparation
- Use only single doses, disposable droppers or applicators and only use once per child
- Be aware that there are numerous dose forms and concentrations in paracetamol for children and administer the most appropriate concentration and dose for the child who is being administered the paracetamol.

2.7 **Responsibilities**

The Approved provider and persons with management or control are responsible for:

- Ensure that all staff, parents and guardians have access to all CCC Early Learning Childcare policies and procedures
- Communicating with parents/guardians about the procedures outlined in this policy and the parent/guardian responsibilities when requesting medication be administered to their child, and making the medication record available for parents/guardians to record information during operational hours
- Ensuring that at least one educator on duty has a current approved first aid qualification, anaphylaxis management training and asthma management training (Note: this is a minimum requirement. As a demonstration of duty of care and best practice, ELAA recommends that all educators have current approved first aid qualifications, anaphylaxis management training and asthma management training.)
- Ensuring that all staff are familiar with the procedures for the administration of medication
- Ensuring that each child's enrolment form provides details of the name, address and telephone number of any person who is authorised to consent to medical treatment of, or to authorise administration of medication to the child
- Ensuring that medication is only administered to a child being educated and cared for by CCC Early Learning Childcare when it is authorised (written or verbal), except in the case of an anaphylaxis or asthma emergency
- Ensuring that a medication record meets the requirements set out in Regulation 92(3) and is always available for recording the administration of medication to children at the service
- Ensuring that all details in the medication record have been completed by parents/guardians/authorised persons in accordance with Regulation 92(3) prior to administering medication
- Ensuring that medication records are kept and stored securely until the end of 3 years after the last date on which the child was educated and cared for by the service

- Ensuring that the medication is administered in accordance with Regulation 95, and 96 if relevant
- Ensuring that medication is not accessible to children and is stored in a childproof container (including in the refrigerator for medications requiring refrigeration)
- Obtaining verbal authorisation for the administration of medication from the child's parents/guardians/emergency contact (as recorded in the child's enrolment record), or a registered medical practitioner or medical emergency services when an authorised person cannot reasonably be contacted in an emergency
- Ensuring that parents/guardians are given written notice as soon as is practicable if medication has been administered in an emergency and where authorisation has been given verbally
- Ensuring that the parent/guardian of the child and emergency services are notified as soon as is practicable when medication has been administered in an anaphylaxis or asthma emergency
- Being aware of children who require medication for ongoing conditions or in emergencies, and ensuring that the medical action plans are completed and attached to the child's enrolment form, and displayed for use by those caring for children (being sensitive to privacy requirements)
- Developing and reviewing procedures for the authorisation and administration of medication required for the treatment or management of long-term conditions
- Documenting situations in which an authorised person has provided verbal authorisation but has refused to confirm the authorisation in writing (these notes are to be kept with the child's enrolment record)
- Informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect medication or incorrect dose, staff forgot to administer the medication, or the medication was administered at the wrong time. Staff must also ensure that any medication that is accidentally dropped is not administered to a child or returned to the original container, and that parents/guardians are informed if an incident of this nature occurs
- Informing parents/guardians that non-prescribed medication (apart from sunscreen) will only be administered for a maximum of 48 hours, after which a medical action plan from a doctor will be required for its continued use
- Informing parents/guardians that paracetamol is not supplied by CCC Early Learning Childcare, and that the administration of paracetamol will be in line with the administration of all other medication

The Nominated supervisor and persons in day-to-day charge are responsible for:

- Ensure that all staff, parents and guardians have access to all CCC Early Learning Childcare policies and procedures
- Communicating with parents/guardians about the procedures outlined in this policy and the parent/guardian responsibilities when requesting medication be administered to their child, and making the medication record available for parents/guardians to record information during operational hours
- Ensuring that at least one educator on duty has a current approved first aid qualification, anaphylaxis management training and asthma management training (Note: this is a minimum requirement. As a demonstration of duty of care and best practice, ELAA recommends that all educators have current approved first aid qualifications, anaphylaxis management training and asthma management training.)
- Ensuring that all staff are familiar with the procedures for the administration of medication
- Ensuring that each child's enrolment form provides details of the name, address and telephone number of any person who is authorised to consent to medical treatment of, or to authorise administration of medication to the child
- Ensuring that medication is only administered to a child being educated and cared for by CCC Early Learning Childcare when it is authorised (written or verbal), except in the case of an anaphylaxis or asthma emergency

- Ensuring that a medication record meets the requirements set out in Regulation 92(3) and is always available for recording the administration of medication to children at the service
- Ensuring that all details in the medication record have been completed by parents/guardians/authorised persons in accordance with Regulation 92(3) prior to administering medication
- Ensuring that medication records are kept and stored securely until the end of 3 years after the last date on which the child was educated and cared for by the service
- Ensuring that the medication is administered in accordance with Regulation 95, and 96 if relevant
- Ensuring that medication is not accessible to children and is stored in a childproof container (including in the refrigerator for medications requiring refrigeration)
- Obtaining verbal authorisation for the administration of medication from the child's parents/guardians/emergency contact (as recorded in the child's enrolment record), or a registered medical practitioner or medical emergency services when an authorised person cannot reasonably be contacted in an emergency
- Ensuring that parents/guardians are given written notice as soon as is practicable if medication has been administered in an emergency and where authorisation has been given verbally.
- Ensuring that the parent/guardian of the child and emergency services are notified as soon as is practicable when medication has been administered in an anaphylaxis or asthma emergency
- Being aware of children who require medication for ongoing conditions or in emergencies, and ensuring that the medical action plans are completed and attached to the child's enrolment form, and displayed for use by those caring for children (being sensitive to privacy requirements)
- Developing and reviewing procedures for the authorisation and administration of medication required for the treatment or management of long-term conditions
- Documenting situations in which an authorised person has provided verbal authorisation but has refused to confirm the authorisation in writing (these notes are to be kept with the child's enrolment record)
- Informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect medication or incorrect dose, staff forgot to administer the medication, or the medication was administered at the wrong time. Staff must also ensure that any medication that is accidentally dropped is not administered to a child or returned to the original container, and that parents/guardians are informed if an incident of this nature occurs
- Informing parents/guardians that non-prescribed medication (apart from sunscreen) will only be administered for a maximum of 48 hours, after which a medical action plan from a doctor will be required for its continued use
- Clearly labelling non-prescription medications and over-the-counter products (for example sun block and nappy cream) with the child's name. The instructions and use-by dates must also be visible
- Informing parents/guardians that paracetamol is not supplied by CCC Early Learning Childcare, and that the administration of paracetamol will be in line with the administration of all other medication
- Ensuring medication is taken home at the end of each session/day. Unless the medication is stored at the service as part of the child's medical action plan.

The educators and all other staff are responsible for:

- Ensure that all staff, parents and guardians have access to all CCC Early Learning Childcare policies and procedures
- Communicating with parents/guardians about the procedures outlined in this policy and the parent/guardian responsibilities when requesting medication be administered to their child, and making the medication record available for parents/guardians to record information during operational hours

- Ensuring that all staff are familiar with the procedures for the administration of medication
- Ensuring that each child's enrolment form provides details of the name, address and telephone number of any person who is authorised to consent to medical treatment of, or to authorise administration of medication to the child
- Ensuring that medication is only administered to a child being educated and cared for by CCC Early Learning Childcare when it is authorised (written or verbal), except in the case of an anaphylaxis or asthma emergency
- Ensuring that a medication record meets the requirements set out in Regulation 92(3) and is always available for recording the administration of medication to children at the service
- Ensuring that all details in the medication record have been completed by parents/guardians/authorised persons in accordance with Regulation 92(3) prior to administering medication
- Ensuring that medication records are kept and stored securely until the end of 3 years after the last date on which the child was educated and cared for by the service
- Ensuring that the medication is administered in accordance with Regulation 95, and 96 if relevant
- Ensuring that medication is not accessible to children and is stored in a childproof container (including in the refrigerator for medications requiring refrigeration)
- Obtaining verbal authorisation for the administration of medication from the child's parents/guardians/emergency contact (as recorded in the child's enrolment record), or a registered medical practitioner or medical emergency services when an authorised person cannot reasonably be contacted in an emergency
- Ensuring that parents/guardians are given written notice as soon as is practicable if medication has been administered in an emergency and where authorisation has been given verbally
- Ensuring that the parent/guardian of the child and emergency services are notified as soon as is practicable when medication has been administered in an anaphylaxis or asthma emergency
- Being aware of children who require medication for ongoing conditions or in emergencies, and ensuring that the medical action plans are completed and attached to the child's enrolment form, and displayed for use by those caring for children (being sensitive to privacy requirements)
- Developing and reviewing procedures for the authorisation and administration of medication required for the treatment or management of long-term conditions
- Informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect medication or incorrect dose, staff forgot to administer the medication, or the medication was administered at the wrong time. Staff must also ensure that any medication that is accidentally dropped is not administered to a child or returned to the original container, and that parents/guardians are informed if an incident of this nature occurs
- Informing parents/guardians that non-prescribed medication (apart from sunscreen) will only be administered for a maximum of 48 hours, after which a medical action plan from a doctor will be required for its continued use
- Clearly labelling non-prescription medications and over-the-counter products (for example sun block and nappy cream) with the child's name. The instructions and use-by dates must also be visible
- Informing parents/guardians that paracetamol is not supplied by CCC Early Learning Childcare, and that the administration of paracetamol will be in line with the administration of all other medication
- Ensuring medication is taken home at the end of each session/day. Unless the medication is stored at the service as part of the child's medical action plan.

The parents/guardians are responsible for:

- Informing the educators if any medication has been administered to the child before bringing them to the service, and if the administration of that medication is relevant to or may affect the care provided to the child at the service
- Physically handing the medication to a staff member and informing them of the appropriate storage and administration instructions for the medication provided
- Ensuring that no medication or over the counter products are left in their child's bag.
- Providing a current medical action plan and completing Medical Risk Minimisation and Communication Plan with the childcare coordinator when their child requires long-term treatment of a condition that includes medication, or their child has been prescribed medication to be used for a diagnosed condition in an emergency
- Ensuring medication is taken home at the end of each session/day. Unless the medication is stored at the service as part of the child's medical action plan
- **The Contractors, volunteers and students:**
- Ensuring that medication is not accessible to children and is stored in a childproof container (including in the refrigerator for medications requiring refrigeration)
- Ensuring that the parent/guardian of the child and emergency services are notified as soon as is practicable when medication has been administered in an anaphylaxis or asthma emergency
- Being aware of children who require medication for ongoing conditions or in emergencies, and ensuring that the medical action plans are completed and attached to the child's enrolment form, and displayed for use by those caring for children (being sensitive to privacy requirements)
- Informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect medication or incorrect dose, staff forgot to administer the medication, or the medication was administered at the wrong time. Staff must also ensure that any medication that is accidentally dropped is not administered to a child or returned to the original container, and that parents/guardians are informed if an incident of this nature occurs
- Clearly labelling non-prescription medications and over-the-counter products (for example sun block and nappy cream) with the child's name. The instructions and use-by dates must also be visible
- Ensuring medication is taken home at the end of each session/day. Unless the medication is stored at the service as part of the child's medical action plan

3. Legislation and Regulations:

Regulations:

- Regulation 16
- Regulation 92 (3)
- Regulation 93
- Regulation 94
- Regulation 96
- Regulation 136
- Regulation 183 (2) (d)
- Regulation 160 (3) (iv)
- Regulation 175
- Regulation 176
- Regulation 183 (2) (d)

3.1 Legislation and Standard

Relevant legislation and standards include but are not limited to:

- Education and Care Services National Law Act 2010
- Education and Care Services National Regulations 2011
- Health Records Act 2001 (Vic)
- National Law: Section 174(2)

- National Quality Standard, Quality Area 2: Children's Health and Safety
- Occupational Health and Safety Act 2004 (Vic)
- Public Health and Wellbeing Act 2008 (Vic)
- Public Health and Wellbeing Regulations 2009 (Vic)
- Therapeutic Goods Act 1989 (Cth)

The most current amendments to listed legislation can be found at:
- Victorian Legislation – Victorian Law Today
- Commonwealth Legislation – Federal Register of Legislation

4. Definitions

4.1 **Approved first aid qualification**: The list of approved First Aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA

4.2 **Illness:** Any sickness and/or associated symptoms that affect the child's normal participation in the activities or program at the service.

4.3 **Infectious disease:** A disease that can be spread, for example, by air, water or interpersonal contact. An infectious disease is designated under Victorian Law or by a health authority (however described) as a disease that would require the infected person to be excluded from an education and care service.

4.4 **Injury:** Any harm or damage to a person.

4.5 **Medication:** Prescribed and non-prescribed medication as defined below.

4.6 **Non-prescribed/over-the-counter medication:** Refers to medicine that you can buy without a prescription, including vitamins and cultural herbs or homeopathic medications that may have been recommended by an alternative health care professional such as a naturopath.

4.7 **Prescribed medication:** Medicine, as defined in the Therapeutic Goods Act 1989 (Cth), that is:
- authorised by a health care professional
- dispensed by a health care professional with a printed label that includes the name of the
- child being prescribed the medication, the medication dosage and expiry date.

5. Sources

- Australian Children's Education and Care Quality Authority (ACECQA), Medication Record sample template: https://www.acecqa.gov.au/resources/applications/sample-forms-andtemplates
- Allergy & Anaphylaxis Australia
- Asthma Australia
- Department of Health
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011: www.acecqa.gov.au
- Guide to the National Quality Standard (ACECQA)
- Healthdirect
- Victorian State Government (February 2025), Pain management (acute) - children

5.1 Related Policies

- Acceptance and Refusal of Authorisation
- Administration of First Aid
- Child safe and Wellbeing

- Confidentiality policy and Guidelines
- Dealing with Infectious Diseases and including minimum exclusion periods
- Emergency and Evacuation
- Enrolment and Orientation
- Excursions and Incursions
- Incident, Injury, Trauma and Illness
- Responding to Medical Conditions – including anaphylaxis, allergies, asthma, & diabetes

Revision History

Date	Revision	Revised by
26/04/2024	Created	Huan-Ming Cholinski
14/06/2024	Revised	Huan-Ming Cholinski
22/02/2025	Reviewed and updated	Leanne Lee-Ack
29/08/2025	Reviewed and updated	Leanne Lee-Ack