



# BLACKWOOD PRIMARY SCHOOL

## OUTSIDE SCHOOL HOURS CARE



## Medication Policy

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### NQS

QA2	2.1.2	Health practices and procedures - Effective illness and injury management and hygiene practices are promoted and implemented.
	2.2.1	Supervision - At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

### National Regulations

Regs	90	Medical conditions policy
	91	Medical conditions policy to be provided to parents
	92	Medication record
	93	Administration of medication
	94	Exception to authorisation requirement - anaphylaxis or asthma emergency
	95	Procedure for administration of medication
	96	Self-administration of medication

### My Time, Our Place

LO3	Children take increasing responsibility for their own health and physical wellbeing
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### Aim

Our Service and our educators will only administer medication to a child if it is authorised or the child is experiencing an asthma or anaphylaxis emergency. We recognise it is essential to follow strict procedures for the administration of medication to ensure the health, safety and wellbeing of each child using the service.

### Related Policies

- Emergency Service Contact Policy
- Enrolment Policy
- Incident, Injury, Trauma and Illness Policy
- Medical Conditions Policy

# Implementation

Educators will only administer medication to children if it is authorised by parents or another person as authorised on the enrolment form. If there is a medical emergency, we will also administer medication when authorised verbally by a parent or another authorised person, medical practitioner or an emergency service, however we may administer medication during an asthma or anaphylaxis emergency without first receiving authorisation.

Medication under the Regulations includes medication covered by the Therapeutic Goods Act 1989. Therapeutic goods include those for therapeutic use to:

- prevent, diagnose, cure or alleviate a disease, ailment, defect or injury
- influence, inhibit or modify a physiological process.

This covers products like sunscreen.

The Nominated Supervisor will ensure a copy of this policy is provided to parents when they enrol their child. The policy will be placed on the school website and emailed to families of children with medical and health needs which require medication.

The Nominated Supervisor will ensure children's medication is regularly audited to ensure it has not expired and is in the original container with legible labels.

## **Administration of Medication (non-emergency)**

Educators will administer medication to a child if it complies with our policy requirements and:

1. if the medication is authorised in writing by a parent or another authorised person and
  - is the original container
  - has not expired
  - has an original label and instructions that can be clearly read and, if prescribed by a doctor has the child's name
  - is administered in accordance with any instructions on the label or from the doctor.
2. after the child's identity and the dosage of the medication is checked by an educator who is not administering the medication. This educator will witness the administration of the medication.

## **Over the Counter Medication (non-prescription medication)**

The service does not administer over the counter medication unless it has been prescribed by a medical practitioner. Medication may mask the symptoms of other, more serious illnesses and our educators are not qualified medical professionals.

## **Sunscreen**

The service provides sunscreen which children can apply themselves. It is requested that parents inform staff if their child/ren are sensitive to sunscreen and they will be required to provide their own. The sunscreen will need to be kept at the service with the child's name on it. If children who are sensitive to sunscreen do not provide their own suitable option, they will not be permitted outdoors when UV level is 3 and above.

## **Providing medication**

The parent/guardian is responsible for providing all medication, administration equipment and care plans, prior to the child commencing at the service (or if newly diagnosed, before the child's next attendance). Failure to provide the relevant information and medication will result in bookings cancelled until all requirements are provided. Anyone delivering a child to the service must not leave medication in the child's bag. Medication must be given directly to an educator on arrival for

appropriate storage. If this is not possible, the staff in consultation with the parent/guardian, should discuss and agree on safe methods of transport and transfer. (excluding controlled medication which must always be in person by an authorised adult). The service will only accept **one week's worth of controlled medication** for storage. The medication must be in an original pharmacy container with a pharmacy label.

### **Storage**

Auto injection devices (eg EpiPens) and asthma puffers will be stored in the OSHC Office so they are inaccessible to children. All other medication will be stored in accordance with the storage instructions on the medication in a labelled container in the medication cupboard of the oshc office or fridge. Non-refrigerated medication will be kept away from direct sources of heat. If medication is stored in the fridge, all educators working that shift/day must be informed. (documented in the staff communication folder). Controlled medication is stored in a locked cupboard in the OSHC Office.

### **Medication agreement**

When families provide a medication agreement, Educators must check that:

- all sections of the medication instructions are completed and match the pharmacy label on the medication
- requirements listed in the 'authorisation and release' section are completed and that parent/guardian details are entered.
- The agreement section must be completed by a health professional for medication that is a controlled drug. (eg Ritalin, dexamphetamine)

All medication agreements should be reviewed at least annually for continuing medication. When a review date has expired the medication agreement remains valid until an updated form is received as a review date is not an expiry/end date. However, when an end date is included on the form, the medication agreement is no longer valid when that date has passed and a new medication agreement must be completed and provided to the service.

### **Medication Requirements**

All medications must be provided in an original pharmacy container and have a pharmacy label with:

- child or young person's name
- date of dispensing
- name of medication
- strength of medication dose (how much to give)
- when the dose should be given
- other administration instructions (such as to be taken with food)
- expiry date (where there is no expiry date the medication must have been dispensed within the last 6 months).

### **Post administration observation**

Educators can observe and document behaviours post administration to advise the family. Observations can be documented on the DfE medication advice form which will need to be provided to the family and copied for service record.

### **Refusal to take medication**

Educators must encourage children to take their required medications and this may include more than one attempt, such as trying again at a later time or changing the location (for example not in the OSHC room or in view of other children).

When a child refuses to take their medication, the family must be notified immediately. Advice may be given by the parent/guardian for educators to attempt or the parent may wish to speak to the child. If required, the parent/guardian may need to attend the service to administer the medication. The Dfe Medication advice form must be completed by educators when the child has refused to take medication or the time administered was later than the specified time/time frame given.

### **Self-Administration of Medication by Children over Preschool Age**

The service permits children over preschool age to self-administer medication if this is authorised by the child's parent or another authorised person, for example self-administering asthma medication. This information will be detailed in the child's Medical Management Plan and Medical Conditions Risk Minimisation Plan if appropriate. The child's medication will be stored in the OSHC storeroom.

When the medication is due to be administered:

- educators will advise child to take their medication
- educators will supervise child administering the medication
- educators will complete a medication record

### **Administration of Medication in emergencies other than anaphylaxis or asthma emergencies**

1. Educators will administer medication to a child in an emergency:
  - if a parent or another authorised person verbally authorises the administration of the medication or
  - they receive verbal authorisation from a registered medical practitioner or emergency service if the parent or authorised person cannot be contacted.
2. The child will be positively reassured, calmed and removed to a quiet area under the direct supervision of a suitably experienced and trained educator.
3. The Nominated Supervisor will contact the child's parent/guardian, and provide written notice to the parent/guardian, as soon as possible.
4. The Nominated Supervisor will ensure the service completes an Incident, Injury, Trauma and Illness Record.

Educators will not administer medication if parents or authorised persons provide verbal authorisation in circumstances that are not emergencies. If educators are unsure whether they should be administering a medication in an emergency after receiving verbal authorisation from a parent or authorised person, educators will obtain authorisation from a registered medical practitioner or emergency service.

### **Administration of Medication during Anaphylaxis or Asthma Emergencies**

1. Educators may administer medication to a child in an anaphylaxis or asthma emergency without authorisation.
2. The child will be positively reassured, calmed and removed to a quiet area under the direct supervision of a suitably experienced and trained educator.
3. The Nominated Supervisor will contact the child's parent/guardian and the emergency services as soon as possible.
4. The Nominated Supervisor will advise the child's parent/guardian in writing as soon as possible.
5. The Nominated Supervisor will ensure the service completes an Incident, Injury, Trauma and Illness Record.

## Administration and Storage of Controlled Medication

The service requires all qualified staff to read and sign acknowledgment that they have read: "Medication Management Procedures" from the Department for Education:

<https://www.education.sa.gov.au/sites/default/files/medication-management-in-education-and-care-procedure.pdf>

The Nominated Supervisor and qualified staff who feel comfortable administering controlled medication must sign the department form: 'Authorisation to Administer Controlled Medication'.

Controlled medications are stored in the locked cupboard in the OSHC Office and a register is kept. Only authorised persons are to have access to controlled drugs. The authorised persons at the service are those that have completed the Authorisation to Administer Controlled Medication. All controlled drugs at the service must be recorded on the controlled drugs register. A stock count is required daily, endorsed with the names and signatures of two staff members (At least one qualified educator who is authorised however the second educator signature may be an unqualified staff member)

Educators must follow the checks and administration procedures:

- Medication Rights Checklist – Displayed with medication and also located with the medical information folder for each child who takes controlled medication.
- Medication Log (signed by two staff and the parent/guardian)
- Controlled Drugs Register (stock count)
- Medication Advice Form – Only required for Medication Error or Incident (eg refusal to take medication, wrong dosage, later time, observations of behaviours/side effects)

Educators must submit a message in the sign in/out app for parents to see staff upon drop off/collection of children to sign forms when required.

## Medication Rights (from Department for Education, SA website)

The following eight rights are the standard measures used at education or care services for safe administration practices. The Medication Rights document is displayed near the medication in the OSHC office for staff to refer to each time medication is administered.

- right **patient** (identification of 'child or young person')
- right **medication** to be given
- right **dose** (what is the child or young person's weight? how much medication is to be given?)
- right **strength** (administering the same amount of a medicine of a different strength will mean either over or under dosing the child or young person)
- right **route** (the path the medication is taken - topical, oral, inhaled)
- right **method** (are there special instructions for medication administration ie to be taken with food)
- right **time**
- right **documentation**

## Medication Record

Educators will complete a Medication Record with the name of the child which:

- contains the authorisation to administer medication or for the child to self-administer the medication

- details the name of the medication, the dose to be administered and how it will be administered, the time and date it was last administered, and the time and date or circumstances when it should be administered next
- if medication is administered to a child (including during an emergency), details the dosage that is administered and how it is administered, the time and date it is administered, the name and signature of the person that administered it, and the name and signature of the person that checked the child's identity and dosage before it was administered and witnessed the administration.
- if medication is administered by a child that is authorised to self-administer medication, details the dosage the child took and how, and the time and date it was taken.

The service uses the Medication Record template published by the national authority ACECQA [www.acecqa.gov.au](http://www.acecqa.gov.au) and for some students the Medication Log from the Department for Education.

## Resources

[www.education.sa.gov.au/supporting-students/health-e-safety-and-wellbeing/health-support-planning](http://www.education.sa.gov.au/supporting-students/health-e-safety-and-wellbeing/health-support-planning)

[www.education.sa.gov.au/supporting-students/health-e-safety-and-wellbeing/health-care-plans](http://www.education.sa.gov.au/supporting-students/health-e-safety-and-wellbeing/health-care-plans)

<https://www.education.sa.gov.au/supporting-students/health-e-safety-and-wellbeing/health-support-planning/managing-health-education-and-care/medication-management>

## Sources

Department for Education, South Australia

Education and Care Services National Law and Regulations, National Quality Standard

## Review

The policy will be reviewed annually by:

- OSHC Director/Assistant Director/Educators
- OSHC Advisory Committee/BPS Governing Council

REVIEWED	AMENDMENTS	NEXT REVIEW DATE
March 2020	Policy Package purchased by Centre Support, added service location of medication storage & links to resources	March 2021
October 2020	Added sections on medication agreement, controlled medication information, post administration, refusal to take medication, medication rights and further information from Health Support Planning from DfE	October 2021
June 2022	Updated storage location of medication to cupboard in OSHC Office  The parent/guardian is responsible for providing all medication, administration	June 2023

	<p>equipment [added following] and care plans, prior to the child commencing at the service (or if newly diagnosed, before the child's next attendance). Failure to provide the relevant information and medication will result in bookings cancelled until all requirements are provided.</p>	
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