



MEDICATION AND MEDICAL CONDITIONS POLICY

Rationale: The aim of The Queen Elizabeth Hospital Community Child Care Centre (TQEHCCC) Health Policy is to provide a healthy and safe environment for the mental, physical and emotional wellbeing of Child Care Educators and Children in their care.

‘It is important that nominated supervisors and educators are aware of the health requirements of all children and that there are effective processes to support and manage these.’ NQS 2.1.2 (National Quality Framework Resource Kit 2011) For more information please visit [National Quality Framework Resource Kit 2011](#)

This policy provides the guidelines governing provision of health care by Child Care Educators at The Queen Elizabeth Hospital Community Child Care Centre to children.

For families it provides an account of what action is required in managing childrens medical conditions or the event of a child being taken ill while at the Centre.

From the Educators viewpoint the existence of a written policy provides an explicit statement of responsibility and outlines guidelines for action in a variety of potential circumstances.

Education and Care Services National Regulations: 90 96;168(2)(d);177(b);177(c);178(b);178(c),181

For more information please visit [Early Childhood Education and Care Services National Regulations 2011](#)

Medication administration

- The Queen Elizabeth Hospital Community Child Care Centre will only administer prescribed medications.
- Over-the- counter medication (other than teething gel and nappy rash cream) will not be given to a child unless accompanied by a medical certificate stating the child’s name, the required dosage and the length of time the dose is required for.
- No medication will be given to a child unless in the original container and clearly labelled with the child’s name, prescribing doctor and dose.
- Medication will be administered strictly in accordance with the instructions on the Medication record by Child Care Educators that currently hold a Senior First Aid Certificate.

TQEHCCC – Medication and Medical Conditions Policy

References:

National Quality Framework Resource Kit

Education and Care Services National Regulations 2011

WHS Act 2011

St.John’s Ambulance Australia SA Inc.

Happy Valley Community Children’s Centre “Administration of Medication Policy and Procedure”.

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Reviewed: Sep 2012, Jan 2013, October 2013, October 2014 Oct 2015, Oct 2016

To be Reviewed: October 2018



Teething Gels

- The Queen Elizabeth Hospital Community Child Care Centre will only accept for use at the Centre teething gels which do not contain salicylates (aspirin). Currently The Women's and Children's Hospital brand of teething gel does not contain salicylates and is available at the Women's and Children's Pharmacy located within the Hospital on the ground floor in the Rieger Building.
- This will need to be prescribed

Nappy Rash Creams and Vaseline

- The Queen Elizabeth Hospital Community Child Care Centre will require families to provide their own prescribed by a Pharmacist or Medical Practitioner clearly labelled with the child's name.

Prescribed short term Medication

- The first **two** doses of any medication must be given at home. Children need to have had the medication over a 24 hour period before returning to the Centre.
- If children are receiving medication at home, but not at the Centre then the Centre should be advised of the nature of the medication, its purpose and any possible side effects it may have for the child while in care.
- No medication prescribed for anyone other than the particular child will be given and all medication must be marked clearly with the child's name, dose and frequency.
- Families must provide a clean measuring syringe for administration, to accompany the child's medication.
- Families must give written authority for medication to be dispensed by filling in the "Medication Record" Form, found in all rooms in their Medication Folder.
- Medication will be administered by a Diploma or Equivalent Qualified Permanent Child Care Educator. This educator will record accurately on the "Medication Record", the correct child, medication, time, dosage and their name. This procedure will be witnessed and signed by another Permanent educator.
- All medication needs to be given directly to a Child Care Educator and not left in a child's bag or locker.

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Ongoing medical conditions

If a child enrolled within our service has an existing, or develops a chronic illness or medical condition it is important to ensure that measures are taken to safeguard their health and safety while they are in attendance.

TQEHCCCC will work closely with families and professionals to develop a Medical Management plan (in the absence of an anaphylaxis or asthma plan) Which should be reviewed annually.

A risk minimisation and communication plan will be developed to ensure the condition is managed effectively. Families will complete this in consultation with the nominated supervisor/Director.

The Risk minimisation plan is designed to outline the condition and it's symptoms, possible causes, action and treatment and risks of the medical condition.

The communication plan is designed to encourage ongoing communication regarding the status of the medical condition and requirements between educators and parents in accordance with the strategies outlined within the plan.

Asthma

Educators at TQEHCCCC have current Asthma First Aid Training

When a child enrolled at the TQEHCCCC is diagnosed with asthma families are required to provide an Asthma Plan for their child and consult with the director to create a risk minimisation plan and communication plan.

Asthma Medication

Will be clearly marked with the child's name and stored individually with a copy of the child's action plan out of reach.

Only prescribed and approved asthma medication will be administered in accordance with the information on Child's Asthma Plan.

No medication prescribed for anyone other than a particular child will be given unless in an emergency in which the QEHCCCC centre emergency medication may be used.

Medication is to be administered (on a non-emergency basis) and is to be recorded accurately by the parent/guardian, in relation to time and dosage, and will be signed by an educator on its administration.

TQEHCCCC – Medication and Medical Conditions Policy

References:

National Quality Framework Resource Kit

Education and Care Services National Regulations 2011

WHS Act 2011

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Action Plans are to be updated annually.

In the event of a child having an asthma attack whilst at the Centre:

1. The child will be positively reassured, calmed and removed to a quiet area under the direct supervision of a suitably experienced and trained staff member.
2. Asthma medication will be administered as outlined in the child's Asthma Plan and risk minimisation plan.
3. The parent/guardian will be contacted by phone immediately if educators become concerned about the child's condition.
4. Medication may be administered without parental consent in an emergency situation, in this case parents will be contacted immediately, or as soon as it is safe to do so.
5. In the event of a severe attack, the Ambulance service will be contacted on 000 immediately and the 4 Step Asthma First Aid Plan will be implemented until Ambulance officers arrive.

Anaphylaxis

While not common, Anaphylaxis is life threatening. It is a severe allergic reaction to a substance. While prior exposure to allergens is needed for the development of true Anaphylaxis, severe allergic reactions can occur when no documented history exists.

The Queen Elizabeth Hospital Community Child Care Centre is not aware.

All educators will undertake EpiPen® training at least every three years as required by ACECQA

When a child enrolled at the TQEHCCCC is diagnosed with anaphylaxis families are required to Provide an Anaphylaxis Plan for their child and consult with the director to create a risk minimisation plan and communication plan.

A coloured photo of the child will be attached to the Action Plan by educators and this will be displayed in the child's room. A coloured photo of the child, information on their allergies and days on which they attend will be displayed in the Staff Room, food preparation areas and in all other rooms.

Action Plans are to be updated annually.

Anaphylaxis Medication

Will be clearly marked with the child's name and stored individually with a copy of the child's action plan out of reach.

Only prescribed and approved anaphylaxis medication will be administered in accordance with the information on Child's Plan.

In the event of a child having an anaphylactic reaction whilst at the Centre:

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1. The child will remain under the direct supervision of a suitably experienced and trained educator.
2. Anaphylaxis medication will be administered as outlined in the child's Anaphylaxis Action Plan.
3. An auto-injector device such as an EpiPen® will be administered in the event of a severe attack.
4. The Ambulance service will be contacted on 000.
5. Lay person flat and elevate legs. If breathing is difficult, allow to sit but do not stand.
6. Contact family.

NB: Medication may be administered without consent in an emergency situation. In this case parents will be contacted immediately, or as soon as it is safe to do so.

- Asthmatic and/or Anaphylactic medication will need to remain at the Centre in its own container clearly labelled, inaccessible to children.

Please see attached

Asthma action plan

Anaphylaxis Action Plan

Medical Management Plan

Risk minimisation Plan

Communication Plan

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