

ADMINISTRATION OF MEDICATION AND FIRST AID POLICY

Mandatory – Quality Area 2

AUTHORISATION

This policy was adopted by the Dawson Street Child Care Cooperative (DSCCC) Management Committee at its meeting on 23 August 2017.

REVIEW DATE

The policy will be reviewed every three years, with the next review date to be March 2020 or sooner if required.

PURPOSE

This policy clearly defines:

- Procedures to be followed if a child requires medication or first aid.
- Responsibilities of staff, parents/guardians and the Management Committee

POLICY STATEMENT

1. VALUES

Dawson Street Childcare Cooperative is committed to:

- providing a safe and healthy environment for all children, educators, staff and others attending DSCCC
- providing a clear set of guidelines in relation to the administration of medication and first aid at DSCCC responding to the needs of a child if the child is injured, becomes ill, or is traumatised while attending the Centre
- Ensuring safe and appropriate administration of medication in accordance with legislative requirements.
- ensuring that DSCCC has the capacity to deliver current approved first aid, as required.

2. SCOPE

This policy applies to the Management Committee, Director, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Dawson Street Childcare Cooperative, including during offsite excursions and activities.

3. BACKGROUND AND LEGISLATION

Relevant legislation and standards include but are not limited to:

- *Child Wellbeing and Safety Act 2005 (Vic)* (Part 2: Principles for Children)
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*
 - Specific Regulations: 87, 89, 92, 93, 94, 95, 96, 136, 137(1)(e), 168(2)(a).
 - Related Regulations: 90, 91, 160, 161, 162, 177, 181, 183, 184
- *Health Records Act 2001*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
 - Standard 2.1: Each child's health is promoted
 - Standard 2.3: Each child is protected

(1) Elements 2.1.1 and 2.1.4

(2) Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury

- *Occupational Health and Safety Act 2004*
- *Public Health and Wellbeing Regulations 2009*

4. DEFINITIONS

Approved first aid qualification: A list of approved first aid qualifications, anaphylaxis management and emergency asthma management training is published on the ACECQA website:

www.acecqa.gov.au

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

First aid: The provision of initial care in response to an illness or injury. It generally consists of a series of techniques to preserve life, protect a person (particularly if unconscious), prevent a condition worsening and promote recovery. First aid training should be delivered by approved first aid providers, and a list is published on the ACECQA website: www.acecqa.gov.au/qualifications/approved-first-aid-qualifications

First aid kit: The Compliance Code *First aid in the workplace*, developed by WorkSafe Victoria, lists the minimum requirements for a first aid kit. *First aid in the workplace* is available at

www.worksafe.vic.gov.au

Illness: Any sickness and/or associated symptoms that affect the child's normal participation in the program

Incident, Injury, Trauma and Illness Record: Contains details of any incident, injury, trauma or illness that occurs while the child is being educated and cared for by DSCCC. Any incident, injury, trauma or illness must be recorded as soon as is practicable but not later than 24 hours after the occurrence. Details required include the:

- name and age of the child
- circumstances leading to the incident, injury, trauma or illness (including any symptoms)
- time and date
- details of action taken by DSCCC including any medication administered, first aid provided or medical personnel contacted
- details of any witnesses
- names of any person DSCCC notified or attempted to notify, and the time and date of this
- signature of the person making the entry, and time and date of this.

These details need to be kept for the period of time specified in Regulation 183. A sample *Incident, Injury, Trauma and Illness Record* is available on the ACECQA website.

Infectious disease: A disease that could be spread, for example by air, water, interpersonal contact.

Injury: Any harm or damage to a person.

Medication: Any substance that is administered for the treatment of an illness or condition.

Medication record: Contains details for each child to whom medication is to be administered by DSCCC. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

Resuscitation flowchart: Outlines the six steps involved in resuscitation: danger, response, airways, breathing, compression and defibrillation. The Australian Resuscitation Council provides flowcharts for the resuscitation of adults and children free of charge at <https://resus.org.au/guidelines/flowcharts-3/>

Serious incident: An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from DSCCC in contravention of the regulations or is mistakenly locked in/out of DSCCC premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DET) must be notified within 24 hours of a serious incident occurring at DSCCC (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

5. SOURCES AND RELATED POLICIES

Sources

- Australian Children's Education and Care Quality Authority (ACECQA): www.acecqa.gov.au
- Australian Red Cross: www.redcross.org.au
- St John Ambulance Australia (Vic): www.stjohnvic.com.au
- *First aid in the workplace*: www.worksafe.vic.gov.au
- NHMRC(2005), *Staying Healthy in Child Care*, 4th edition, available at www.nhmrc.gov.au or email nhmrc.publications@nhmrc.gov.au or telephone 13 000 64672 to request a free copy.

DSCCC policies

- *Anaphylaxis Policy*
- *Asthma Policy*
- *Child Orientation and Enrolment Policy*
- *Dealing with Medical Conditions Policy*
- *Diabetes Policy*
- *Emergency Management and Evacuation Policy*
- *Excursions and Service Events Policy*
- *Food Safety and Hygiene Policy*
- *Illness, Infectious Disease and Emergency Care Policy*
- *Occupational Health and Safety Policy*
- *Supervision of Children Policy*
- *Water Safety Policy*

PROCEDURES

The Management Committee/Director is responsible for:

Medication

- ensuring that medication is not administered to a child being educated and cared for by DSCCC unless it is authorised, and the medication is administered in accordance with the procedures prescribed in Regulation 95
- ensuring that if a child over preschool age at DSCCC is permitted to self-administer medication (Regulation 96), an authorisation for the child to self-administer medication is recorded in the medication record for the child
- being aware of children who require medication for ongoing conditions or in emergencies, and ensuring that the medical management 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)

- ensuring that a medication record that meets the requirements set out in Regulation 92(3) is available at all times for recording the administration of medication to children at DSCCC (Regulation 92). (Refer to the template *Medication Record* (p.167) in the *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011* or visit http://files.acecqa.gov.au/files/national-regulations/NQF02%20Guide%20to%20ECS%20Law%20and%20Regs_web.pdf)
- 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 (Regulation 93(2))
- 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 (Regulation 94(2))
- informing parents/guardians as soon as is practicable if an incident occurs in which the child was administered the incorrect medication or incorrect dose as prescribed in the medication record, 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 paracetamol is not supplied by DSCCC and that the administration of paracetamol will be in line with the administration of all other medication
- ensuring that at least one educator on duty has a current approved first aid qualification (Regulation 136).
- developing and reviewing procedures for the authorisation and administration of medication required for the treatment or management of long-term conditions
- ensuring that all educators are familiar with the procedures for the administration of medication
- ensuring that medication records are kept and stored securely until the end of three years after the last date on which the child was educated and cared for by DSCCC (Regulation 183(2)(d))
- 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)
- ensuring that medication is not accessible to children and is stored in a childproof container (including in the refrigerator for medications requiring refrigeration)

First Aid

- ensuring that every reasonable precaution is taken to protect children at DSCCC from harm and hazards that are likely to cause injury (Section 167)
- ensuring that all educators' approved first aid qualifications, anaphylaxis management training and emergency asthma management training are current, meet the requirements of the National Act (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA (refer to *Sources*)
- assessing the first aid requirements for DSCCC. A first aid risk assessment can assist with this process (refer to Attachment 1 – Sample first aid risk assessment form)
- ensuring that at least one educator with current approved first aid qualifications (refer to *Definitions*) is in attendance and immediately available at all times that children are being educated and cared for by DSCCC (Regulation 136(1)(a)). This can be the same person who has anaphylaxis management training and emergency asthma management training, also required under the Regulations
- appointing an educator to be the **nominated Work health and safety officer**. This is a legislative requirement where there are 10 or more employees but is also considered best practice where there are fewer than 10 employees

- providing and maintaining an appropriate number of up-to-date, fully-equipped first aid kits that meet Australian Standards (refer to *Definitions*). The appropriate number of kits will depend on the number of children in DSCCC, the number of rooms and their proximity to each other, and distances from outdoor spaces to the nearest kit
- ensuring that first aid kits and first aid facilities meet DSCCC's obligations under the *Occupational Health and Safety Act 2004*. WorkSafe Victoria has developed a compliance code *First aid in the workplace* that provides guidance on how these obligations can be met.
- ensuring a risk assessment is conducted prior to an excursion to identify risks to health, safety, or wellbeing and specifying how these risks will be managed and minimised (Regulations 100, 101)
- providing and maintaining a portable first aid kit that can be taken offsite for excursions and other activities
- keeping up to date with any changes in procedures for administration of first aid and ensuring that all educators are informed of these changes.
- ensuring that the prescribed educator-to-child ratios are met at all times (refer to *Supervision of Children Policy*)
- advising families that a list of first aid and other health products used by DSCCC is available for their information, and that first aid kits can be inspected on request
- ensuring that first aid training details are recorded on each staff member's record
- ensuring safety signs showing the location of first aid kits are clearly displayed
- ensuring there is an induction process for all new staff, casual and relief staff, that includes providing information on the location of first aid kits and specific first aid requirements
- ensuring that parents are notified within 24 hours if their child is involved in an incident, injury, trauma or illness at DSCCC and recording details on the *Incident, Injury, Trauma and Illness Record* (refer to *Definitions*)
- ensuring that staff are offered support and debriefing following a serious incident requiring the administration of first aid (refer to *Incident, Injury, Trauma and Illness Policy*)
- ensuring a resuscitation flow chart (refer to *Definitions*) is displayed in a prominent position in the indoor and outdoor environments of DSCCC

The nominated Work health and safety officer is responsible for:

- maintaining a current approved first aid qualification (refer to *Definitions*)
- monitoring the contents of all first aid kits and arranging with the Director for replacement of stock, including when the use-by date has been reached
- disposing of out-of-date materials appropriately
- ensuring a portable first aid kit is taken on all excursions and other offsite activities (refer to *Excursions and Service Events Policy*)
- keeping up to date with any changes in the procedures for the administration of first aid.

Certified Supervisors and other educators are responsible for:

Medication

- ensuring that each child's enrolment form provides details of the name, address and telephone number of any person who has lawful authority to request and permit the administration of medication to the child (Regulation 160(3)(iv))
- administering medication in accordance with Regulation 95
- 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 details in the medication record have been completed by parents/guardians/authorised persons in accordance with Regulation 92(3) prior to administering medication
- obtaining verbal authorisation for the administration of medication from the child's parents/guardians/authorised person (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 (Regulation (93)(5)(b))
- ensuring that two staff members, one of whom must be an educator, are present when verbal permission to administer medication is received, and that details of this verbal authorisation are completed in the medication record
- ensuring that verbal permission is followed up with a written authorisation as soon as is practicable

First Aid

- implementing appropriate first aid procedures when necessary
- maintaining current approved first aid qualifications, and qualifications in anaphylaxis management and emergency asthma management, as required
- practicing CPR and administration of an auto-injection device at least annually (in accordance with other service policies)
- ensuring that all children are adequately supervised (refer to the *Supervision of Children Policy*) while providing first aid and comfort for a child involved in an incident or suffering trauma
- ensuring that the details of any incident requiring the administration of first aid are recorded on the *Incident, Injury, Trauma and Illness Record* (refer to *Definitions*)
- notifying the Director six months prior to the expiration of their first aid, asthma or anaphylaxis accredited training
- conducting a risk assessment prior to an excursion to identify risks to health, safety or wellbeing and specifying how these risks will be managed and minimised (Regulations 100, 101).

Parents/guardians are responsible for:

Medication

- ensuring that any medication to be administered is recorded in the medication record kept at DSCCC
- providing a current medical management plan 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 that the details of authorised persons are kept up to date in the child's enrolment form
- ensuring that prescribed medications to be administered at DSCCC are provided in their original container with the label intact, bearing the child's name, dosage, instructions and the expiry date (Regulation 95(a)(i))
- ensuring that prescribed medications to be administered at DSCCC are within their expiry date
- physically handing the medication to a staff member and informing them of the appropriate storage and administration instructions for the medication provided
- 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 that no medication or over-the-counter products are left in their child's bag or locker
- informing DSCCC if any medication has been administered to the child before bringing them to DSCCC, and if the administration of that medication is relevant to or may affect the care provided to the child at DSCCC

- ensuring that their child’s enrolment details are up to date, and providing current details of persons who have lawful authority to request or permit the administration of medication.

First Aid

- providing the required information for DSCCC’s medication record (refer to *Definitions*)
- providing written consent (via the enrolment record) for service staff to administer first aid and call an ambulance, if required
- being contactable, either directly or through emergency contacts listed on the child’s enrolment record, in the event of an incident requiring the administration of first aid.

Volunteers and students, while at DSCCC, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Director/ Administration Officer will:

- regularly check staff files to ensure details of approved first aid qualifications have been recorded and are current
- review the first aid procedures following an incident to determine their effectiveness

In order to assess whether the values and purposes of the policy have been achieved, the Management Committee will:

- monitor the implementation, compliance, complaints and incidents in relation to this policy
- monitor feedback from the nominated Work health and safety officer and those affected by the policy regarding its effectiveness
- keep the policy up to date with current legislation, research, policy and best practice
- consider the advice of relevant bodies or organisations such as Australian Red Cross, Stitches and St John Ambulance when reviewing this policy
- revise the policy and procedures as part of DSCCC’s policy review cycle, or as required.

Administration of Medication and First Aid Policy

Date Reviewed	Details of Changes (if any)	Date of Next Review
March 2017	Updated references and add attachments	March 2020
March 2014	New Policy – replaced Administration of Medication Policy and Administration of First Aid Policy	March 2017

Administration of First Aid Policy

Date Reviewed	Details of Changes (if any)	Date of Next Review
March 2014	Combined with Administration of Medication Policy – now known as Administration and Medication and First Aid Policy	Nil
August 2013	New Policy	August 2015

Administration of Medication Policy

Date Reviewed	Details of Changes (if any)	Date of Next Review
March 2014	<ul style="list-style-type: none"> – Combined with Administration of First Aid Policy – now known as Administration and Medication and First Aid Policy 	– Nil
June 2013	Update to Legislative framework and classification of the responsibilities of different parties.	January 2013
January 2010	Insertion of requirement of parents to give reason for administration of non-prescription medication.	January 2013
March 2008	Clarification of policy on administration of non-prescription medicine	June 2010

ATTACHMENT 1

Sample first aid risk assessment form

This template is used to assess the first aid requirements for DSCCC. Consultation is an important aspect of first aid risk assessment and management. The Management Committee, Director and educators/staff should use this as a guide only and may identify other areas specific to DSCCC

1.	How many people work at DSCCC (estimate for most days)?	21	
2.	How many children are enrolled at DSCCC?	56 per day	
3.	Do people regularly work in DSCCC after hours?	Yes	
4.	Do people work on their own after hours, including on weekends? If yes, approximately how many, how often and for how long at any one time?	Yes Cleaners 2 hours per day	
5.	Describe the nature of incidents, injuries or illnesses that have occurred in DSCCC over the past 12 months	We need to be aware of keeping floor areas clear to avoid slips, Fingers jamming in doors and drawers	
6.	Where is the nearest medical service and how long would it take to get an injured person to this service?	Brunswick Medical Centre – 678 Sydney Rd. 3 minutes by car.	
7.	Where is the nearest major hospital with a 24-hour accident and emergency service? How long would it take to get an injured person to this hospital?	Royal Melbourne and Childrens hospital. 10 minutes by car to Royal Melbourne	
8.	What type of, and how many, first aid kits are available at DSCCC?	4 3 permanent ones and 1 travel kit for excursions	
9.	Are the contents of first aid kits complete and up to date as per the contents list?	Yes	
10.	Where are the first aid kits located?	Kitchen and Adult and Children's bathrooms	
11.	How many current first aid officers are there at DSCCC?	2- Narelle Lawton & Lucy Luzza. Qualification are renewed in October annually	
12.	Identify and list specific hazards and where they may be located	Hazards Heaving lifting Chemicals Children Medication	Location Storeroom Laundry Program rooms Medication baskets

13.	Are there any specific hazards or health concerns that require specific first aid kits or treatment (such as anaphylaxis, asthma etc.)? If yes, list the particular hazards or health concerns and where the specific first aid requirements are kept	Hazards /health concerns Asthma Anaphylaxis	Specific first aid requirements Ventolin Epipen	Specific training required Asthma Epipen	Staff have appropriate training Yes Yes	Location of first aid equipment First Aid kits and medication basket in each room
14.	Is there an induction process for all new staff that includes location of first aid kits, specific first aid requirements and so on?	Yes				

Recommendations

Reference number	Recommendation	Responsibility and time frame

Names of those responsible for completing this form

Name: Narelle Lawton _____ Signed: _____ Date: **XXXXXX**

Name: Lucy Lizza _____ Signed: _____ Date: **XXXXXX**

Date for next review: March 2018