

## Health, Medication and Illness Policy

### RATIONALE

KAZ Early Learning Centre recognises that children may come to the service in good health; however may become ill during the day. Young children when grouped together in care and educational settings may be at a greater risk of cross infection than those in family settings.

Exclusion of infectious children significantly reduces the risk of the spread of illness and diseases to other healthy children and staff at the service. NHMRC provides recommended exclusion periods for services to adhere to; based on the time a child is deemed to be infectious to others KAZ Early Learning Centre adheres to these guidelines for the exclusion on children. (Refer to KAZ Early Learning Centre's *Immunisation and Infectious Diseases Policy*).

The Education and Care Services Regulations requires the children's service to keep a record of any illness and treatment given at the service. At the event of an infectious disease the service must also ensure the parent /guardian or authorised emergency contact is notified of the occurrence as soon as practicable.

**A Serious Incident** is the death of a child while being cared for or as a result of an injury received at the service, any incident involving injury or trauma to, or illness of, a child attending the service for which the attention of a medical professional was sought, or required the child to attend hospital; any circumstance where a child attending the service appears to be missing or cannot be accounted for, appears to be have taken/removed from the service by someone other than an approved person; or is mistakenly locked in or out of the premises or any part of the premises. A serious incident must be reported to the Early Childhood Education Directorate, NSW Department of Education within 24 hours of awareness of the incident (Education and Care Services National Regulations).

### WHO IS AFFECTED BY THIS POLICY?

Educators  
Child  
Staff  
Families  
Management

### AIMS

KAZ Early Learning Centre's aim is to facilitate effective care and health management of children who are taking medication for health problems, prevention and management of acute episodes of illness or medical emergencies by the safe administration of medication and compliance with the regulations.

To provide, at all times a healthy and safe environment for children, educators/staff and visitors of KAZ Early Learning Centre where risk of illness and injury is minimised.

To minimise the risk of cross infection within services by conforming to *National Health and Medical Research Council (NHMRC)* requirements for the exclusion for children with infectious diseases and other legislative requirements.

To facilitate effective and regulatory health management practices of children taking medications for health problems, prevention and management of acute episodes of illness or medical emergencies.

To ensure staff and parents/guardian understand the procedures involved if medication is to be given to a child in attendance.

## **PROCEDURE**

### **Definitions**

**Fever** is when the child's temperature remains at 38°C or above.

**Diarrhea** is when the bowel movements become more watery or more frequent than usual, or both. Diarrhea can often be accompanied by painful abdominal cramps and generalised weakness.

### **Administering Medication at the Centre**

At times Service educators/staff will be asked to take the responsibility of administering medication to children. The following procedures are to be followed at all times:

- The medication and the completed *Medication Authorisation Form* should be given to a permanent educator.
- Educators/staff will check the medication is within the use by date.
- Medication will not be administered to a child unless prescribed by a medical practitioner. If the medication is an over-the-counter drug including Homeopathic, Naturopathic, it must be accompanied with a letter from a medical practitioner stating the child's name, the dose required and the period for which this dose is required.
- Medication will not be administered to a child unless presented at the Service in the container in which it was dispensed. Educators/staff will check the container displays the dosage and times for medication.
- Written consent will be required by the parent/guardian/authorised nominee before medication will be dispensed to a child. Educators/staff will check the information on the completed *Medication Authorisation Form* corresponds with the information on the medication's pharmacy label and is in accordance with the doctor's instructions relating to administration.
- Two educators/staff members at all times will check the medication and dosage; and sign the Medication Authority Form once the medication has been administered.

It is the parent's / guardian's responsibility to ensure all medication is labelled and the information provided is able to be read by educators/staff.

- Short Term Medications.
  - This applies to medications that are only prescribed for a short period of time. Parents/guardians are to complete a Short Term Medication Authority Form when requesting that medication be given. The form is to include the child's name, plus the name of the medication, purpose and dosage of medication and the name of the prescribing doctor. This form is to be completed every day that the medication is required for each medication.
  
- Ongoing Medications
  - This applies to medications that may be prescribed for administration over a prolonged period on a regular basis, e.g. asthma preventatives. Parents/guardians are to complete a Long Term Medication Authority Form when requesting that medication be given accompanied with a letter from the doctor which outlines the health condition being treated, the purpose of the medication, instructions on its administration, side effects to monitor for, and an emergency or first aid care plan if relevant. This form must be renewed every six months or if there is any change to the medication, e.g. dosage to be given.
  
- All Medication Authority forms will be kept in a secure and confidential file until the child turns 25 years of age.
- All medication will be securely stored in the medication bag in the office, should the medications require refrigeration they will be placed at the back of the refrigerator on the top shelf, in a childproof container/bag. **No medication will be left in a child's bag.**
- If there is a disagreement between family members, including between custodial and a non custodial, Early Childhood Education Directorate, NSW Department of Education will be contacted for advice. No medication will be given until advice has been obtained by Early Childhood Education Directorate, NSW Department of Education.
- If in the event that a child refuses to take their medication, educator/staff member will not force them and parents/guardian will be contacted immediately.
- Medication will not be given if these guidelines are not followed.
- All medication will be cross checked and administered using the 5 rights:
  1. Right Child
  2. Right Medication
  3. Right Time
  4. Right Dose
  5. Right Manner (indicated on medication label and Authority Form i.e. with food)

A trained, permanent educator who holds a current First Aid Certificate is to administer the medication, and the procedure and documentation are to be witnessed and verified by a second educator.

Immediately before administering the medication both educators are to check that the instructions on the *Medication Authority Form* and the pharmacy label on the medication (detailing the child's name and doctor's instructions) are consistent. If there is any doubt the

Nominated Supervisor should contact the parent/ guardian and/or the prescribing doctor for further advice before medication is administered.

Hands are to be washed immediately before and after administering the medication. Both educators are to check that the correct dosage is being administered to the child. Once the medication has been administered, if it is one-off or short term medication will complete and sign the *Short Term Medication Authorisation Form*. In the case of ongoing medication educators will complete and sign the *Ongoing Medication Register*.

No medication will be administered for more than one week without further written advice from the child's doctor.

Where lotions or creams are to be applied, educators must wear gloves and use a fresh tissue/make up pad for each application.

Medication will not be administered if the *Medication Authorisation Form* has not been completed and signed by the parent / guardian.

If an educator/staff member feels doubt about the safety of administering any medication or treatment they should not administer the medication or treatment and refer the matter immediately to the Nominated Supervisor who will then seek advice from the parent/guardian and/or prescribing doctor.

In order to maintain confidentiality, educators/staff will ensure that *Medication Authorisation Forms* and *Registers* are kept in a secure place and are only available to the parent/guardian of the child concerned.

### **Children who become ill at the Service**

KAZ Early Learning Centre does not have the educators/staff or the facilities to individually care for children who are ill or become ill during the course of the day.

An unwell child is the responsibility of the parent or guardian. If signs or symptoms of illness are observed in a child throughout the day the parent/guardian will be contacted and asked to collect their child from the service. This is in order to minimise the risk of cross infection and to safeguard the wellbeing of all children.

Educators/Staff will control the spread of infection through appropriate hand washing for themselves and children and through cleaning of furniture, equipment and toys.

Educators/Staff will complete an *Incident, Injury, Trauma and Illness Report* and the *Illness Register*. The family will be notified and given a copy of this form upon arrival to collect their child or within 24 hours of the illness; a second copy will be placed in the child's file and original will remain within the *Illness Register*.

### **Exclusion of Children who are Ill**

Children cannot remain at the Service, and will not be able to attend for 24 hours after symptoms have ceased if they

- have a temperature 38°C or over;
- have had two episodes of diarrhea;
- vomit either at home or at the Service;
- have symptoms of an infectious disease;
- have commenced antibiotics (24 hours from the first dose administered); and
- are physically unwell that they are unable to actively participate in the Service program or require constant one on one attention from an educator/staff member.

### **Infectious Diseases**

The National Health and Medical Research Council Staying Healthy Preventing infectious diseases in early childhood education and care services Fifth edition must be adhered to whenever an infectious disease breaks out in the Service (Refer to *Notification Procedures in Infectious Disease Cases*).

Children, who have a contagious rash or illness, before returning to the Service, require a doctor's certificate stating they are no longer infectious.

The local Public Health Unit must be contacted whenever:

- Either educator/staff or children contract a vaccine preventable disease;
- Either educator/staff or children contract a notifiable disease; and
- There are two or more cases of an infectious disease in the Service.

Families are informed when an outbreak of an infectious disease occurs in writing by completing and displaying the *Infectious Disease Notification* form and providing information sheets to those at risk. Privacy and confidentiality must always be maintained. Where the infectious disease is potentially dangerous to expectant mothers or those not immunised educators/staff will inform families by phone where possible.

See also KAZ Early Learning Centre's *Immunisation and Infectious Diseases Policy*.

### **Children returning to the Service after an illness**

Educators may request a medical certificate stating the child is well enough to return to the Service. In the case of an infectious disease a doctor's certificate must be provided.

The Nominated Supervisor has the right to request the parents/guardians keep the child, who has been unwell, at home for another 24 hours if he/she regards this to be in the best interests of the child, other children and the educators/staff.

### **Head Lice**

Many head lice infestations cause no symptoms. Parents/guardians will be contacted if their child appears to have head lice. Educators/staff will provide parents with current information for the treatment of Head Lice.

Children are not excluded if effective treatment begins before the next day at the Service.

Should there be an outbreak, all parents/guardians in the service will be notified to check children's hair for head lice on a weekly basis, at home, using the recommended conditioner/combing detection method (See Head Lice Policy).

### **Taking a Child's Temperature**

To take a child's temperature, it is preferable to use a digital thermometer but an aural thermometer may be used and checked with a digital. If using a digital thermometer place the thermometer under the child's arm for at least 3 minutes. Follow the manufacturer's directions when using an aural thermometer.

### **Managing a Child with High Temperature Whilst at the Centre**

A high temperature in young children is often the first symptom of illness or infection. Young children are unable to explain symptoms if they feel unwell and therefore educators/staff must be alerted to signs and symptoms of illness. Children's temperatures can increase rapidly which may lead to febrile convulsions. Educators/staff must be aware of the child's overall appearance and symptoms when assessing a temperature.

Educators/staff should contact the parent/guardian or emergency contact person and inform them to collect the child from the Service as soon as possible, advising them to seek further medical advice from the child's doctor.

If a child has a temperature 38 degrees or above while at the Service, educators/staff should attempt to reduce the temperature by initially removing excess clothing, giving drinks of water to prevent dehydration and sponging the child down with lukewarm water if this will make the child feel more comfortable.

Parents/ guardians will be required on enrolment to sign *the Emergency Once Only Paracetamol Dose Authorisation* if they wish for their child to be administered paracetamol to reduce a temperature. Educators/Staff can only administer paracetamol if written authority has been received prior. Educators/parents are advised to seek further medical advice from the child's doctor if they have a fever as paracetamol may mask the symptoms of other illnesses.

### **Administering the a Once Only Dose of Paracetamol to reduce a fever**

In the case of an emergency, a child with a high fever, which may endanger the child's health if not controlled immediately, may be administered a **ONE ONLY** dose of paracetamol liquid by an Educator.

The following conditions must apply:

1. The child has a temperature of 38° C or more;
2. Other methods of lowering the temperature (such as sponging) have been attempted;
3. The *Emergency Once Only Paracetamol Dose Authorisation* has been signed by a parent/guardian of the child;
4. Adherence to the recommended dosage for the child's age/weight as printed on the packaging.
5. A written record is completed '*Emergency Once Only Paracetamol Dose Record*' by educators administering paracetamol;

6. An '*Illness Report*' is completed by educators and signed by the parent/ guardian.
7. Educators/staff will have attempted to contact the child's parent or emergency contact authorised to consent to administration of medication to gain verbal permission to administer the paracetamol; and
8. The parent/ emergency contact is contacted and requested to collect the child as soon as possible.

KAZ Early Learning Centre uses **Children's Panadol 1-5 years Colour Free** paracetamol. If you wish for your child to receive another brand of paracetamol parents/guardians must provide this and complete a *Medical Authorisation Form*.

When administering paracetamol to a child in an emergency, as consented by the parent/guardian educators/staff must:

- Ensure the parent/guardian understands they will still be contacted to take their child home or to a doctor on any occasion requiring the administration of paracetamol. The child must not return the next day;
- Check that the paracetamol is within its use by date before administering; and
- Administer the dose according to either the instructions on the bottle, or advice from a doctor or the child's *Medical Management Plan*.
- Complete all relevant forms

### **Managing a Child with a Febrile Convulsion While in Care**

In any circumstance when a child has had a convulsion (regardless of whether it is a febrile convulsion or a seizure due to another cause) and even if it stops, educators/staff should immediately **dial 000** for an ambulance and notify the parents/guardian. Ensure the child is kept under adult supervision at all times.

### **Managing a Child with a known Medical Condition**

KAZ Early Learning Centre's *Enrolment Form* asks parents/guardians whether the child has a diagnosed Medical Condition. If the answer is yes, the parents/guardians will be asked to have their Doctor complete an *Action Plan* or *Medical Management Plan* outlining the plan of action to avoid and treat a reaction. These forms are to be reviewed by the child's doctor every 12 months or each time the child's condition or treatment changes within this period.

If KAZ Early Learning Centre enrolls a child who is known to be diagnosed with a medical condition or is known to be at risk of a medical condition, educators/staff will:

- Ensure families provide information about the child's health, medications, allergies, their doctors' name, address, telephone number, and an *Action Plan* or *Medical Management Plan* from the doctor, following enrolment and prior to the child starting in the service; and
- Ensure a *Medication Authorisation and Record* is completed if administering medication is part of the child's *Medical Management Plan*.
- The Nominated Supervisor or their delegate is to complete the *Medical Risk Minimisation Plan* in consultation with the child's parent/ guardian. Educators/staff must be vigilant in ensuring the plan is followed and that they monitor the health status of the child with a medical condition.

## Medical Emergencies

**If emergency treatment or first aid is required** for a child with a medical condition, administer first aid or treatment in accordance with the child's *Medical Management Plan*, or a doctor or ambulance services instructions.

In case of an emergency it is acceptable to obtain verbal consent from a parent/guardian, or registered medical practitioner or emergency services if a parent cannot be contacted.

In case of anaphylaxis or asthma emergency, medication may be administered without authorisation. In these circumstances, the child's parent/guardian and emergency services must be contacted as soon as possible.

Medical records are to be securely stored by the service until the child is aged 25 years.

## Children Requiring an Ambulance

If a child becomes ill at the service and requires an ambulance, educators/staff will need to follow the *Procedure for a Child Requiring an Ambulance*.

The following forms must be completed if a child becomes ill at the service:

- *Incident, Injury, Trauma and Illness Report*
- *ACECQA Notification Of Incident I01 (When deemed a Serious Incident)* Accessed via the website [www.cecqqa.gov.au](http://www.cecqqa.gov.au)

## Serious Incident

The Supervisor on Duty who becomes aware of a serious incident (illness) involving a child attending the service must notify the Approved Provider and the Nominated Supervisor immediately.

The Supervisor must initially notify Early Childhood Education Directorate, NSW Department of Education by phone or email within 24 hours of the incident or the time that the person becomes aware of the incident or in the case of the death of a child, as soon as practicable but within 24 hours of the death, or the time that the person becomes aware of the death. In the case of the death of a child in care, the Police are to be called immediately.

The Supervisor must complete the form *ACECQA Notification of Incident I01* and together with a copy of the *Incident Injury Trauma Report*, send to the Approved Provider and the Nominated Supervisor who will then sign and forward to the Early Childhood Education Directorate, NSW Department of Education within 24 hours.

## When to Complete the Form I01 for illness

- The death of a child while being educated and cared for by the service, or following an incident while being cared for by the service.
- Injury or trauma to, or illness of, a child for which the attention of a registered medical practitioner was sought, or ought reasonably to have been sought; or the child attended, or ought reasonably to have attended, a hospital.
- Attendance of emergency services at the education and care service premises was sought, or ought reasonably to have been sought.

## Transportation of children

Under no circumstances are educators/staff to transport children by car.



In the case of an accident or serious illness, educators/staff must ring an ambulance to transport the child to hospital for treatment.

Children are to be accompanied by an educator nominated by the Supervisor on Duty if the parents/guardians or the emergency contact person(s) are unavailable. If a child is transported by ambulance, the Approved Provider and the Nominated Supervisor are to be contacted immediately informing them of the situation and whether or not the service will be below minimum staff ratios.

Siblings or children of the person travelling in the ambulance are to remain at the service with educators/staff until a parent or emergency contact person(s) collects them. If educators/staff are unable to contact any of the listed people they will contact the police.

**KAZ Early Learning Centre Related Policies and Procedures:**

Enrolment and Orientation  
Food Safety and Nutrition  
Immunisation and Exclusion  
Hygiene and Infection Control  
Anaphylaxis and Allergies  
Asthma Management

**Appendices:**

Enrolment Form  
Incident Injury Trauma and Illness Report  
Illness Register  
Emergency Once Only Paracetamol Dose Record  
Medication Authorisation & Record  
Medical Management Plan  
Procedure for a Child Requiring an Ambulance.  
Infectious Diseases in Childhood  
Notification of Infectious Diseases

**Australian Children's Education and Care Quality Authority (ACECQA)**

<http://www.acecqa.gov.au/>

**Children (Education and Care Services) National Law (NSW) 104a**

<https://www.legislation.nsw.gov.au/#/view/act/2010/104a/full>

**Department of Education**

<http://www.dec.nsw.gov.au/what-we-offer/regulation-and-accreditation/early-childhood-education-care>

**Early Years Learning Framework (EYLF)**

<http://www.legislation.nsw.gov.au/#/view/regulation/2011/653>

**Education and Care Services National Regulations**

[http://files.acecqa.gov.au/files/National-Quality-Framework-Resources-Kit/belonging\\_being\\_and\\_becoming\\_the\\_early\\_years\\_learning\\_framework\\_for\\_australia.pdf](http://files.acecqa.gov.au/files/National-Quality-Framework-Resources-Kit/belonging_being_and_becoming_the_early_years_learning_framework_for_australia.pdf)

**National Quality Framework (NQF)**

<http://acecqa.gov.au/national-quality-framework/>

**The NSW Department of Health, Some infectious Diseases in Children Guidelines**

**The Children's Hospital at Westmead** [www.chw.edu.au](http://www.chw.edu.au)

**NSW Public Health Act 1991** – Sect 42C & 42D The NSW Department of Health: *Some infectious Diseases in Children Guidelines*

**The Children's Hospital at Westmead** [www.chw.edu.au](http://www.chw.edu.au)

[www.health.nsw.gov.au](http://www.health.nsw.gov.au)

**NHMRC Recommended minimum Exclusion Periods adapted from Staying Healthy 5<sup>th</sup> Edition**

[https://www.nhmrc.gov.au/files\\_nhmrc/publications/attachments/ch55e\\_exclusion\\_period\\_poster\\_130701.pdf](https://www.nhmrc.gov.au/files_nhmrc/publications/attachments/ch55e_exclusion_period_poster_130701.pdf)

NHMRC Staying Healthy- Preventing infectious diseases in early childhood education and care services Fifth edition 2012

**REVIEW**

This policy will be updated to ensure compliance with all relevant legal requirements every year. Appropriate consultation of all stakeholders (including staff and families) will be conducted on a timely basis. In accordance with Regulation 172 of the *Education and Care Services National Regulation*, families of children enrolled will be notified at least 14 days and their input considered prior to any amendment of policies and procedures that have any impact on their children or family.

<b>Amendment</b>		Updated Web links	
<b>Date Issued:</b>	October 2019	<b>Review Date:</b>	October 2020

Family, Educator and Staff Comments: