

# HEALTH, MEDICATION AND WELLBEING PROCEDURE

<b>Policy Hierarchy link</b>	Children (Education and Care Services National Law Application) Act 2010 Education and Care Services National Regulations 2011: 85, 88, 90, 95 Australian Government Department of Health and Aging, National Immunisation Program Schedule (Aust), July 1 <sup>st</sup> 2013		
<b>Responsible Officer</b>	Vice-President, Campus Life and Community Engagement		
<b>Contact Officer</b>	General Manager – <a href="mailto:j.carlisle@unsw.edu.au">j.carlisle@unsw.edu.au</a> 9385 1708		
<b>Superseded Documents</b>	Children’s Health, Medication and Wellbeing procedure		
<b>File Number</b>	Contact the <a href="#">Records &amp; Archives Office</a> .		
<b>Associated Documents</b>	Infectious Diseases Procedure, Medical Conditions Procedure, Sleep And Rest Procedure		
<b>Version</b>	<b>Authorised by</b>	<b>Approval Date</b>	<b>Effective Date</b>
3.0	Early Years Management	June 2016	July 2016

## 1. Purpose and Scope

The primary role of this procedure is a preventative one. Our aim is to minimise the risk of spreading infection which in turn reduces impact to all members of the Early Years communities.

For children, this procedure aims to support their requests and rights to rest at home when they are unwell.

For educators working within the campus, this aims to support their rights to a safe and respectful work place as well as expectations regarding safe work conduct.

For families whose children are not unwell this aims to support them to remain well.

For all members of the campus’s community this aims to provide a clear guideline on the processes for implementation.

As the UNSW Early Years Campuses do not have the facilities, or specialised staffing or one to one adult ratios required to care for sick children, parents/guardians will be responsible for caring for their unwell child.

For parents and staff this procedure provides a statement of responsibility. It outlines what action will be taken should a child arrive at the campus unwell or become unwell during the day. It also explains procedures for administration of medication that may be required whilst a child is in the campus.

Further, it sets out the circumstances under which parents/guardians will be asked to keep their child away from the Campus whilst their child is unwell and when a doctor’s certificate will be requested.

## **2. Definitions**

### **Well Children**

Well children are able to participate in the general routine of the campus. This includes the ability to engage with their peers and the adults in their room as well as within the program of the day.

Well children are able to meet expectations of being a part of a group.

### **Unwell Children**

Unwell children may have a contagious illness; they may be teething, unusually tired, coughing excessively, have excessive mucus discharges. They will not be able to cope adequately with usual campus routines and experiences. They may require one on one support from an educator.

## **3. Procedure**

Children should not be brought to the Campus if they have an infectious illness or are unable to cope with the usual routine and expectations of group care.

The wellbeing of the entire campus community is paramount to this procedure being followed.

### **3.1 Family responsibilities**

**In line with the scope of this procedure, families will:**

- ensure that their child is well enough to be in group care and if not make alternative arrangements for their child;
- contact the campus to inform them of their child's illness including type of illness, timing of illness and expected absence;
- contact the service by phone if in doubt about their child being well enough to attend the campus;
- not bring their child to the campus if they have administered medication to suppress symptoms such as paracetamol for a temperature;
- consider work/ study commitments as a secondary priority in the instance when their child is unwell;
- respect the wishes of other families within the campus to keep unwell children out of group care.

### **3.2 Campus responsibilities**

**In line with the scope of this procedure, campus staff will:**

- inform all new families of this policy prior to commencement;
- regularly review the policy in line with national recommendations;
- regularly remind staff and families of the procedure and any changes as they are made;
- put the rights of the unwell child at the campus of the decision making;
- follow the documented procedure to ensure the wellbeing of the entire community.

### 3.3 If a child becomes unwell during the day

- Appropriate care will be taken to ensure the child's immediate needs are met.
- Where possible the child will be moved away from peers to minimise possibilities of cross infection.
- The child's primary contact educators will discuss the illness with Responsible Person and a decision will be made if the child needs to go home to rest and recover.
- A family member will be contacted to collect the child from the campus within the hour. Emergency contacts should also be available to collect the child from the campus within the hour if a family member is not able to do so.
- Staff will inform the family of minimum exclusion period for that illness.
- The Responsible Person may request a Doctor's Certificate clearing the child's health prior to their return to the campus. (Such a certificate will not override the campus's discretion to exclude the child from attendance.)

A child, whose illness is infectious to others, is not permitted to attend until they are no longer contagious. Please see **INFECTIOUS DISEASES PROCEDURE 3.5 Excluding Sick Children**.

### 3.4 Raised temperatures

A typical body temperature for a child is 36.5 degrees Celsius. It is noted that for some children their usual temperature may be different to this.

A child's temperature will be taken if the child does not seem to be engaging as they usually would within the program. It is expected that educators know the child well within the context of their setting and they will make a decision to take a child's temperature when they suspect they are not well or the child tells them so.

A child's body temperature often fluctuates markedly during the course of an infection. A common pattern is for a child to develop a high temperature during the course of the night and then to appear well the next morning. During the day, however, the child's temperature may once again rise.

- If a child's temperature is between 37.5 - 37.9 degrees Celsius, the family will be contacted to inform them that their child has a low grade temperature.
- If a child's temperature becomes 38 degrees Celsius or greater the family will be contacted and it be required that the child be collected within an hour.

**Staff will not administer Paracetamol unless a medical practitioner has prescribed it for special medical conditions such as susceptibility for febrile convulsions.**

The campus will keep Paracetamol on hand if parents wish to administer it to their child when they come to collect them.

If parents or emergency contacts cannot be contacted and the temperature continues to increase, the child will be taken to the Sydney Children's Hospital in Randwick by ambulance.

If your child has been sent home with a temperature, they must remain at home for the entirety of the following day to ensure they are completely well. It is important that the child's temperature be 'normal' for at least 24 hours and that there is no sign of illness before returning to the Campus. This will reduce the possibility of cross infection with other children, as temperatures can often be the first sign of an illness. This also allows the child greater possibility to fully recover.

We appreciate your support in helping us to provide an environment that is safe and healthy for all children, staff and families within the community.

### **3.5 Medication**

UNSW Early Years will only administer prescribed medications. The medication must be in its original container, must be within its use-by-date and prescribed to that child. The prescription label should be attached to either the box or bottle and must be brought in for the medication to be administered.

Families should request from their doctor a slow release prescription medication so that administration can occur at home and with minimum dosages given at the campus.

Over the counter preparations will not be administered unless specifically prescribed by a medical practitioner. The doctor must provide a letter each time such medication is to be administered.

#### **3.5.1 Short Term Prescribed Medication**

An Early Years medication form must be completed by the family when medication is required to be administered at the campus.

This form must be signed by the child's educator before medication is left at the campus.

Staff will confirm that the form is completed and in line with the prescription.

Children must have been taking their prescription medication for at least 24 hours before returning to the campus if unwell.

A child must also be well enough to participate in the campus's routine in order to attend.

#### **3.5.2 Long Term prescribed medication**

Where medication for the treatment of long-term condition is required, either intermittently or on a continuous basis, the above conditions also apply. In this case a special medication form and/or medical action plan must be completed by the child's medical practitioner.

This form will be updated by the family and medical practitioner at least annually.

#### **3.5.3 Procedure for Administering Medication**

- The family will complete a medication form for their child which includes: the child's name, name of medication, dosage and required time of administration. The required administration time will be updated daily by that family.
- Educator will confirm that the form is completed accurately.
- Only permanent staff members will administer medication to children.
- Medication will be administered as per the medical practitioner's directions.
- Medication will be administered to children individually.

#### **Permanent staff member in the room with a second staff member as witness will:**

- Check that the name on the bottle and the medication form is related to that child.
- Check that the medication has not expired.
- Check the dosage prescribed is written on the bottle or the box.
- Measure the correct dosage.
- Give medication to the child

- Both staff to watch the child take the medication.
- Both staff will sign the medication form immediately.
- One staff member will return the medication to the required location which will be out of reach of the children and be refrigerated if required.

### **3.6 Asthma**

Asthma can be a life threatening illness. People with asthma can engage in all activities so long as the asthma is being appropriately managed. Staff will follow children's asthma action plans and be observant of their wellness. People who require their reliever medication more than 4 hourly are not well enough to be in attendance at the campus.

### **3.7 Teething**

The teething process can be quite painful and is often a difficult period for the child and parents. In extreme cases, the child may demand the full-time attention of a parent/caregiver. In this instance, staff at the campus may request that the child be kept at home until the most severe symptoms have passed. The campus will not administer paracetamol; ibuprofen or teething gel.

### **3.8 Adverse reaction to Vaccinations**

Some people have adverse reactions to vaccinations. Often the site of the injection is sore for that day. It is recommended that when possible vaccinations are scheduled at a time when it will not impact on their attendance at the campus for example on a Friday afternoon. Children may not be well enough to attend the campus following the injection.

### **3.9 Sleep and rest**

Sleep and rest are important for physical recuperation and growth, the immune system and brain development.

The campus is to ensure that sleep and rest equipment is safe and age appropriate and based on current advice from recognised authorities such as 'SIDS and Kids' and The Australian Competition and Consumer Commission (ACCC).

### **3.10 Jetlag**

Children or staff who have jetlag are often not able to engage typically within the campus's routines and expectations. Due consideration should be given upon return from an overseas or interstate trip to ensure that they are ready to engage in the group setting. Staff will not be available to keep children from sleeping. Children should not return to the campus immediately following such travel until they have had adequate time to return to their usual daily routines.

### **3.11 International travel and epidemics or pandemics**

See University Health services website <http://www.healthservices.unsw.edu.au/> for most current information regarding overseas travel. Also see Infectious Diseases procedure.

### **3.12 Alcohol, Drugs and Tobacco**

All Early Years Campuses are Alcohol, Drug and Tobacco Free zones. This requirement applies to all campus users – staff, families, students and volunteers. Staff, students and families will not be permitted onto the premises when affected by drugs or alcohol. At times exceptions may be made for the responsible servicing of alcohol for adult only functions which occur on the campus out of the usual operational hours of the campus.

### 3.13 Information sharing

The Campus will distribute information issued by the Department of Health and the National Health and Medical Research Council (NHMRC) to promote accurate information to parents about infectious diseases and other health issues.

## 4. Review & History

## 5. Acknowledgements

### Legal and Policy Framework

Australian Government Department of Health and Aging, National Immunisation Program Schedule (Australia), 1 July 2013.

### Acknowledgements and associated documents

Staying Healthy in Child Care: Preventing infectious diseases in Child Care, 5<sup>th</sup> Ed, 2013

Families of UNSW Early Years who provided written feedback to the procedure (September 2014)

Children of UNSW Early Years who provided verbal information and input into what they would like when they or their friends are unwell. (September 2014)

Educators at UNSW Early Years who assisted with the review policy through verbal and written feedback. (September 2014)

UNSW Health Services <http://www.healthservices.unsw.edu.au/>

UNSW Early Years Staff Handbooks

## Appendix A: History

The authorisation and amendment history for this document must be listed in the following table. Refer to information about [Version Control](#) on the Policy website.

Version	Authorised by	Approval Date	Effective Date	Sections modified
1.0	Vice President, University Services	11 November 2013	11 November 2013	
2.0	Early Years Management	26 September 2014	27 October 2014	
3.0	Early Years Management	June 2016	July 2017	Changed procedure name 3.9 added 3.12 added 3.8 amended