

**WELCOME** **COMMUNITY EVENTS**



**Keeping Children's Records In FDC**

- **Child Assessments:** Until the end of 3 years after the child's last attendance
- **Incident, Injury, trauma, and illness Record:** Keep the record until child is 25
- **Medication Record:** Until the end of 3 years after the child's last attendance
- **Child Attendance:** Until the end of 3 years after the child's last attendance
- **Child Enrolment:** Until the end of 3 years after the child's last attendance
- **Death of a child whilst being educated and cared for at service:** Keep the record until 7 years form child's death

**Around the country**

Homeless Persons Week -----	1-7
Dental Health Week -----	1-7
National Aboriginal & Torres Islander Children's Day -	4
International Day of the World's Indigenous People --	9
International Youth Day -----	12
World Elephant Day -----	12
National Science Week -----	13-21
Keep Australia Beautiful Week-----	15-21
Book Week -----	20-26



**NATIONAL ABORIGINAL & TORRES STRAIT ISLANDER CHILDREN'S DAY – AUGUST 4**

Children's Day is a time for Aboriginal and Torres Strait Islander families to celebrate the strengths and culture of their children. The 2022 theme for Children's Day is 'My Dreaming, My Future'. Aboriginal and Torres Strait Islander children are born into stories of their family, culture, and Country. They carry with them the song lines of their ancestors and culture, passed down by generations. Their Dreaming is part of our history, while their futures are their own to shape. [Find out more here](#)

**INTERNATIONAL DAY OF THE WORLD'S INDIGENOUS PEOPLE – AUGUST 9**

'The Role of Indigenous Women in the Preservation and Transmission of Traditional Knowledge'. Is the theme for 2022. Indigenous women are the backbone of indigenous peoples' communities and play a crucial role in the preservation and transmission of traditional ancestral knowledge. [Find out more here.](#)

**National Science Week -August 13-21**



National Science Week is Australia's annual celebration of science and technology. Running each year in August, it features more than 1000 events around Australia, including those delivered by universities, schools, research institutions, libraries, museums and science centres. These events attract a wide audience from children to adults, and science amateurs to professionals. Over one million people participate in science events across the nation.

# Medication in Child Care

*It is not uncommon for children to be in child care for up to 10 hours per day. Families rely on teachers and providers to safely administer the medications their children need to stay healthy.*

## Practice Precautions

- Medication needs to be in its original, labeled bottle.
- Do not allow parents to add medication to food or drink, including bottles. Formula needs to be sealed when it arrives at your program.
- Never give medicine that was not measured and prepared by you.
- Remember to keep accurate medication records for each child.

## Prevent Medication Errors

- Any violation of the “six rights” of medication administration is a medication error. This can result in a life threatening situation.
- Call poison control center immediately **1-800-222-1222**.
- Record all errors on child incident/injury form; one copy for parent/guardian and an original in the child’s file.

## Medication Record—Document Every Time!

- Child’s first and last name.
- Name of medication.
- Amount of medication to be given (Dose).
- How the medication is to be administered (Route).
- Date(s) and time the medication should be given.
- Signature of the individual who gave the medication.

### USE THE “SIX RIGHTS” OF MEDICATION ADMINISTRATION

<b>Right Child</b>	Verify the child’s name is on the: <ul style="list-style-type: none"><li>• Medication authorization form</li><li>• Medication record</li><li>• Medication label</li></ul>
<b>Right Medication</b>	<ul style="list-style-type: none"><li>• Compare medication with child’s medication record.</li><li>• Be alert for medicines that look-alike and sound-alike.</li></ul>
<b>Right Dose</b>	<ul style="list-style-type: none"><li>• Use correct measuring device for each medication.</li><li>• Verify correct dosage.</li><li>• Confirm that child receives the full dose of medication.</li></ul>
<b>Right Time</b>	<ul style="list-style-type: none"><li>• Give medicine at correct dosage spacing.</li><li>• Confirm with parent/guardian when the last dose was given.</li><li>• Medicine can be given 15 minutes before or after the prescribed time.</li></ul>
<b>Right Route</b>	<ul style="list-style-type: none"><li>• Determine the correct route (oral, respiratory, topical, injection, rectal) for the medication.</li><li>• Follow any special instructions (take with food, etc).</li></ul>
<b>Right Documentation</b>	<ul style="list-style-type: none"><li>• Know what, when, and how to document after administering medication.</li></ul>

### KNOW ABOUT THE DIFFERENT MEDICATION TYPES

<b>Tablets</b>	Solid dose of medication
<b>Capsules</b>	Medicine inside a gel-like container
<b>Liquids</b>	Syrups, elixirs, emulsions, suspensions
<b>Other</b>	Suppositories, inhalants, drops, topical creams/ointments or salves



## STORE MEDICINES SAFELY AND PROPERLY

### Storing

- Completely inaccessible to children.
- Stored away from food or chemicals.
- Stored in original container with name and instructions.
- Stored at proper temperature.
- Use child-resistant packaging.
- Stored upright to prevent spillage.
- Use labeled, zip-lock bag for each child's medication.
- Medication storage devices should be secure and cleanable.
- Do not freeze medication unless instructed.



### Handling

- Do not accept medication if label is altered or torn.
- Do not accept medication that has another person's name on the label.
- Always read the entire medication label.
- Some medications are controlled substances regulated by the federal government and increase risk of liability.
- Document any time a medication dose is omitted and the reason for omission.

### Transporting

- Medication must be handed to parent/guardian and have them sign and date the medication record to verify the return.
- Do not return medication to parent/guardian in a backpack/bag.
- Do not give medication to an older child to transport.
- Do not transport emergency medication between child and home (have one for home and one for child care).



### Keep Emergency Medication Onsite

- Emergency medication (e.g., asthma inhalers, Epi-Pens, or diabetes medications) must be **"where the child is"** at all times (classroom, outside, on a field trip).
- Must be immediately accessible to adults and not locked in storage. Remember to keep it out of children's reach.

## Medication Policies Should Include

- Required authorization of a health care provider.
- Written authorization forms completed by an individual child's parents or guardian.
- Process of accepting medication from parents or guardians.
- Procedures for administering medication.
- Handling and storage of medications.
- Returning medication to parents or guardians.
- Disposal of medications that cannot be returned.
- Maintenance of a medication administration record.

## Proper Handwashing Procedure

- Wet hands
- Apply soap (not antibacterial)
- Rub hands together (20 seconds)
- Rinse hands
- Dry hands
- Turn off water using paper towel
- Throw disposable towel away

Germ from your hands can be transferred to children when you give them medicine.



When you will be chosen as one of the educators who will be visited by an assessor as part of the ratings process, you may feel comfortable and eager to show the education and care you provide in your home, or you may feel nervous and uncertain. You know that the service's rating is partly based on what happens when the assessor is visiting you and you want to show your service at its best. That is where this below topic comes in. It clearly explains what you can say to the assessor, what you can show them and what they should be able to see in your practice and in your environment, to ensure that they know you are meeting (or exceeding) every element.

## Quality Area 1 Checklist – Educational Program and Practice

**Assessment & Planning – 1.3- Educators & coordinators take a planned & reflective approach to implementing the program for each child.**

Element 1.3.1	Element 1.3.2	Element 1.3.3
Each child's learning and development is assessed or evaluated as part of an ongoing cycle of observation, analysis learning, documentation, planning, implementation, and reflection.	Critical reflection on children's learning and development both as individuals and in groups, drives program planning and implementation.	Families are informed about the program and their child's progress.

### The assessor could see an environment:

- Where children's learning, i.e. samples of children's work on display (for ex, artwork/projects)
- Where a representation of the program can be seen by children and families.

### The assessor could see educators:

- Observing and recording information about what children know, can do, and understand in ways that do not interrupt children's participation in their learning.
- Using their knowledge of each child to reflect on their planning.
- Working with children to document and reflect on their experiences and learning.
- Using a variety of methods, such as jottings, children's comments and conversations, photographs, and examples of children's work, to assist their reflection on children's experiences, thinking and learning.
- Reflecting-in-action by changing or altering experiences which are not engaging children.
- Talking with children, families & co-ordinators about children's learning through specific experiences
- Involving children in documentation & reflection, ex:- taking photos, choosing work samples for portfolios.
- Verbally sharing positive observations & showing meaningful documentation with families about their child
- Displaying & exchanging information with families about the educational program
- Using information from families to support children's learning.

### The assessor could see children:

Speaking with educators and their families about their day & Contributing to their own documentation.

### What will educator say?

#### **Educators could talk to assessors about the way you:**

- Value communication with families & Encourage feedback about your program from children and families.
- Involve children and families in the planning and assessment of your program.
- Record each child's knowledge, ideas, or interests to use for future planning.
- Use documentation as a tool to provide appropriate experiences for all children.
- Reflect on what has been observed, how you make time for this, program successes, & what can be extended or changed.
- Gather information from variety of sources (ex-child's family, peers, play session & the child)
- Engage in ongoing critical reflection, assessment, and evaluation.
- Consider ways to scaffold children's interests and ideas to enhance their learning.
- Review practices and outcomes and generate ideas with co-ordinators and increase your professional learning.
- Provide information to families about their child, including how they access this information (Ex: - Children's portfolios, emails, photos, journals)
- Collaborate with children to document their achievements to share with families, and why this is important for meaningful documentation.

### What will educator show?

#### **Educators could show assessors:**

- Programs that show how your observations, children's ideas and interests inform your planning.
- Written programming and planning that is regular, ongoing, and inclusive.
- Children's work samples, and how they are used for planning.
- Documentation that illustrates:
  - children's learning and developing skills
  - Examples of spontaneous play
  - The effectiveness of teaching strategies
  - Changes that may be needed in the environment
- Meaningful records that can be shared with families (ex, photographs, samples of children's work and the words children use)
- The program, which is accessible to families.
- The service's policy relating to the recording of information or provision of information to families.
- Children's documentation which is provided to families (for ex photos, portfolios, emails, journals)
- Each child's program and progress, relating to the EYLF/MTOP, and how this can be shared with families.
- Evidence of meetings or information sharing with families.