

## **POLICY 4.5 MEDICATION MANAGEMENT**

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## Background

Wonderland Community Services (WCS) provides a range of accommodation services under NDIS and Child Safety, and as such is required to provide support to participants with medication.

WCS provides services for NDIS participants from 9 to 35 years of age however at times we do provide services to younger and older participants and either provide full assistance with medication administration, or where suitable WCS will assist them in self-managing their medication. This is identified in the induction stage using our Safety and Risk Assessment Form and will be part of their ongoing care planning.

As a multi-state organisation, we are committed to upholding our requirements under the following legislation:

- Medicine and Poisons Act 2019 (QLD)
- Poisons Act 1971 (TAS)
- Medicines and Poisons (Medicines) Regulation 2021 (QLD)
- NDIS Practice standards (2021)

As well, we refer comprehensively to the following state legislation which applies to organisations funded by the state. (As we are not however funded by state, the legislation guidelines are helpful)

- Disability Services Medication Management Framework (Tas) (June 2022)

Key uniting principles stated across these legislations include:

- A person-centred approach must be taken to administering medication.
- Medication Management is to be informed by individualised support plans.
- Consent is required with the individual for medication administration.
- There is support for self-management of medication to build capacity.
- A minimal restriction of freedom of decision and action that is practicable given the circumstances.
- Managing medication responsibly including accurate recording and timely administration, disposal, and mishaps.
- Written policies and procedures are developed and followed.
- Evaluation and continuous improvement of policies and procedures must take place.
- Adherence to current legislation and standards arising from Commonwealth and State Legislation (where applicable).
- Empowerment of both staff and participants toward making informed decisions understanding their medication regimen, including indications for medication use, benefits, side-effects, and interactions where applicable.

## Recording of Medications

WCS supports participants for short term supported accommodation, Respite Accommodation and Child Safety Protection and conducts excursions as a regular feature of the daily activities and capacity building support we offer. Due to the short duration of stays (under NDIS STA and Respite – can be just days, not weeks or months) and the inclusion of off-site activities, it was essential to find a medical recording system that provided portability and flexibility for multiple staff members in various care-support situations. Traditional paper and pen systems could easily be lost or misplaced, making it challenging to record medications during outings.

WCS has adopted the secure Monday.com 'cloud-based' database which is accessible with a phone app so that recording medications taken in real-time is possible. This has the added advantage that the Site Manager has real-time access to all issues of medication administration. As a continuous improvement for the Medication charts on the care boards, the "S8 Count in & Out" column was added. In addition, if a problem occurs with Medication, staff should fill out a Medications Mishap Form and submit this immediately if it is safe to do so, and this will provide a real time notification to the Client Care Officer.

## Types of Medications

1. Doctor prescribed
  - a. S8 or S4D medications (i.e., restricted medication).
  - b. Other Doctor prescribed medications.
2. Over the counter medications.
3. PRNs – these are medications that are able to be taken as required under specific conditions (e.g., paracetamol when a headache occurs). These may be prescribed by the doctor or over the counter medication (non-prescribed).
4. Supplements (e.g., vitamins and non-prescribed medications obtained from a chemist).
5. Herbal/home preparations (i.e., not supplied through a pharmacy).

WCS has specific strategies for dealing with each of these types of medication which will be detailed in later sections.

## Storage of Medications

General medication storage requirements:

- WCS requests that participants provide medication in Webster Packs that require the administration of more than one medication. This is due to simplicity of medication administration especially in group contexts. Simplicity assists in preventing mishaps with medication administration.
- All medications not supplied in a Webster pack must be labelled by a pharmacist, including the prescribing physician's name and explicit administration instructions.
- WCS will store medicines properly and in accordance with any instructions on the medicine label or as per direction of a pharmacist or medical professional.
- Medications will be stored in their original container in a cool, dry, and secure place unless otherwise specified.

- Participants who need assistance in managing their medication may also need help in storing them safely – while staying with WCS all medication will be stored in an agreed suitable secure location at each site.
- On WCS properties that provide STA services, our house rules mandate the highest safety precautions for all participants in group settings. Where there is a major risk of medicine misuse, such as accidental overdose by participants, WCS will make sure that the medicines are appropriately secured. Medication will be stored out of the participant's reach and sight, while still being accessible to those assisting in medication management generally in double lockable locations. i.e., in staff rooms within wardrobes with medication safes. Staff are **NOT** to allow their participants to enter the staff room at any time. This aligns with our safety precaution procedures.
- Particular care will be taken to ensure that sharp objects such as syringes or pill cutters are stored safely and will be stored in the same secure location as general medication to prevent stick injuries.
- In participants own homes or Child Safety Homes – medications and necessary equipment will be kept in appropriate storage areas accessible to participants and staff, except where it is identified as required to be locked away through behaviour support plans and NDIS and Child Safety, regulations and state authorisation if required.
- Epi-pens and puffers however will not be stored on the locked medication cupboards to facilitate the easy emergency access. Participants/young persons can keep their puffer in their room during the night and epi-pens will be stored on top of the medication safe ready to use without issue if needed quickly.

#### Storage requirements for medication requiring refrigeration:

- The stability/effectiveness of some medicines depends on storing them at the correct temperature, for example, those medicines requiring refrigeration.
- Any medication requiring refrigeration will be stored at the correct temperature. While at WCS this will be within a secure refrigerator in the staff room, separate from food.

#### Storage requirements for taking medications offsite

- When a participant/young person needs to take their medicines offsite, WCS staff will make suitable storage and transport arrangements for medication (for example, medicines that are normally stored in the fridge can be put in a small, insulated lunchbox).
- While at WCS, medication will be transported appropriately and securely by staff and only taken offsite when necessary to administer to the participant in the course of daily activities. Medication kept in insulated containers will be kept in the offsite medication lock box, together with the First Aid and or Spills Kits in cars. In other words, medication will be kept away from direct contact with participants travelling in vehicles.
- WCS will seek further advice from a community nurse, pharmacist, or a participant's doctor if we have concerns about transporting a participant's/young person's medication.

### Storage of S8 and S4D medications

WCS policies and strategies for medication storage meets the Medicines and Poisons (Medicines) Regulation 2021 (QLD).

- S8 medicines are stored in secure area, a cupboard or receptacle (i.e., a safe) and not accessible to the public or unauthorised staff which meets the requirements of the Medicines and Poisons (Medicines) Regulation 2021 (QLD).
- S4D medicines are stored in a secure area and not accessible to the public or unauthorised staff in a cupboard or receptacle (a “safe”) that meets the requirements of the Medicines and Poisons (Medicines) Regulation 2021 (QLD).
- **S8 and S4D medicines safes will not be left unsecured if unattended.**
- Two persons authorised to handle S8 and S4D medicines will witness administration whenever an S8 or S4D medicines safe is open and during administration. Where one worker only is working, they are able to real time video link with another suitably authorised staff member via WhatsApp to witness the administration and provide a second signature.
- A pin code is considered an appropriate alternative to a key locked S8 or S4D medicines safe.
- A pin code or any other security measure that protects access to any S8 or S4D medicines safe, is maintained and is the responsibility of the manager of the area to ensure unauthorised access is prevented.
- A daily count of all Schedule 8 (S8) medications must be conducted at the beginning of each shift ("Count In") and at the end of the last shift of the day ("Count Out"). These counts are to be accurately recorded in the designated "S8 Count In" and "S8 Count Out" columns on the medication board located within the participant's care board.
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### Using S8 AND S4D Medications with Participants

1. Where participants are using S8 or S4D medications and will be situated in accommodation with other participants parents/guardians must supply medications in Webster Packs made up by their chemist following doctor's orders or in original packaging.
2. When supplying in Webster packs, they may have a range of medications in one 'blister' including S8 and S4D medications and other medications.
3. Alternatively, if participants/young persons arrive with medications with original pharmacy packaging these items must be placed in a participant's/young person's name-labelled zip-lock bag for storage.
4. S8 and S4D medications must be stored according to storage requirements previously detailed.
5. When taking S8 or S4D medications offsite the whole pack must be transported with the participant/young person and the pack must be securely locked in a secure container which will remain locked in the vehicle unless brought out for the participant to administer or have support in administering at the correct time.
6. A daily count of all Schedule 8 (S8) medications must be conducted at the beginning of each shift ("Count In") and at the end of the last shift of the day ("Count Out"). These counts are to be accurately recorded in the designated "S8 Count In" and "S8 Count Out" columns on the medication board located within the participant's/young person's care board.
7. As far as possible workers who have completed the following qualifications are able to support participants with medication:

- a. HLTAID003 Provide First Aid
- b. HLTAAP001 Recognise Healthy Body Systems
- c. HLTAPS006 Assist clients with Medication

Where they have not completed these qualifications, they are required to complete in-house training using training materials that meet the national competencies (although not issued by an RTO). These are available on our training board on Monday.com. Training is also completed through Etrainu.

### Storage of narcotic substances

These would include pain medications including:

- Codeine
- Fentanyl - available as a patch
- Hydrocodone
- Hydromorphone
- Meperidine
- Morphine
- Oxycodone
- Tramadol

The Tasmanian Poisons Act 1971 (Version current from 1 July 2025) states:

1. A person who is authorised by the Act or these regulations to possess narcotic substances for the purposes of the person's profession or employment –
  - a. Must keep them stored apart from other goods in an enclosure that is constructed and secured in a manner approved by the Manager; and
  - b. When the narcotic substance is not being used, must keep the enclosure securely locked and retain the key either on his or her person or in a place not readily accessible to other persons.
2. Notwithstanding sub regulation 1, a medical practitioner, veterinary surgeon, dentist, endorsed midwife, authorised health professional or authorised nurse practitioner may, for emergency purposes, keep narcotic substances in a bag in a vehicle or room which is kept securely locked when the vehicle or room is not occupied by that medical practitioner, veterinary surgeon, dentist, endorsed midwife, authorised health professional or authorised nurse practitioner.

### Participants/young persons using other types of medications/supplements/PRNs

1. Where participants/young persons are using other non-prescribed medications and will be situated in accommodation with other participants/young persons the participant/guardian must supply medications in original packaging from the chemist following doctor's orders or in Webster packs.
2. Non-prescribed medications should be stored in a secure area as previously specified.
3. Support Workers should assist participants/young persons to take their medications as required by their needs in care planning.
4. When on excursions offsite, medications must be transported with the participant/young person and the 'medication pack' must be securely locked in the vehicle inside a medication lock box and brought out for the participant/young person to self-administer at the correct time.

## Medication Administration Procedure

The following 'Eight Rights' of medication must always be adhered to when administering any medication: (Please note various sources may indicate the 5,6 or 7 rights – an Asterix is identified against the main 5)

1. Right patient\*
  - Check the name on the order and the patient.
  - Use two identifiers (i.e., medication chart on Monday.com and labelled packaging)
  - Ask patient to identify themselves.
2. Right medication\*
  - Check the medication label.
  - Check the medication chart.
3. Right dose\*
  - Check the medication chart.
  - Confirm with medication labelling from pharmacy and ensure that the two values match.
4. Right route\*
  - Again, check the medication chart and appropriateness of the route ordered.
  - Confirm that the patient is able to take or receive the medication by the ordered route.
  - If you suspect the participant cannot tolerate the route given (for example, if the participant is vomiting), please contact management and seek further advice.
5. Right time\*
  - Check the frequency of the ordered medication.
  - Double-check that you are giving the ordered dose at the correct time.
  - Confirm when the last dose was given.
6. Right documentation
  - Document administration after giving the ordered medication.
  - Chart any additional information (e.g., variations in time, route, and any other specific information) as necessary.
7. Right reason
  - Confirm the rationale for the ordered medication – ensure it makes sense to be administering the medication at the dosage.
8. Right response
  - Make sure that the medication had the desired effect.
  - Be sure to document your monitoring of the patient and any other interventions that are applicable.

Furthermore, it is to be acknowledged that further medication rights have been discussed inclusive but not limited to:

- The right to refusal of medication: in which instance, staff are encouraged to contact their line manager as soon as a medication issue should arise.  
The right to education: staff should aim to contact their managers and empower participants to seek out advice from reputable sources – e.g., see a community pharmacist for further information about their medications.

## Administration of Medications – Additional Information

- As part of intake of a new participant/young person with WCS, guardians of the participants/young persons are advised to identify the purposes of the medications and

whether they constitute a potential restrictive practice (i.e. 'chemical restraint'). A 'Purpose of Medication Form' must be signed by the participants/young persons General Practitioner or treating specialist with the view of identifying the purposes of participants'/young persons' medication. If this is identified, then WCS are tasked with reviewing this medication and notifying the NDIS Reportable Incident Notifier if the medication is not for physical or mental health diagnoses for reporting purposes.

- Support Workers should read the medication chart for the participant/young person that they are responsible for and be familiar with the health needs of the participant/young person in their care through reading the Care Plan for that young person on Monday.com including the medication information on their care board.
- If a worker is unfamiliar with any of the medications required for a participant/young person in their care, they are required to research its effects and side effects prior to commencing their shift. Any questions should be directed to the Client Programs Officer. Information is available about common medications available on Monday.com for all staff.
- If not qualified to support the administration of medications another worker with these qualifications should be requested to come to support this administration and recording. The worker may act as the second signatory. In an emergency however, workers without qualifications can contact the on-call and the senior worker will oversee the administration ensuring safety is upheld for the participant/young person.
- Medication packets should be read carefully to check for the participant's/young person's name where there are groups of participants/young persons.
- Medication distribution should be completed with adequate personal protective equipment (PPE) – e.g., gloves, medication cup.
- That participant's/young person's medications should be taken from the locked cabinet (or vehicle) and placed on a dry flat surface for the participant/young person.
- The medication chart on Monday.com will show the time etc and dosage and route etc.
- The worker should watch that the participant/young person has taken the medications and record this on the Monday.com record on their phone using their electronic signature (face). This is time and date stamped.
- Medications that are dropped or vomited etc should be collected in a plastic bag and this should be noted on the record. Poisons Hotline must be called (**13 11 26**) and be advised on the next steps to take. Please note down the reference number of your phone call for record keeping purposes. A Medication Mishaps Form MUST be submitted.
- If this means that not sufficient medication is available to the participant/young person, the worker should contact the Client Programs Officer during office hours or on-call after hours to contact the pharmacy for advice.
- Medications should then be placed securely back in the cabinet/lock box for safe keeping.
- NO storage will be offered, or support for administering medication will be offered by WCS for any medications not in original packaging or in Webster packs (blister packs). Parents/guardians will be notified, and they may attend the participant/young person and administer these if required.
- NO storage will be offered, or support for administering medication will be offered by WCS for any supplements or other substances not provided through a pharmacy. Parents are directly responsible to instruct their participant/young person to take these supplements if required (e.g., traditional herbal medications, preparations provided through a naturopath, etc).

### Administration of Medications – Off-site Additional Information

The general procedures above all apply, other than storage.

Administering members of staff are often in unfamiliar environments at times when participants/young persons require their doses. For most participants/young persons taking meds in the course of the day a lunch-time dose (either before or after the meal) is common. Staff members are asked to plan ahead as to where lunch will be taken and be prepared, and how this will apply to any medication administration required.

This preparation requires the support worker to:

- Re-read participant/young person medical information before going on the outing.
- Prepare all labelled meds packaging for safe keeping in the 'Offsite Medication Lock Box. (This must be kept out of the sun and in a cool spot).
- Pack water and sterile cups to help participant/young person swallow tablets.
- Pack any specialised equipment that the participant may need, and in case of potential emergency pack items like asthma puffers and epi-pens etc that a participant/young person might normally take with him/her.
- Make sure their phone is charged and able to access MONDAY.COM for recording information on meds charts.
- Find a suitable quiet place to administer the medication at the right time.
- Follow all procedures for administering medications.
- Record information into MONDAY.COM Medication Charts on Carers Board on their phone as per normal.
- On return to site all medication must be restored correctly.

### Observing Participants /Young Persons for Side-effects

Support Workers have a duty of care to observe participants for possible side-effects from the medications they take, particularly if side-effects have been noted on intake forms.

### Education about medications

If participants/young persons request information about the purpose of the medication, they are taking – staff members are free to share this information from the information supplied on Monday.com – no further instructions should be provided apart from this information in case a worker influences a participant/young person against the medication accidentally. In all cases the worker should say – “these are the common uses but sometimes a doctor will prescribe a medication for other conditions that it is known to work for so you will have to talk more about this to your doctor – as I am not medically trained”.

### Side effects knowledge and adverse reactions

(Please refer to the *Policy 4.5.1 Medication Compendium* for details of side effects)

**All abnormal responses to medication or when worried call 000 and or the POISONS HOTLINE 131126**

### Medication Record Keeping Procedure

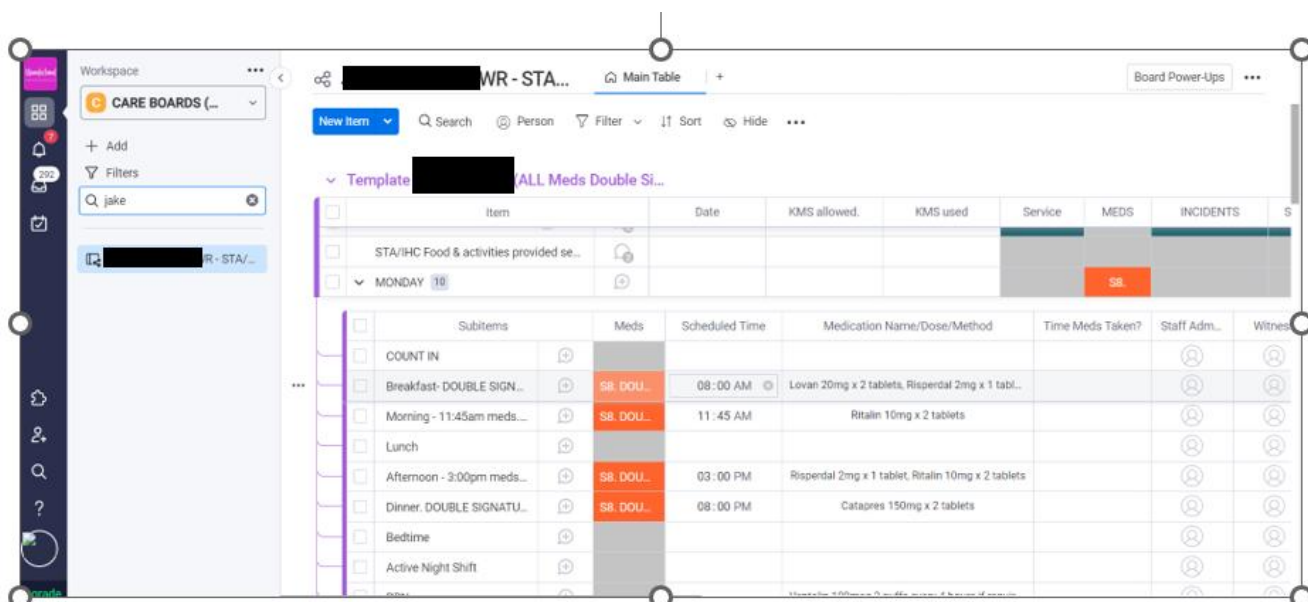
Summary procedure for entering medical information:

1. All participant/young person medications are recorded into electronic medication charts prior to arrival - see:
2. MONDAY.COM → Care Board (STA, PR, SIL) - PR - EACH PARTICIPANT'S CARE BOARD - Sub item medications
3. MONDAY.COM → Care Board (STA, WR, SIL) - WR - EACH PARTICIPANT'S CARE BOARD Sub item medications
4. The participants'/Young persons' carer's board with medication information must be filled in by a delegated administration officer prior to the arrival of participants onsite.
5. The Client Care Officer must check the data inputted by the admin staff member for accuracy.
6. Any queries about information must be directed back to the parents/guardians of the participants or COS workers.
7. On arrival support workers or the Client Programs Officer must check the actual medications bought by participants/young persons with the records on this board. Discrepancies must be checked with parents/guardians. If doctor's orders cannot be obtained to account for the discrepancies, then the participant/young person may be sent home, unless some other arrangement can be made.
8. Support staff recording information in the medication subitem charts must do so as soon as possible after supervising the administering of the medications to participants. This is usually done on the MONDAY.COM app. loaded on staff personal phones.

### Structure and Use of the CARE BOARDS Subitem Medication

1. Four general periods in the day are recorded. Breakfast, lunch, dinner, and bedtime with a record showing whether the medication has been all taken, some issues, not taken reason out on the notes section whether dropped, refused, vomited, forgotten, late by 1 hour, or late by more than 1 hour. (drop-down menu)
2. Where medications are S8 only workers with specific qualifications can record medications. A first and second signature are required on S8 medications. This is simply recorded in a written form – first signature, second signature etc. The second signature may be from another worker who does not have Medication Administration qualifications – it is a witness only signature.
3. Staff handling medications must count the number of tablets taken and left in each medication packet - at the beginning of a participant/young person stay and at the end of the participant /young person stay. (Medication details are on the Participant's/Young Persons' Confidential file / Care Board)
4. If any medication is dropped or vomited the medication should be kept in a sealed plastic bag and returned to the pharmacy where dispensed for longer term participants or back to the parents/guardian for shorter term stays and this should be recorded in notes on Monday.com and a medication mishap form should be filled out.
5. Where medications are not S8 the worker may record on Monday.com that meds have been taken by the participant/young person in their care. No second signature is required. They may record their face as the person witnessing the action by the participant/young person.

Example medication administration template taken from Monday.com:



The screenshot shows a Monday.com workspace with a sidebar on the left containing a search bar with 'jake' and a list of items. The main area displays a table titled 'Template [redacted] (ALL Meds Double Si...)' with columns for Item, Date, KMS allowed, KMS used, Service, MEDS, INCIDENTS, and S. The table is filtered for 'MONDAY 10'. Below this, a detailed medication administration table is shown with columns for Subitems, Meds, Scheduled Time, Medication Name/Dose/Method, Time Meds Taken?, Staff Adm., and Witness. The rows include 'COUNT IN', 'Breakfast-DOUBLE SIGN...', 'Morning - 11:45am meds...', 'Lunch', 'Afternoon - 3:00pm meds...', 'Dinner-DOUBLE SIGNATU...', 'Bedtime', and 'Active Night Shift'. Each row has a corresponding 'Meds' column with a status (e.g., 'S8 DOU...') and a 'Scheduled Time' column with a time (e.g., '08:00 AM'). The 'Medication Name/Dose/Method' column contains details like 'Lovan 20mg x 2 tablets, Risperdal 2mg x 1 tabl...'. The 'Time Meds Taken?' column is empty. The 'Staff Adm.' and 'Witness' columns have icons for staff and witnesses.

Item	Date	KMS allowed	KMS used	Service	MEDS	INCIDENTS	S
STA/IHC Food & activities provided se...							
MONDAY 10					S8		

Subitems	Meds	Scheduled Time	Medication Name/Dose/Method	Time Meds Taken?	Staff Adm.	Witness
COUNT IN						
Breakfast-DOUBLE SIGN...	S8 DOU...	08:00 AM	Lovan 20mg x 2 tablets, Risperdal 2mg x 1 tabl...			
Morning - 11:45am meds...	S8 DOU...	11:45 AM	Ritalin 10mg x 2 tablets			
Lunch						
Afternoon - 3:00pm meds...	S8 DOU...	03:00 PM	Risperdal 2mg x 1 tablet, Ritalin 10mg x 2 tablets			
Dinner-DOUBLE SIGNATU...	S8 DOU...	08:00 PM	Catapres 150mg x 2 tablets			
Bedtime						
Active Night Shift						

### Retention of Medication Information

- Once a participant/young person has left their accommodation stay their medication record will remain on the participants/young persons Care Board – dated with their past stay.
- If a participant/young person leaves the service their Care Board will be archived in case this information is needed in the future.
- Participants, young persons or guardians can request access to medication records, and this can be provided as a digital spreadsheet.
- Please see *Privacy, Confidentiality and Data Management Policy* for full information around this.

### Medication Administration Responsibility Delegation

#### WCS Management:

- To interpret legislation and update policies according to legislation.
- To provide guidance and information about best practice to workers.
- To provide support for emergency situations with respect to Medication Management.
- To ensure only appropriately trained staff are delegated the responsibility for medication administration of S8 medications.
- To set up practical strategies to manage the Management of Medication within the service.
- Acknowledge any medication Mishaps forms submitted

#### Client Care Officer/ Intake Officer:

- To receive instructions from parents/guardians regarding medications for participants/young people.
- To instruct parents/guardians on the suitable format for receiving medications (in original packaging or Webster packs)
- To record dosages, routes, times, and accurate names of medications in the Monday.com system.
- To have this record checked by a second responsible person.
- To provide a copy of the Purpose of Medication form (POM) if required.

#### Parents/Carers/Guardians:

- To provide up to date information with respect to Medications for participants for individual support plans
  - including providing a MAR (Medication Administration Record – *Doctor's Orders*) for any medications which has been signed by the participants GP or
  - provide medication in Webster Packs which means that the pharmacist has interpreted the MAR
- To provide emergency contact details.
- To provide any information about refusal of medications or incidents in the past with respect to medications.

#### Participants/Young Persons:

- To agree to take medications according to the schedule provided by the prescribing medical official with labelled medications while on retreat.

- To agree to have medications stored for safekeeping by the service while on retreat.
- To agree to follow the directions of the support staff in accordance with medication administration while on retreat.

**Support workers:**

- To provide support for self-administration for participants/young persons for medications.
- To act responsibly with storage, administration support and recording information about medications taken while on retreat and notify the Client Care Officers or Site Manager when mishaps occur.
- To only administer medications if trained with the following qualifications:
  - HLTAID003 Provide First Aid
  - HLTAAP001 Recognise Healthy Body Systems
  - HLTAPS006 Assist clients with Medication
  - Or through in-house medication administration training
- Exceptions to this may be either under the specific direction of the Site Manager under advice from a medical professional and in accordance with best practice, or under the direct instruction of emergency service professionals. This will be duly recorded in the medication record notes. It is understood that WCS acts with the participant/young person or parent/guardian's written permission to assist independent administration by the participant/young person for their welfare.  
*(For example, 2 workers may have accompanied participant/young person on an excursion. One worker may be taken ill, and the other worker has the responsibility for the group. The Site Manager has been called. The remaining worker does not have the specific qualifications to administer medications. The Site Manager instructs the worker on their behalf to ensure a participant/young person who requires this medication at a specific time to be provided with this medication. The Site Manager and the Support Worker act together to provide appropriate care for the /participant/young person due to an unforeseen situation arising. The Site Manager who has the necessary qualifications - is then the responsible person).*
- To follow the policies and procedures of the organisation with respect to Administering Medication.
- To follow the advice of the Site Manager/Client Care Coordinator of the service
- Should not administer any expired medications and inform the management of discrepancies.
- When in doubt about a reaction to medications - contact the Poisons Line or call Emergency Services (000)

DATE	PERSON/S	DETAILS
12.08.2025	Becci Fazldeen	Review and update
14.11.2024	Cita Carmody-Pearson	Review and update
19.08.2022	Toni Megihan	Review and update
07.02.2022	Maison Lukic-Bristow	Policy created