

ACCEPTANCE & REFUSAL OF AUTHORISATIONS

Reviewed May 2023
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POLICY STATEMENT

Our service has a responsibility to protect the health, safety and wellbeing of each child at all times. Educators require authorisation for actions such as administration of medications, collection of children, excursions, and transportation of children. This policy outlines the processes in place to manage these authorisations.

GOALS

Our service has a responsibility to ensure that required authorisations are obtained and kept in the enrolment record and help to ensure that the health, safety, wellbeing and best interests of all children are met

STRATEGIES

OBTAINING AN AUTHORISATION

Authorisation must be obtained from parent/guardians or authorised nominees in the following circumstances;

- I. Administering medication to children (Regulation 92)
- II. Children leaving the premises in the care of someone other than their parent (Regulation 99) other than the case of emergency
- III. Children being taken on excursions (Regulation 102)
- IV. Transport of children (Regulation 102D)

Parents / guardians are provided with adequate information and support to complete and maintain written authorisations.

Parents / guardians are informed of their right to refuse authorisations and the impacts of a refusal.

KEEPING AUTHORISATIONS IN THE ENROLMENT RECORD

Authorisations must be kept in the enrolment record (Regulation 161). These are;

- 1) An authorisation, signed by a parent or guardian named in the enrolment record as authorised to consent to the medical treatment of the child, for the approved provider, a nominated supervisor or an educator to seek:
 - a. Medical treatment for the child from a registered medical practitioner, hospital or ambulance service; and
 - b. Transportation of the child by an ambulance service; and
 - c. If relevant, an authorisation given under Regulation 102 for the education and care service to take the child on regular outings.

Prior to a child commencing at the service, the enrolment record is checked to ensure that all required written authorisations are completed and signed by the nominated parent / guardian.

Authorisations are monitored, maintained and stored confidentially.

REFUSING A WRITTEN AUTHORISATION

On receipt of a written authorisation from a parent / guardian that does not meet the requirements outlined in the related service policy, the Approved Provider or delegated authority will:

- 1) Immediately explain to the parent / guardian that their written authorisation does not meet legislative and policy guidelines
- 2) Provide the parent / guardian with a copy of the relevant service policy and ensure that they understand the reasons for the refusal of the authorisation.
- 3) Request that an appropriate alternative written authorisation is provided by the parent / guardian.
- 4) In instances where the parent / guardian cannot be immediately contacted to provide an alternative written authorisation, follow related policy procedures pertaining to the authorisation type.
- 5) Follow up with the parent / guardian, where required, to ensure that an appropriate written authorisation is obtained.

ROLES AND RESPONSIBILITIES

Approved Provider responsibilities

- I. Ensure that obligations under the Education and Care Services National Law and National Regulations are met.
- II. Ensure that an enrolment record is kept for each child that includes authorisations signed by a parent or a person authorised to consent to the medical treatment of the child if relevant, in relation to;
 - a. Seeking medical treatment from a registered medical practitioner, hospital or ambulance service.
 - b. Transportation by an ambulance service
 - c. Regular outings and transportation (regulations 160, 161)
- III. Ensure that a medication record is kept that includes the authorisation to administer medication signed by a parent / guardian or person named in the enrolment record (Regulation 92).
- IV. Ensure that medication is only administered or self-administered if authorised or, in an emergency, authorisation is provided verbally by:
 - a. A parent or a person named in the enrolment record
 - b. A registered medical practitioner or an emergency service if the parent or person named in the enrolment record cannot be contacted (Regulations 93, 96)
 - c. In the case of an anaphylaxis or asthma emergency, medication may be administered without authorisation (Regulation 94).
- V. Ensure that children only leave the service premises, FDC residence or approved FDC venue with a parent, an authorised nominee named in the enrolment record, or a person named in the enrolment record to collect the child (Regulation 99).
- VI. Ensure all children have appropriate authorisation to leave the service on an excursion or regular outing (Regulation 102).
- VII. Ensure no child is transported by the service without an authorisation from a parent or other person named in the enrolment record (Regulation 102D).
- VIII. Ensure systems requiring authorisations are in place for other legal requirements or quality practices, etc: photos of children and privacy.
- IX. Ensure authorisations are kept up-to-date.

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Nominated Supervisor responsibilities

- I. Provide supervision, guidance and advice to ensure adherence to the policy at all times
- II. Ensure all authorisations are retained within the Enrolment Record, original copy and include;
 - a. The name of the child enrolled in the service
 - b. The date
 - c. The signature of the child's parent / guardian or nominated contact person who is on the enrolment form
 - d. The original form / letter / register provided by the service.
- III. Apply these authorisations to the collection of children, medical treatment of or administration of medication, excursion, transportation of children, and transportation via ambulance.
- IV. Ensure authorisations are stored with each individual child's enrolment record
- V. Ensure that all parents / guardians have completed the authorised nominee section of their child's enrolment form and that the form is signed and dated before the child is enrolled at the service.
- VI. Implement and oversee authorisation systems for other legal requirements or quality practices, eg: photos of children and privacy.
- VII. Ensure authorisations are kept up-to-date
- VIII. Implement processes for circumstances where authorisations may be refused / not applicable.

Educator responsibilities

- I. Apply these authorisations to the collection of children, administration of medication, excursion and transportation of children.
- II. Implement processes for circumstances where authorisations may be refused / not applicable
- III. Waive compliance where a child requires emergency medical treatment for conditions such as anaphylaxis or asthma. The service can administer medication without authorisation in these cases, provided it is noted on medical plans and that the parents/guardians are contacted as soon as practicable after the medication has been administered.
- IV. Ensure all action plans are carried out in line with this policy.
- V. Ensure that the child's family completes and signs authorisations in the enrolment record and medication record (if relevant) before the child commences at the service.
- VI. Implement authorisation systems for other legal requirements or quality practices. EG: Photos of children and privacy.
- VII. Ensure that authorisations are kept up-to-date.

Family's responsibilities

- I. Ensure that their child's enrolment form is completed and signed before child commences attending the service.
- II. Keep child enrolment details forms current stating who the authorised nominees are.
- III. Inform service of current contact numbers to ensure they are contactable at all times.
- IV. Communicate to the Responsible Person and staff any individual request regarding authorisations.

- V. Update educators in relation to any medical conditions, medical plans or ongoing medication requirements. This includes the names of medications, dosage, signs and symptoms and contact information for any relevant health professionals.
- VI. Ensure that where children require medication to be administered by educators or other staff, it is authorised in writing, signed and dated for inclusion in the child's medical record.

RELATED GUIDELINES, STANDARDS, FRAMEWORKS, LEGISLATION

National Quality Standards

Quality Area 7: Governance and Leadership, Standard 7.1 and Element 7.1.2
Quality Area 2: Children's Health & Safety

Office of the Children's Guardian: Child Safe Standards

Standard 1: Child safety is embedded in the organisational leadership, governance and culture.
Standard 3: Families and communities are informed and involved.
Standard 7: Staff are equipped with the knowledge, skills and awareness to keep children safe through continual education and training.
Standard 8: Physical and online environments minimise the opportunity for abuse to occur.
Standard 10: Policies and procedures document how the organisation is child safe.

Legislation

Education and Care Services National Law Act 2010: Section 167

Education and Care Services National Regulations: Regulations 92, 93, 94, 96, 99, 102, 102D, 160, 161, 168, 169, 170, 171, 172

Family Law Act 1975

Australian Child Protection Legislation

RESOURCES / USEFUL LINKS

www.ACECQA.gov.au

MONITORING, EVALUATION AND REVIEW

This policy will be monitored to ensure compliance with legislative requirements and unless deemed necessary through the identification of practice gaps, the service will review this Policy every two years. Families and staff are essential stakeholders in the policy review process and will be given opportunity and encouragement to be actively involved. In accordance with R. 172 of the Education and Care Services National Regulations, the service will ensure that families of children enrolled at the service are notified at least 14 days before making any change to a policy or procedure that may have significant impact on the provision of education and care to any child enrolled at the service; a family's ability to utilise the service; the fees charged or the way in which fees are collected.