MEDICAL CONDITIONS POLICY

To support children's wellbeing and manage specific healthcare needs, allergy or relevant medical condition our Service will work in accordance with the Education and Care Services National Regulations to ensure health related policies and procedures are implemented. We aim to take every reasonable precaution to protect children's health and safety by explicitly adhering to individual medical management and risk management plans and responding to any emergency situation should they arise.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
86	Notification to parent of incident, injury, trauma or illness
87	Incident, injury, trauma and illness record
90	Medical Conditions Policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
136	First Aid qualifications
162(c) and (d)	Health information to be kept in enrolment record
168	Education and care services must have policies and procedures

170	Policies and procedures are to be followed

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of Medication Policy Asthma Management Policy Anaphylaxis Management Policy Celebrations Policy Child Safe Environment Policy Diabetes Management Policy Enrolment Policy	Epilepsy Management Policy Family Communication Policy Health and Safety Policy Incident, Injury, Trauma and Illness Policy Privacy & Confidentiality Policy Sick Children Policy Supervision Policy Work Health and Safety Policy

PURPOSE

We aim to efficiently respond to and manage the medical conditions, health care needs or allergies of children and staff ensuring the safety and wellbeing of all children, staff, families, and visitors at our Service.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Service.

IMPLEMENTATION

Our Service is committed to adhering to privacy and confidentiality procedures when dealing with individual health care needs, allergies or relevant medical conditions. There are a number of concerns that must be considered when a child with a diagnosed health care need, allergy, or medical condition is enrolled at the service. Key procedures and strategies must be in place prior to the child commencing at the service to ensure their individual health, safety and wellbeing.

The Approved Provider / Management will ensure:

- all enrolment forms are reviewed to identify any specific health care need, allergy or medical condition
- existing enrolment forms are reviewed, and parents contacted to confirm if the existing diagnosed health care need, allergy or relevant medical condition still applies and whether any new needs have been diagnosed
- parents are provided with a copy of the Service's *Medical Conditions Policy*

- a child is not enrolled at, nor will attend the Service without a medical management plan and prescribed medication by their medical practitioner. In particular, medication for life-threatening conditions such as asthma, anaphylaxis or diabetes must be provided at the service each day [e.g. asthma inhalers, adrenaline auto injection devices or insulin]
- educators, staff and volunteers have knowledge and access to this policy and relevant health management policies (asthma management policy/ anaphylaxis management policy/diabetes management policy)
- educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical condition that may be ongoing or acute/short term in nature and will read and sign the dietary/medical conditions alert form to acknowledge they have read and understood the child's individual health care needs, know what signs to be alert to and what action/s need to be taken in an emergency
- new staff members are provided with induction and ongoing training to assist managers, educators and other staff effectively and children with medical management plans are clearly identified
- all aspects of operation of the service must be considered to ensure inclusion of each child into the program
- communication between families and educators is on-going and effective
- staff are provided with annual ASCIA anaphylaxis e-training to provide consistent and evidence-based approaches to prevention, recognition and emergency treatment of anaphylaxis. Additionally, when a child with asthma or anaphylaxis is enrolled at the Centre or transitions to a new room within the Centre, room staff will receive an update in administering an epipen/and or asthma reliever/spacer.
- educators receive appropriate professional development and training in managing specific medical conditions and meeting children's individual needs
- at least one staff member or nominated supervisor is in attendance at all times with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate (as approved by ACECQA)
- educators and staff have a clear understanding about their role and responsibilities when caring for children with a diagnosed health care need, allergy or relevant medical condition
- families provide required information on their child's health care need, allergy or relevant medical condition, including:
    - medication requirements
    - allergies
    - medical practitioner contact details
    - medical management plan

- a medical management plan has been developed in consultation with parents and the child's medical practitioner and provided to the service and/or
  - an individual Asthma or Anaphylaxis Action Plan is developed in consultation with parents and the child's medical practitioner eg: (ASCIA) or National Asthma Council of Australia
  - an individual Diabetes Management Plan is developed in consultation with parents and the child's medical practitioner
- a risk minimisation plan has been developed in consultation with parents and management prior to the child commencing at the service
- educators and staff will be informed immediately about any changes to a child's medical management plan, risk management plan and acknowledge this via the dietary/medical conditions alert form
- to record any prescribed health information on OWNA and retain copies of medical management plan, anaphylaxis management plan or asthma management plan and risk minimisation plan in the child's enrolment folder
- educators have access to emergency contact information for the child
- casual staff are informed of children and staff members who have specific medical conditions, food allergies, the type of condition or allergies they have, and the Service's procedures for dealing with emergencies involving allergies and anaphylaxis
- a copy of the child's medical management plan is visibly displayed (in an area not generally available to families and visitors) but known to staff and volunteers in the Service
- procedures are adhered to regarding the administration of medication at all times
- administration of medication record is accurately completed and signed by the educator and witness
- copies of children's medical management plans and medication are taken on any excursion or emergency evacuation from the service.

The Nominated Supervisor/Responsible Person/educators will ensure:

- in the event that of a high-risk scenario where a child suffers from an allergic reaction, incident, situation, or event related to a medical condition the Service and staff will follow the child's emergency medical management plan as per Regulation 90(1)(c)(ii)
- the first aid responder will commence first aid measures immediately as per the child's medical management plan
- Director/Nominated supervisor to be phoned/advised

- urgent medical attention from a registered medical practitioner is contacted if required, child to be transported to hospital as soon as possible, with Centre ringing the hospital to notify child is on the way
- an ambulance is called by dialling 000 if the child does not respond to initial treatment (unmanned ambulance station in Roxby Downs, response time 20 minutes plus for ambulance to attend scene)
- the nominated supervisor will contact the child's parent/guardian or emergency contact when practicable, but as soon as possible
- the Director/Nominated Supervisor will ensure the *Incident, Injury, Trauma and Illness Record* is completed in its entirety
- the Director/Nominated Supervisor will notify the regulatory authority (within 24 hours) in the event of a serious incident.

Families will ensure:

- they provide management with accurate information about their child's health needs, allergies, medical conditions and medication requirements on the enrolment form
- the Service enrolment form is completed in its entirety providing specific details about the child's medical condition
- they acknowledge they have received/or are provided access to the Service's *Medical Conditions Policy and Administration of Medication Policy* at time of enrolment
- they provide the Service with a medical management plan prior to enrolment of their child
- they consult with management to develop a risk minimisation plan
- they notify the Service if any changes are to occur to the medical management plan through the communication plan and/or meetings with the nominated supervisor and in writing via the individual child medical management update form.
- they provide adequate supplies of the required medication and medical authorisation on *Administration of Medication Record*
- they provide an updated copy of the child's medical management plan annually or evidence from a medical practitioner to confirm the plan remains unchanged
- they provide enrolment documentation of any medical condition annually
- they provide written consent for their child's medical management plan to be displayed in the Service.

MEDICAL MANAGEMENT PLAN

Any medical management plan provided by a child's parents and/or registered medical practitioner should include the following:

- specific details of the diagnosed health care need, allergy or relevant medication condition
- supporting documentation (if required)
- a recent photo of the child
- current medication and dosage prescribed for the child
- if relevant, state what triggers the allergy or medical condition
- first aid/emergency response that may be required from the service
- any medication that may be required to be administered in case of an emergency
- further treatment or response if the child does not respond to the initial treatment
- when to contact an ambulance for assistance
- contact details of the medical practitioner who signed the plan
- the date of when the plan should be reviewed

- a copy of the medical management plan will be displayed for Educators and staff to see to ensure the safety and wellbeing of the child, whilst ensuring the child's privacy by displaying only in an area generally only available to staff of the Service.
- the Service must ensure the medical management plan remains current at all times.
- educators and staff are updated immediately about any changes to a child's medical management plan

RISK MINIMISATION PLAN

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation plan in place. (regulation 90(1)(c))

The Director/Nominated Supervisor will arrange a meeting with the parents/guardian as soon as the Service has been advised of the diagnosed health care need, allergy or medical condition. During this meeting, a risk minimisation plan will be developed in consultation with the parent/guardian to ensure:

- that the risks relating to the child's specific health care need, allergy, or medical condition are assessed and minimised
- that practices and procedures in relation to the safe handling, preparation, serving and consumption of food are developed and implemented

- that the parents/families are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented
- practices are developed and implemented to ensure that all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication
- that the child does not attend the Service without medication prescribed by the child's medical practitioner in relation to the child's specific health need, allergy or medical condition
- risk minimisation plan(s) are reviewed at least annually and/or revised with each change in the medical management plan in conjunction with parents/guardians
- all relevant information pertaining to the child's health and medical condition is communicated to parents at the end of each day by educators
- parents are notified by educators in advance of any special activities taking place such as celebrations, sporting events or excursions so plans of safe inclusion can be developed
- appropriate hygiene practices are followed by educators when managing medical conditions in accordance with the *Control of Infectious Diseases Policy*.

COMMUNICATION PLAN

The communication plan explains how relevant staff members and volunteers are informed about the medical management and risk management plans and how the parent of the child can communicate any changes to the diagnosed health care need, allergy or medical condition.

A communication plan will be created after the meeting with the parents/guardian to ensure:

- all relevant staff members and volunteers are informed about the Medical Conditions Policy, the medical management plan and risk minimisation plan for the child; and
- an individual child document is created (medical management update form) so that a parent can communicate any changes to the medical management plan and risk management plan for the child in writing.

At all times, families who have a child attending the Service who have a diagnosed healthcare need, allergy or medical condition will be provided with a copy of this policy and other relevant policies specific to their child's health management and communication plans.

RESOURCES

ASCIA anaphylaxis e-training for schools and early childhood education/care

ASCIA plans for Anaphylaxis

Coeliac Australia

Cystic Fibrosis Australia

Diabetes Australia

Epilepsy Foundation

National Asthma Australia

SOURCE

Australian Children's Education & Care Quality Authority. (2014).
Australian society of clinical immunology and allergy. ascia. https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis
Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law Act 2010. (Amended 2018).
Education and Care Services National Regulations. (2011).
Federal Register of Legislation *Privacy Act 1988.*
Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).
Guide to the National Quality Framework. (2017). (amended 2020).
National Health and Medical Research Council. (2013). *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th Ed.). Australia: Commonwealth of Australia. NSW Government. (n.d.). *Occupational Health and Safety Act 2004.*
Revised National Quality Standard. (2018).
Department of Education Victoria *Meeting children's health needs* (2020).

REVIEW

POLICY REVIEWED	JUNE 2021	NEXT REVIEW DATE	JUNE 2022
MODIFICATIONS	• relevant regulations updated • inclusion of staff annual ASCIA anaphylaxis e-training as best practice plus when a child with anaphylaxis transitions to a new room or starts at the Centre • detailed procedure of management of high-risk scenarios • resources added for management of medical conditions • sources checked for currency		

POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE
APRIL 2020	• additional information added to points • additional wording added to include diagnosed health care need, allergy or relevant medical condition • inclusion of asthma, anaphylaxis and diabetes policies • additional sources	JUNE 2021
JUNE 2019	Grammar, punctuation and spelling edited. Some sentences reworded/refined.	JUNE 2020

	Additional information added to points. Sources/references alphabetised. Related policies added.	
OCTOBER 2017	Updated the references to comply with the revised National Quality Standard.	JUNE 2018
AUGUST 2017	Updated to meet the National Law and/or National Regulations in respect of a serious incidents and notification purposes.	JUNE 2018
JUNE 2017	Minor changes made to policy and terminology to ensure best practice.	JUNE 2018