

# 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.

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.			

## NATIONAL QUALITY STANDARD (NQS)

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS				
90	Medical Conditions Policy			
90 (1)(a)	Medical management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis			
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			
96	Self-administration of medication			
136	First Aid qualifications			
170	Policies and procedures are to be followed			



## **RELATED POLICIES**

Administration of Medication Policy Asthma Management Policy Anaphylaxis Management Policy Diabetes Management Policy Health and Safety Policy Incident, Illness, Accident and Trauma Policy Privacy & Confidentiality Policy Sick Children 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 preschool.

## SCOPE

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

## IMPLEMENTATION

Our preschool 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 preschool. Key procedures and strategies must be in place prior to the child commencing at the preschool to ensure their individual health, safety and wellbeing.

## THE APPROVED PROVIDER AND MANAGEMENT WILL ENSURE:

- all enrolment forms are reviewed to identify any specific health care need, allergy or medical condition.
- a child is not enrolled at, nor will attend the preschool without a relevant Medical Management Plan and prescribed medication by their medical practitioner. In particular, medication for life-threatening conditions such as asthma inhalers, adrenaline auto injection devices and insulin.
- 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 venue staff.



- any prescribed health information and copies of Medical Management Plan, Anaphylaxis Management Plan or Asthma Management Plan and Risk Minimisation Plan are recorded with the child's enrolment.
- parents, staff and volunteers have knowledge and access to this policy and relevant health management policies (asthma management policy/ anaphylaxis management policy/diabetes management policy).
- venue staff receive appropriate professional development and training in managing specific medical conditions and meeting children's individual needs.

## EDUCATORS WILL ENSURE:

- copies of all Medical Management Plans are held at the venue and a copy forwarded to the management office.
- that all venue staff and volunteers are informed of the requirements within the Medical Management Plan and that all staff make themselves familiar with the procedures outlined in the plan.
- 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 in the venue.
- an Authorisation of Medication Form is completed by the parent for any medication listed in a Medical Management Plan. Prescribed medication must be in the original container, bearing the original label with the name of the child and the dosage to be given, and be within the expiry or use by date. All non-prescribed medication must be in the original container with the original label, have clear dosage instructions and be within the expiry or use by date.
- any medication administered must be recorded by staff on the Authorisation of Medication Form and signed by the parent.
- other staff and volunteers have a clear understanding of children's individual health care needs, allergies, or relevant medical conditions and of the procedures outlined on their Medical Management Plan.
- all aspects of operation of the service are considered to ensure safe inclusion of each child into the program and that Risk Minimisation Plans are followed.
- the child's Medical Management Plan, emergency contacts and relevant medication are carried on any excursions from the venue. The risk assessment for any outing should consider any child that may need special consideration due to a medical condition.
- communication between families and venue staff is on-going and effective.
- all venue staff have access to emergency contact information for all children attending.



- casual relief 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 procedures in their Medical Management Plan.
- Incident, Injury, Trauma and Illness forms are completed in consultation with the parent if any of the presenting signs occur while the child is in care.
- at least one staff member is in attendance at all times with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate.
- all medication is stored safely out of children's reach but is easily located by staff and not locked away.
- in consultation with the family, they optimise the health and safety of the child in accordance with the child's Risk Minimisation Plan and Medical Management Plan. This includes observation of children for any signs and/or symptoms relating to their particular medical condition.
   For example:

## <u>ASTHMA</u>

Symptoms may include: cough, wheezing, difficulty breathing, chest tightness

- Follow the child's Medical Management Plan
- o In an emergency or if unsure, call an ambulance immediately by dialing 000
- o Commence first aid measures/monitoring
- o Contact the parent/emergency contact when practicable, but as soon as possible

#### ANAPHYLAXIS

Symptoms can include: difficult/noisy breathing, swelling of the tongue, swelling/tightness in the throat, difficulty talking and/or hoarse voice, wheeze or persistent cough, persistent dizziness and/or collapse, child is pale and floppy.

- Follow the child's Medical Management Plan
- Call an ambulance immediately by dialing 000
- o Commence first aid measures/monitoring
- Contact the parent/emergency contact when practicable, but as soon as possible



#### DIABETES

HYPOGLYCAEMIA: occurs when blood glucose levels become too low. This can be caused by missing a meal, having too much insulin or not eating enough carbohydrates for a given dose of insulin or unplanned exercise. Symptoms may include: weakness, trembling, sweating, irrational behaviour, light headedness, lack of concentration, irritability, crying and dizziness. In severe cases, convulsions/seizures, delirium, fainting and a loss of consciousness. HYPERGLYCAEMIA: occurs when blood glucose levels become too high. It can be caused by insufficient insulin, eating extra carbohydrates, sickness or reduced physical activity. Symptoms may include: excessive thirst, tiredness, blurred vision, frequent urination and lack of concentration. In

severe cases, convulsions/seizures, delirium, fainting and loss of consciousness.

- Follow the child's Medical Management Plan
- In an emergency or if unsure, call an ambulance immediately by dialing 000
- o Commence first aid measures/monitoring
- o Contact the parent/emergency contact when practicable, but as soon as possible

In the event that any child suffers from a reaction, incident, situation, or event related to a medical condition staff will:

- Follow the child's Medical Management Plan
- In the case of an emergency or if unsure, call 000 immediately
- o Commence first aid measures/monitoring
- o Contact the parent/guardian when practicable, but as soon as possible
- Contact the emergency contact if the parents or guardian can't be contacted when practicable, but as soon as possible
- Notify the regulatory authority (within 24 hours)

#### 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.
- they provide the preschool with a Medical Management Plan prior to enrolment of their child.
- they consult with venue staff and management to develop a risk minimisation plan.
- the preschool's enrolment form is completed in its entirety providing specific details about the child's medical condition.
- they notify the preschool if any changes are to occur to the Medical Management Plan.
- they provide adequate supplies of the required medication and medical authorisation on the medication record.



- they provide an updated copy of the child's Medical Management Plan every 6 months or evidence from a medical practitioner to confirm the plan remains unchanged.
- they provide enrolment documentation of any medical condition annually.

#### MEDICAL MANAGEMENT PLAN

Any Medical Management Plan provided by a child's parents and/or registered medical practitioner should include the following:

- o specific details of the diagnosed health care need, allergy or relevant medication condition
- supporting documentation (if required)
- o a recent photo of the child
- o current medication and dosage prescribed for the child
- o if relevant, state what triggers the allergy or medical condition
- o first aid/emergency response that may be required
- o any medication that may be required to be administered in case of an emergency
- o further treatment or response if the child does not respond to the initial treatment
- when to contact an ambulance for assistance
- o contact details of the medical practitioner
- the date of when the plan should be reviewed
- a copy of the Medical Management Plan will be displayed for 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 preschool must ensure the Medical Management Plan remains current at all times.



### **RISK MINIMISATION PLAN**

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation plan in place.

A meeting will be arranged with the parents/guardian as soon as the preschool 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
- 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*.
- risk minimisation plans are reviewed in collaboration with families every 6 months.



## COMMUNICATION PLAN

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 communication book is created 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.

## SOURCE

Australian Children's Education & Care Quality Authority (2021).
Australian society of clinical immunology and allergy. ASCIA. <u>https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis</u>
Early Childhood Australia Code of Ethics. (2016).
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 Standard (2020)
National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services*. *Occupational Health and Safety Act 2004*.
Revised National Quality Standard. (2018).
Diabetes Australia: <u>www.diabetesaustralia.com.au</u>

#### REVIEW

POLICY REVIEWED	May 2021	NEXT REVIEW DATE	May 2022
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