



P.O. Box 1050, Woden, ACT, 2606  
 Ph: 6281 3121 Fax: 6281 7077  
 Email: wodenecc@tpg.com.au

## MEDICAL CONDITIONS POLICY

### QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY

Document number:	QA2-M3	Version:	3
Date of issue:	April 2013	Contact:	Reesha Stefek
Date of review:	April 2015		
Updated:	August 2018		

#### National Quality Standard (NQS)

Quality Area 2: Children’s Health and Safety		
2.1	<b>Health</b>	Each child’s health and physical activity is supported and promoted
2.1.1	<b>Wellbeing and comfort</b>	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	<b>Safety</b>	Each child is protected
2.2.1	<b>Supervision</b>	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard

#### Education and Care Services National Regulations

Children (Education and Care Services) National Law	
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
96	Self-administration of medication

*“Providing families with ongoing information about medical conditions and the management conditions is a key priority.”* Community Child Care Co-operative NSW.

We aim to efficiently respond to and manage medical conditions at the Service ensuring the safety and wellbeing of children, staff, families and visitors

## Introduction

Medical conditions include, but are not limited to, asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis. In some cases, these can be life threatening. Woden Early Childhood Centre (WECC) is committed to a planned approach to the management of medical conditions to ensure the safety and well-being of all children at WECC. WECC is also committed to ensuring our educators are equipped with the knowledge and skills to manage situations to ensure all children receive the highest level of care and to ensure their needs are considered at all times. Providing families with ongoing information about medical conditions and the management of conditions is a key priority.

## Scope

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

## Goals – What are we aiming to do?

WECC will minimise the risks around medical conditions of children by:

- collaborating with families of children with diagnosed medical conditions to develop a Medical Risk Minimisation and Communication Plan for their child
- informing all staff, including casual staff, educators and volunteers, and (where appropriate) other children of all children diagnosed with a medical condition and the associated risk minimisation procedures for these
- providing all families with current information about identified medical conditions of children enrolled at WECC, with strategies to support the implementation of the Medical Risk Minimisation and Communication Plan
- ensuring all children with diagnosed medical conditions have a current medical management plan and a Medical Risk Minimisation and Communication Plan that is accessible to all educators
- ensuring all educators are adequately trained in the administration of emergency medication
- where appropriate, working with children with medical conditions to help them understand their condition and communicate their needs relating to their condition

## Strategies – How will it be done?

The Nominated Supervisor or Director will:

- ensure the responsibilities in the management of medical condition are fulfilled
- ensure all educators are committed to adhering to privacy and confidentiality procedures when dealing with individual health requirements
- ensure all staff have a current first aid certificate that includes asthma and anaphylaxis
- ensure training by an authorised authority is provided to all educators in the event of a child enrolled at the Service requires any type of injection whilst in care at WECC

### *Enrolment of children into WECC*

The Nominated Supervisor or Director will:

- ensure that any parent with a child enrolled at WECC that has a specific health care need, allergy or other

relevant medical condition is provided with a copy of this policy in our enrolment pack and on the Centre's website

- inform parents of the requirement to provide WECC with a medical management plan of their child's condition
- collaborate with families of children with medical conditions to develop a Medical Risk Minimisation and Communication Plan to ensure the child's safety and wellbeing so that:
  - the risks relating to the child's specific health care need, allergy or relevant medical condition are assessed and minimised
  - if relevant, practices and procedures in relation to the safe handling, preparation, consumption and service of food are developed and implemented
  - if relevant, practices and procedures to ensure that parents are notified of any known allergens that pose a risk to their child and strategies for minimising the risk are developed and implemented
  - practices and procedures to ensure that all staff members and volunteers can identify the child, the child's medical management plan and the Medical Risk Minimisation and Communication Plan and the location of the child's medication are developed and implemented
  - if relevant, practices and procedures to ensure that the child does not attend WECC without medication prescribed by the child's medical practitioner in relation to the child's specific health care need, allergy or relevant medical condition are developed and implemented
- ensure communication between families and educators is on-going and effective
- ensure all educators are aware of the Medical Management Plan and Medical Risk Minimisation and Communication Plan in relation to each affected individual
- ensure educators have emergency contact information for the child
- ensure educators have a clear understanding about their role and responsibilities when caring for children with a medical condition and are adequately trained in procedures contained in the Medical Management Plan
- inform other families enrolled at the centre of the need to prohibit any items which may present a hazard to children with diagnosed medical conditions
- ensure there is an educator in attendance at all times with a current accredited first aid and CPR training for specific medical conditions
- ensure families provide required information on their child's medical condition, including:
  - medication
  - allergies
  - medical practitioner contact details
  - Medical Management Plan
- ensure a copy of the child's Medical Management Plan is visibly displayed and known to the staff in the Service
- ensure a child is not enrolled at the Service without a Medical Management Plan and prescribed medication by their medical practitioner. Particularly, medication without which a situation could become life threatening (such as asthma inhalers, adrenaline auto-injection devices and insulin)

Families will ensure:

- they provide WECC with information about their child's health needs, allergies, medical conditions and medication on the enrolment form and through verbal communication/meetings
- the Service enrolment form is completed in its entirety providing specific details about the child's medical condition
- they notify the Service of any changes to the Medical Management Plan and/or Medical Risk Minimisation and Communication Plan
- they provide the required medication and complete the long-term medication record
- they provide an updated copy of the child's Medical Management Plan every 12 months
- where appropriate, they talk to their children about having a medical condition and attending an education and care service

### Medical Management Plan (Appendix 1)

- any Medical Management Plan provided by a child's parents and/or registered medical practitioner. This plan should:
  - have supporting documentation if appropriate
  - include a photo of the child
  - if relevant, state what triggers the allergy or medical condition
  - include first aid needs
  - include contact details of the doctor who signed the plan
  - state 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

### Medical Risk Minimisation and Communication Plan (Appendix 2):

All children with a diagnosed medical condition must have a Medical Risk Minimisation and Communication Plan in place. A meeting will be arranged with the parents/guardians as soon as the Service has been advised of the medical condition. During this meeting a Medical Risk Minimisation and Communication Plan will be developed in consultation with the parent/guardian to ensure:

1. that the risks relating to the child's specific health care needs, allergy or relevant medical conditions are assessed and minimised
2. that practices and procedures in relation to the safe handling, preparation and consumption and service of food are developed and implemented (if relevant)
3. that the parents/families are notified of any known allergens that pose a risk to their child, and strategies for minimising the risk are developed and implemented (if relevant)
4. that practices 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 are developed and implemented
5. 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 needs, allergy or relevant medical condition
6. that plan(s) will be reviewed, in collaboration with parents/guardians every 6-12months (depending on the type of plan) and/or with each change in the Medical Management Plan
7. that educators relay all relevant information pertaining to the child's health and medical condition to parents at the end of each day
8. that educators notify parents in advance of any special activities taking place, such as celebrations, sporting events and excursions, so that plans of safe inclusion can be made
9. that educators follow appropriate hygiene practices when managing medical conditions in line with the *Infectious Disease* policy
10. A Medical Risk Minimisation and Communication Plan will be created after the meeting with the parents/guardians to ensure all relevant staff members and volunteers are informed about the *Medical Conditions* policy and the Individual Health Management Plan and Medical Risk Minimisation and Communication Plan for the child; and
11. At all times, families who have a child attending the service who have a diagnosed medical condition will be provided with a copy of this policy which includes a Medical Risk Minimisation and Communication plan and any other relevant policies

### *Communication and of medical information*

The Nominated Supervisor or Director will:

- develop a Medical Risk Minimisation and Communication Plan to ensure that
  - relevant staff members, students and volunteers are informed of the *Medical Conditions* policy, the Medical Management Plan and the Medical Risk Minimisation and Communication Plan for the

- child; and
  - o parents can communicate to WECC any changes to the Medical Management Plan and Medical Risk Minimisation and Communication Plan
- ensure all Medical Management and Medical Risk Minimisation and Communication Plans are accessible to all staff members
- update the Medical Risk Minimisation and Communication Plan as needed
- ensure that all plans are current

Educators will:

- ensure they are aware of enrolled children with medical conditions and are familiar with the Medical Management and Medical Risk Minimisation and Communication plans of each child diagnosed with a medical condition
- consult a Medical Risk Minimisation and Communication plan to ensure they are aware of their responsibilities

#### *Documentation and record keeping*

The Nominated Supervisor or Director will:

- ensure records are confidentially stored for the specified period of time as required by the Education and Care Services National Regulations (Appendix 3)
- provide a copy of the Medication Record to medical staff in the that event further medical intervention is required

Educators will:

- complete a Medication Record when a child receives emergency medication
- provide parents with a copy of the Medication Record upon request

## Evaluation

Educators will respond in an effective manner to any medical conditions, and/or incidents, and ensure that documentation is completed, shared, and stored appropriately. Plans to effectively manage children's medical conditions are developed in consultation with families and implemented. Regular reviews of procedures and policies are undertaken.

## Related policies /documents

- *Anaphylaxis management*
- *Asthma management*
- *Diabetes management*
- *Enrolment and orientation*
- *First aid*
- *Risk Management procedures*

## Statutory legislation and considerations

- Education and Care Services National Regulations

## Sources and references


- National Quality Standard
- Work Health and Safety Act

## Authorisation

*John Rothwell*  
President  
2017-18 WECC Management Committee


Medical Management Plan – Appendix 1

*(Please note this plan is used as an example and a plan for the child's specific Medical Condition should be provided to the Service).*



www.allergy.org.au

# ACTION PLAN FOR Anaphylaxis



For use with EpiPen® Adrenaline Autoinjectors

Name: \_\_\_\_\_  
 Date of birth: \_\_\_\_\_

Photo

Confirmed allergens:  
 \_\_\_\_\_  
 \_\_\_\_\_


Asthma Yes  No

Family/emergency contact name(s):  
 \_\_\_\_\_  
 \_\_\_\_\_

Work Ph: \_\_\_\_\_  
 Home Ph: \_\_\_\_\_  
 Mobile Ph: \_\_\_\_\_


Plan prepared by:  
 Dr: \_\_\_\_\_  
 Signed: \_\_\_\_\_  
 Date: \_\_\_\_\_

**How to give EpiPen®**




**1**

Roll the cap around EpiPen® and **PULL OFF BLUE SAFETY RELEASE.**



**2**

PLACE ORANGE END against outer mid-thigh (with or without clothing).



**3**

PUSH DOWN HARD until a click is heard or felt and hold in place for 10 seconds.  
 REMOVE EpiPen®. Massage injection site for 30 seconds.

Instructions are also on the device label and at: [www.allergy.org.au/epipen](http://www.allergy.org.au/epipen)

MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of a severe allergic reaction to insects)

ACTION

- For insect allergy, flick out sting if visible. Do not remove ticks.
- Stay with person and call for help
- Locate EpiPen® or EpiPen® Jr
- Give other medications (if prescribed) \_\_\_\_\_  
 Dose: \_\_\_\_\_
- Phone family/emergency contact

Mild to moderate allergic reactions may or may not precede anaphylaxis

Watch for any one of the following signs of anaphylaxis

ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Difficulty talking and/or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (young children)

ACTION

- 1** Lay person flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit.
- 2** Give EpiPen® or EpiPen® Jr
- 3** Phone ambulance\* 000 (AU), 111 (NZ), 112 (mobile)
- 4** Phone family/emergency contact
- 5** Further adrenaline doses may be given if no response after 5 minutes (if another adrenaline autoinjector is available)

If in doubt, give adrenaline autoinjector

Commence CPR at any time if person is unresponsive and not breathing normally. If uncertain whether it is asthma or anaphylaxis, give adrenaline autoinjector FIRST, then asthma relief.

EpiPen® is generally prescribed for adults and children over 5 years.  
 EpiPen® Jr is generally prescribed for children aged 1-5 years.  
 \*Medical observation in hospital for at least 4 hours is recommended after anaphylaxis.

Additional information: \_\_\_\_\_

Note: This is a medical document that can only be completed and signed by the patient's treating medical doctor and cannot be altered without their permission.

**Medical Risk Minimisation and Communication Plan**

Child's Full Name:		D.O.B:			
Room:		Age:			
Medic Alert Number (if relevant)		Review Date:			
Does the child have a medical condition that educators need to be aware of?		YES / NO			
If Yes, please explain:					
Does the child need dietary modifications? (If yes, please comment in sections below)		YES / NO			
Action Plan provided by Parent/Guardian		YES / NO			
Where is this displayed?					
Where is medication and or equipment stored?					
Triggers that the child must avoid for the period of this plan					
Please list, in detail, alternative foods and/or substances for the child					
Please provide details of any special care routine (e.g. meals at particular times or intervals for health reasons, avoiding outside play when allergens are present).					
Medical Emergency			Dietary Modifications		
<u>Risk:</u> What are the other issues and/or actual/potential situations that could lead to a medical emergency?	<u>Strategy:</u> What can be done to reduce these risks? What resources are needed?	Who is responsible for this?	<u>Communication:</u> What foods should your child avoid?	<u>Strategy:</u> What alternatives can be offered?	Who is responsible for this?



Child's Full Name:		D.O.B:	
Room:		Age:	
Medical Emergency Communication Plan	Date	Dietary Modifications Communication Plan	Date
Relevant staff, students and volunteers have been informed of the services Medical Conditions Procedures and Guidelines.		Relevant staff, students and volunteers have been informed of the services	
Relevant staff, students and volunteers have been informed of this plan and know where to locate this plan, the Medical Action Plan and all medications and equipment in the event of an emergency.		Relevant staff, students and volunteers have been informed of this plan and know where to locate this plan.	
The services Medical Conditions Policy and other relevant policies (e.g. Anaphylaxis or Asthma) has been provided to the family		The services Allergies Policy and Nutrition, food, beverages and dietary requirement Policy has been provided to the family	
Where necessary, families attending the service will be notified		Where necessary families attending the service will be notified	
Educators will notify parents in advance of any special activities taking place such as celebrations, sporting events and excursions so plans of safe inclusion can be made		Educators will notify parents in advance of any special activities taking place such as celebrations, sporting events and excursions show alternative food options are available.	
Other identified communication strategies		Other identified communication strategies	
<b>Authorisation and release—to be completed by the parent/guardian</b>			
<u>Parent/Guardian</u>			
I have read, understood and agreed with this plan. I approve the release of this information to supervising staff and emergency medical personnel			
Signature of Parent/Guardian			Date: ___/___/___
This Plan is no longer applicable			
Signature of Parent/Guardian or Health Professional			Date: ___/___/___
Notes for use			
To be completed by the <b>SERVICE</b> and the <b>PARENT/GUARDIAN</b> .			
This form is to be used where a person has a proven history of allergy or intolerance or requires a medical care plan for a proven medical condition. An appropriate Medical Action Plan should be completed in addition to this form.			
<u>Office Use Only</u>			
Information has been added to the allergy & dietary requirements display charts <input type="checkbox"/>			
Review date has been recorded ___/___/___ <input type="checkbox"/>			
Nominated Supervisor	Staff initials	Staff initials	Student initials

Education and Care Services National Regulations – **183 Storage of records and other documents**

- (1) The approved provider of an education and care service must ensure that records and documents set out in regulation 177 are stored –
- (a) In a safe and secure place; and
  - (b) For the relevant period set out in subregulation (2).

<b>Record</b>	<b>Keep</b>
Incident and injury	Until the child is aged 25 years
Illness	Until the child is aged 25 years
Death of a child within the service or a death that may have occurred as a result of an incident within our service	Until the end of 7 years after death
Any other record relating to a child enrolled at our service	Until the end of 3 years after the last date on which they attended our service
Record relating to the approved provider	Until the end of 3 years after the last date on which the approved provider operated the education and care service
Record relating to the nominated supervisor or staff member of our service	Until the end of the 3 years after the last date on which the nominated supervisor or staff member provided education and care on behalf of the service
Any other record	Until the end of 3 years after the date on which the record was made