

Medical Conditions

Background

Childcare legislation recognises that children with existing medical conditions attend early education and care services. In order to uphold the safety and wellbeing of these children at all times, it requires educators to be trained to respond appropriately to conditions such as asthma, anaphylaxis and diabetes. Legislation also requires that educators must know the precise response expected of them for each individual child as detailed in a current Medical Management Plan for that child provided by the child's parent(s).

Policy statement

This Policy details how the Service ensures its educators are trained to respond appropriately to conditions such as asthma, anaphylaxis and diabetes. It also details how educators know the precise response expected of them for each individual child as detailed by the child's doctor.

Strategies and practices

- At enrolment, parents are required to complete an enrolment form for their child. The form includes provision for parents to detail any medical conditions or specific health care need their child experiences (e.g. asthma, diagnosed risk of anaphylaxis, diabetes, epilepsy). In addition, the Nominated Supervisor purposefully directs parents' attention to this section of the enrolment form, and stresses the need for accurate and complete information for the Service to effectively meet the child's medical needs. Refer to the Service's *Enrolment and Orientation Policy*. QA 2.1.1, 2.3.2
- Parents are asked to provide the Service with any Medical Management Plan from the child's doctor. The Plan should include a photograph of the child, details of the actions to take in the event of an attack (including administering medication), written permission for the Service to implement the Plan as required, and the contact details of the doctor who signed the Plan. QA 2.1.1, 2.3.2
- The Service uses the Medical Management Plan provided to develop, in collaboration with the parents, a Medical Conditions Risk Minimisation Plan for their child. The Plan identifies the possible risks to the child's specific condition or health care need while at the Service (e.g. exposure to known allergens) so that those risks can be minimised. Further it ensures communication processes are in place so that, at all times, Service educators have the complete, correct and up-to-date information necessary to meet the child's health needs. The Service is guided by templates from recognised authorities such as Anaphylaxis Australia, Asthma Australia, and the Australian Society for Clinical Immunology and Allergy when developing the Medical Conditions Risk Minimisation and Communications Plan. QA 2.1.1
- The Service requires parents to provide any updates to their child's Medical Management Plan (e.g. at any time the child has been reassessed by the doctor, the child's medication has been altered or discontinued, new photograph), and at other times when the Nominated Supervisor requests updates. QA 2.1.1
- A copy of the Medical Management Plan and the Medical Conditions Risk Minimisation Plan is filed with the child's enrolment form. A copy of the Medical Management Plan is also kept where the child's medication is stored. QA 2.1.1, 2.3.3

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- Copies of each child's Medical Management Plan are displayed in strategic places throughout the Service. A copy of the Medical Management Plan is taken on any excursion the child attends. QA 2.1.1, 2.3.3
- The Service takes every precaution to ensure that no child who has been prescribed medication in relation to a specific health care need, allergy or relevant medical condition attends the Service without that medication. QA 2.1.1
- The Nominated Supervisor communicates the specific health needs of each child to all staff/educators including the whereabouts of copies of the Medical Management Plan and any medication for the child. They are given the opportunity to ask questions to clarify that they fully understand the child's medical needs and their responsibilities attending to those needs. The Nominated Supervisor ensures that any updates are promptly conveyed to all staff/educators. QA 2.1.1, 2.3.2
- The contact numbers of emergency Services are displayed beside all telephone outlets in the Service. QA 2.3.3
- All EpiPens and asthma medication are stored readily accessible to all staff (including relief support staff). QA 2.1.1, 2.3.2
- The Service ensures its practices in handling and preparing food and beverages consumed by children at the Service prioritise the medical needs of children with known allergies. The Service is a nut free aware, and educators take all reasonable steps to ensure this mandate is upheld. QA 2.2.1, 2.3.1, 2.3.2
- Health and safety are regular items on team meeting agendas. The topics of common allergies and medical conditions experienced by young children and how to identify and respond to them. QA 2.1.1
- The Service maintains an up-to-date record of the First Aid and CPR status of all educators, together with their anaphylaxis and asthma management training. QA 2.1.4, 4.1.1
- Educators intentionally teach young children about health and safety. This includes making children aware that they and/or their friends may need to take special care about some matters (e.g. the type of food they eat, the brand of sunscreen they use). QA 2.1.4
- At this time, the Service has no children who administer their own medication. However, should a specific need arise the Service's practices will be adjusted to meet that need. QA 2.1.1

Responsibilities of parents

- To inform the Service of any updates to their child's Medical Management Plan.
- To ensure the child's medication is brought to the Service every time the child attends the Service.

Links to other policies

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- Administration of Medication Policy
- Educator Professionalism and Ethics Policy
- Enrolment and Orientation Policy
- Food Preparation, Storage and Handling Policy
- Incident, Injury, Trauma and Illness Policy
- Nutrition, Food and Beverage Policy
- Students, Volunteers and Visitors Policy

Links Education and Care Service National Regulations 2011, National Quality Standard 2011

Regs	85	Incident, injury, trauma and illness policies and procedures
	86	Notification to parents of incident, injury, trauma and illness
	87	Incident, injury, trauma and illness record
	89	First aid kits
	90	Medical conditions policy
	91	Medical conditions policy 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
	246	Anaphylaxis training
	247	Asthma management training

QA	2.1.1	Each child's health needs are supported
	2.1.3	Effective hygiene practices are promoted and implemented
	2.1.4	Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
	2.2.1	Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child
	2.3.1	Children are adequately supervised at all times
	2.3.2	Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
	2.3.3	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
	4.1.1	Educator-to-child ratios and qualification requirements are maintained at all times
	7.1.2	The induction of educators, co-ordinators and staff members is comprehensive
	7.3.1	Records and information are stored appropriately to ensure confidentiality, are available from the service and are maintained in accordance with legislative requirements
	7.3.5	Service practices are based on effectively documented policies and procedures that are available at the service and reviewed regularly

Sources

- Australian Society for Clinical Immunology and Allergy. (n.d.). *ASIA Action plan for anaphylaxis*. <http://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis> accessed 6 February 2016
- Education and Care Services National Regulations 2011.

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- Guide to the National Quality Standard 2011.

Further reading and useful websites

- Allergy New Zealand – <http://www.allergy.org.nz/> accessed 6 February 2016
- Allergy and Anaphylaxis Australia – <http://www.allergyfacts.org.au/> accessed 6 February 2016
- Anaphylaxis Australia. *What is anaphylaxis?* <https://www.allergyfacts.org.au/allergy-anaphylaxis/what-is-anaphylaxis> accessed 6 February 2016
- Asthma Australia. *Asthma Friendly Early Childhood Education & Care.* <http://www.asthmant.org.au/ThreeColPB.aspx?pageid=17179870648> accessed 6 February 2016
- Asthma Australia – <http://www.asthmaaustralia.org.au/> accessed 6 February 2016
- Asthma Foundation of Queensland. (n.d.). *Management of Asthma in Childcare.* <http://www.hartbeattraining.com.au/wp-content/uploads/2010/08/Mgt-of-asthma-in-childcare.pdf> accessed 6 February 2016
- Asthma Australia. (2016). *Resources.* <http://www.asthmaaustralia.org.au/qld/about-asthma/resources/resources> accessed 6 February 2016
- Asthma Australia. *Asthma Action Plan.* (2015). http://www.nationalasthma.org.au/uploads/content/683-NAC-Asthma-Action-Plan-2015_Writeable.pdf accessed 6 February 2016
- Australian Society for Clinical Immunology and Allergy (ASCIA) – <http://www.allergy.org.au/> accessed 6 February 2016
- Department of Health (Western Australia). *Anaphylaxis Management Guidelines for Western Australian Child Care and Outside School Hours Care Service.* http://www.health.wa.gov.au/anaphylaxis/docs/child_care/11289%20CC6%20Guidelines.pdf accessed 6 February 2016
- Diabetes Australia. (2016). *Request a Resource.* <https://www.diabetesaustralia.com.au/request-a-resource> accessed 6 February 2016
- Diabetes NSW – <http://www.australiandiabetescouncil.com/> accessed 6 February 2016
- Queensland Government. (2013): *Severe allergic reactions: Anaphylaxis guidelines for Queensland schools* http://education.qld.gov.au/schools/healthy/docs/anaphylaxis_guidelines_for_queensland_state_schools.pdf accessed 6 February 2016
- Queensland Health – <http://www.health.qld.gov.au/> accessed 6 February 2016

Policy review

Bella Grace Early Learning Centre encourages staff and parents to be actively involved in the annual review of each of its policies and procedures. In addition, the Service will accommodate any new legislative changes as they occur and any issues identified as part the Service's commitment to quality improvement. The Service consults with relevant recognised authorities as part of the annual review to ensure the policy contents are consistent with current research and contemporary views on best practice.

Date reviewed: August 2017

Next Review Date: August 2018

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*Risk Minimisation Plan for children at increased risk of medical emergencies.
(Anaphylaxis/Diabetes/ Asthma/Epilepsy)*

The following procedures have been developed to help protect the child identified at risk of a medical condition.

Child's Name _____ **DOB** ___ / ___ / ___

In relation to the child diagnosed at risk of: _____

<i>Risk Minimisation Plan</i>	<i>Who is Responsible</i>	<i>Risk Management strategies</i>	<i>Comment</i>
Current Medical Management Plan, identifying known allergens has been provided	Parent/Guardian	Action Plan provided before attendance	
Parents/guardians are aware that the child is unable to attend the program without their prescribed medication	Parent/Guardian & Director/Child Educator	Ensure medication is at service otherwise child will not be able to attend	
Parent/guardian is informed that Bella Grace provides each centre with a second auto injection device and Ventolin that may be administered by	Educators	Inform parent/guardian that Bella Grace employees will provide medicine to be administered in case of	

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qualified educators as required in an emergency situation		emergency ONLY	
The prescribed medication expiry date has been checked at enrolment.	Parent/Guardian	Expiry date:	
Medication expiry date is checked monthly	Educators/Director	Ensure expiry date is clearly displayed on service 'Allergy/Illness Register' and checked monthly	
<i>In cases where the child has a severe food allergy all food for this child should be provided and approved by the child's parent/guardian in accordance with their individual Risk Minimisation Plan.</i>	Parent/Guardian	<i>Parent/Guardian to pack an appropriate lunch box. Educators to ensure documented on service 'Allergy/Illness Register'</i>	
<i>Drinks and lunch boxes provided should be clearly labelled with the child's full name.</i>	<i>Parent/Guardian & Educators</i>	<i>Lunch Box and Drinks clearly labelled at all times</i>	
<i>In extreme circumstances it may be appropriate that a highly allergic child does not sit at the same table when others consume food or drink containing or potentially containing the allergen. However, children with allergies should not be separated from all children and should be socially included in all activities.</i>	<i>Educators</i>	<i>Ensure child is safe from allergens while maintaining a social environment at all times. Hand washing before and after eating. Tables cleaned, cleaning practises followed by educators and children</i>	
Parents/guardians are aware that every child attending Bella Grace Early Learning Centres with a medical management plan will have a current Action Plan and identifying photo displayed in the main room of the venue.	Parent/guardian	The children's safety overrides privacy law, Action plan with photo will be displayed.	
<i>Supervision will be increased for children at risk of a severe allergic reaction on special occasions i.e. during excursions or cooking experiences</i>	<i>Educators</i>	<i>Children to be monitored at a higher level when risk is increased.</i>	
<i>Surfaces washed down with detergent and water before and after eating</i>	<i>Educators</i>	<i>Educators to follow standard cleaning practices and procedures</i>	
<i>Some food for cooking, play dough or and science experiments, may be restricted depending on the allergens/triggers of the children attending the service at the time.</i>	<i>Educators</i>	<i>Where necessary and practical allergens and triggers will be removed</i>	
<i>Foods used in activities, should be consistent with the risk minimisation plan and will be discussed with the parent/guardian of a child at risk of a</i>	<i>Educators</i>	<i>Educator's awareness will ensure the activities are appropriate for all children 'Pre-cooking checklist'</i>	

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<i>severe medical reaction such as anaphylaxis, asthma and diabetes</i>			
<i>Food must be consumed in designated areas and all children will be closely supervised at meal and snack times.</i>	<i>Educators/ Children</i>	<i>Keep food to designated areas</i>	
<i>The Risk Minimisation Plan will inform the children's centre. All Bella Grace Early Learning Centres 'except for the Brightwater School Kindergarten' has food provided by Yummy Tuckers which is a set menu</i>	<i>Educators</i>	<i>In extreme food allergy reactions to foods, parent/guardian to provide all of child's food</i>	
<i>All parents/guardians at Bella Grace Brightwater School Kindergarten will be asked not to send food containing ingredients containing allergens that have been identified as a potential trigger; as specified in a child's Risk Minimisation Plan.</i>	<i>Parents/ Guardian</i>	<i>Parents to follow appropriate policies.</i>	
Communication Plan			
<i>Bella Grace Directors are responsible for managing and maintaining regular updates about anaphylaxis, asthma and diabetes and sourcing information for all staff regarding children who may be at risk in care. This includes reviewing all policy and procedure documents annually.</i>			
<i>Bella Grace HR and Directors will ensure employees are current with qualifications to administer first aid response as required</i>			
<i>The Bella Grace Early Learning Centre Team are responsible for ensuring that a current Medical Conditions Policy and Communication Plan is developed and distributed to all parents and staff. Individual communication plans will be developed in conjunction with parents/guardians and will provide information to guide all staff, children, students and parents/guardians in the management of the medical condition including potential triggers, relevant medication and the appropriate first aid response</i>			
<i>The parent/guardian is responsible for informing Bella Grace Directors and educators of any changes to the Child's Risk Minimisation Plan and Anaphylaxis Medical Management Plan. This is compulsory to be signed off by the child's medical practitioner/doctor and updated every 6 months.</i>			
<i>Director of Bella Grace Services will inform families and community that a child at risk of anaphylaxis is in care. This is displayed in the foyer.</i>			
<i>When a child has an increased risk of medical emergencies. (Anaphylaxis/Diabetes/ Asthma) and changes rooms, Bella Grace Management insists directors/ Educators and parent / guardian have a meeting when the child changing rooms to update all necessary parties of action plans.</i>			
<i>Management/Directors additional comments/instructions:</i>			
<i>Parent/Guardians additional comments/instructions:</i>			

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I have received a copy of Bella Grace Early Learning Centre's, Medical Conditions Policy, and appropriate policy and procedures relating to (Anaphylaxis/Diabetes/ Asthma) 'Action Plan'

I / we have read and agree to the conditions of the Risk Minimisation Plan and Communication Plan. This Plan was developed/reviewed in consultation with the parent/guardian and Centre director/ Group leader/teacher on:

___/___/___ Signature of Parent/Guardian1.....Printed name.....

___/___/___ Signature of Parent/Guardian1.....Printed name.....

___/___/___ Signature of Centre Director..... Printed name.....

___/___/___ Signature of Group Leader/Teacher.....Printed name.....