

Dealing with Medical Conditions

Purpose

ECMS is committed to recognising the importance of providing a safe environment for children with specific medical and health care requirements through implementing and maintaining effective practices and a planned approach to managing these.

ECMS will ensure that clear procedures exist to support health, wellbeing and inclusion of all children enrolled at the service.

Medical conditions and other specific health care needs include, but are not limited to asthma, diabetes, epilepsy or a diagnosis that a child is at risk of anaphylaxis. In many cases these can be life threatening.

ECMS 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.

ECMS is committed to recognising the importance of providing a safe environment for children with medical and specific health care requirements through implementing and maintaining effective hygiene practices. This will be achieved through:

- Fulfilling the service's duty of care requirement under the Occupational Health and Safety Act 2004, the Education and Care Services National Law Act 2010 and the Education and Care Services National Regulations 2011 to ensure that those involved in the programs and activities of ECMS services are protected from harm
- Informing educators, staff, volunteers, children and families on the importance of adhering to the Dealing with Medical Conditions Policy to maintain a safe environment for all users, and communicating the shared responsibility between all involved in the operation of the service
- Ensuring that educators have the skills and expertise necessary to support the inclusion of children with additional health needs.

Scope

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of ECMS services, including during offsite excursions and activities.

This policy will be read in conjunction with:

- Anaphylaxis Policy
- Asthma Policy
- Diabetes Policy
- Epilepsy Policy

Background

In the management of medical conditions:

- parents are required to provide a medical management plan if an enrolled child has a specific health care need, allergy or relevant medical condition
- a risk minimisation plan is developed by the nominated supervisor/centre director in consultation with the child's parents/guardians
- a communication plan is developed by the nominated supervisor/centre director in consultation with the child's parents/guardians for educators/staff members and parents/guardians.

Educators/staff members/students and volunteers must be informed about the practices to be followed.

Where a child is enrolled at the service has a specific health care need, allergy or other relevant medical condition, parents/guardians must be provided with a copy of this and other relevant policies.

Medication and medical procedures can only be administered to a child:

- With written authorisation from the parent/guardian or a person named in the child's enrolment record as authorised to consent to administration of medication (Regulation 92(3)(b))
- Following the Operations 2.10 Medication policy & procedure

Educators/Staff may need additional information from a medical practitioner where the child requires:

- Multiple medications simultaneously
- A specific medical procedure to be followed.

If a child with a chronic illness or medical condition that requires invasive clinical procedures or support is accepted by the service, it is vital that prior arrangements and training are negotiated with the parent/guardian, authorised nominees or appropriate health care workers to prepare for the event that the child will require a procedure while in attendance at the service (prior to the child commencing). Parents/guardians and the service should liaise with either the child's medical practitioner or other appropriate service providers to establish such an arrangement. Arrangements must be formalised following enrolment and prior to the child commencing at the service.

Definitions

The terms defined in this section relate specifically to this policy.

AV How to Call Card: A card that the service has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from <http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html>

Communication plan: A plan that forms part of the policy and outlines how the service will communicate with parents/guardians and educators/staff in relation to the policy. The communication plan also describes how parents/guardians and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of any medical condition such as anaphylaxis is enrolled at the service.

Hygiene: The principle of maintaining health and the practices put in place to achieve this.

Medical condition: In accordance with the Education and Care Services National Regulations 2011, the term medical condition includes asthma, diabetes, epilepsy or a diagnosis that a child is at risk of anaphylaxis, and the management of such conditions.

Medical management plan: A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name and a photograph of the child. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCI) Action Plan.

Risk minimisation: The implementation of a range of strategies to reduce the risk of an adverse effect from the mismanagement of a specific medical condition at the service.

Risk minimisation plan: A service-specific plan that details each child’s medical condition, and identifies the risks of the medical condition and practical strategies to minimise those risks, and who is responsible for implementing the strategies. The risk minimisation plan should be developed by families of children with specific medical conditions that require medical management plans, in consultation with educators/staff at the service upon enrolment or diagnosis of the condition (refer to the Anaphylaxis Policy for a sample risk minimisation plan).

Roles & Responsibilities

General Managers	<p>Accountable for:</p> <ul style="list-style-type: none"> Ensuring all children with medical conditions have the appropriate documentation and staff have received professional development prior to the child commencing at the service Ensuring that all staff and volunteers are provided with a copy of this policy and have a clear understanding of the procedures and practices outlined within
<ul style="list-style-type: none"> Area Managers 	<p>Responsible for:</p> <ul style="list-style-type: none"> Ensuring relevant educators/staff receive regular training in managing specific health care needs such as asthma management, anaphylaxis management and any other specific procedures that are required to be carried out as part of the care and education of a child with specific health needs Ensuring at least one educator/staff member who has current accredited training in emergency management requirements for specific medical conditions is in attendance and immediately available at all times that children are being educated and cared for by the service Establishing robust induction procedures that include the provision of information regarding the implementation of the practices outlined in this policy Ensuring families and educators/staff understand and acknowledge each other’s responsibilities under these guidelines
Centre Directors & Nominated Supervisors	<p>Responsible for:</p> <ul style="list-style-type: none"> Implementing this policy at the service and ensuring that all educators/staff follow the policy and procedures set out within Informing the Approved Provider of any issues that impact on the implementation of this policy Developing and implementing a communication plan and encouraging

ongoing communication between parents/guardians and staff regarding the current status of the child's specific health care need, allergy or other relevant medical condition, this policy and its implementation

- Ensuring families provide information on their child's health, medications, allergies, their medical practitioner's name, address and phone number, emergency contact names and phone numbers, and a medical management plan signed by their medical practitioner, following enrolment and prior to the child commencing at the service
- Ensuring that a risk minimisation plan (refer to Anaphylaxis Policy for a sample risk minimisation plan) is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually
- Ensuring that parents/guardians who are enrolling a child with specific health care needs are provided with a copy of this and other relevant service policies.
- Ensuring that the AV How to Call Card is displayed near all telephones
- Identifying specific training needs of educators/staff who work with children diagnosed with a medical condition, and ensuring, in consultation with the Approved Provider, that educators/staff access appropriate training
- Ensuring children do not swap or share food, food utensils or food containers
- Ensuring food preparation, food service and relief staff are informed of children and staff who have specific medical conditions or food allergies, the type of condition or allergies they have, and the service's procedures for dealing with emergencies involving allergies and anaphylaxis
- Ensuring a copy of the child's medical management plan is visible and known to staff in the service. Prior to displaying the medical management plan, the Nominated Supervisor must explain to parents/guardians the need to display the plan for the purpose of the child's safety and obtain their consent (refer to Privacy and Confidentiality Policy)
- Ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in

	<p>accordance with their risk minimisation plan</p> <ul style="list-style-type: none"> • Providing information to the community about resources and support for managing specific medical conditions while respecting the privacy of families enrolled at the service • Administering medications as required, in accordance with the procedures outlined in the Medication Policy • Maintaining ongoing communication between educators/staff and parents/guardians in accordance with the strategies identified in the communication plan, to ensure current information is shared about specific medical conditions within the service.
Educators	<p>Responsible for:</p> <ul style="list-style-type: none"> • Ensuring that children do not swap or share food, food utensils or food containers • Communicating any relevant information provided by parents/guardians regarding their child's medical condition to the Nominated Supervisor to ensure all information held by the service is current • Being aware of individual requirements of children with specific medical conditions • Monitoring signs and symptoms of specific medical conditions and communicating any concerns to the Nominated Supervisor • Adequately supervising all children, including those with specific medical conditions • Informing the Nominated Supervisor of any issues that impact on the implementation of this policy.
Parents/guardians	<ul style="list-style-type: none"> • Informing the service of their child's medical conditions, if any, and informing the service of any specific requirements that their child may have in relation to their medical condition • Developing a risk minimisation plan with the Nominated Supervisor and/or other relevant staff members at the service • Providing a medical management plan signed by a medical practitioner, either on enrolment or immediately upon diagnosis of an ongoing medical condition. This medical management plan must include a current photo of the child and must clearly outline procedures to be followed by educators/staff in the event of an

	<p>incident relating to the child's specific health care needs</p> <ul style="list-style-type: none"> • Notifying the Nominated Supervisor of any changes to the status of their child's medical condition and providing a new medical management plan in accordance with these changes • Informing the Nominated Supervisor of any issues that impact on the implementation of this policy by the service.
Volunteers/Students	<ul style="list-style-type: none"> • are responsible for following this policy and its procedures.

Procedure

Under regulation 90 and 92, all children with a medical condition that requires particular treatment or first aid while at the service must have a medical management plan completed by the child's medical practitioner. This plan must include the following information:

- Identifying information - child's name, date of birth, recent photograph.
- Information on the child's medical condition.
- Symptoms and consequences of the condition.
- Indicators of the need for medical intervention or treatment.
- Emergency contact people and phone numbers (including parents/guardians and child's medical practitioner).
- Clear instructions to cover all foreseeable circumstances including management in the service (indoors and in the playground/garden) and on excursions.
- Emergency procedures.
- Specific information about medication including administration, storage, timing, dosage and possible side effects.
- Relevant forms and written advice from medical practitioners and parents/guardians regarding the medical treatment of the child.
- Any specific instructions on meal management.
- Toileting procedures and management.
- The people responsible for particular actions.
- Consideration of issues of privacy and confidentiality - who needs to know what.
- The degree of involvement by the child in their own medical action plan, including self-administration by a child over preschool age.

The Nominated supervisor/centre director will ensure the following documents are completed in full prior to the child commencing:

- The medical management plan for the child is signed by the child's registered Medical Practitioner and is visible to all staff. A copy of the child's medical management action plan is included with the child's auto-injection device kit or medicine.
- A child's individual risk minimisation plan is completed in consultation with the parents/guardian, which includes strategies to address the particular needs of each child at risk of anaphylaxis, diabetes, asthma or epilepsy and this plan is implemented.

- A child’s communication plan is developed using information from the child’s risk minimisation plan
- Where the child has been prescribed an Adrenaline auto-injection device it is stored in an insulated container (auto-injection device kit), in a location easily accessible to adults (not locked away), inaccessible to children and away from direct sources of heat.
 - Adrenaline auto-injection device (within expiry date) or relevant medication is available for use at any time the child is in the care of the service.
 - All staff, including relief staff, are aware of each auto-injection device kit or other prescribed medication location and the location of the child’s medical management action plan.
- Parents/guardians of a child diagnosed at risk of anaphylaxis have been provided a copy of this Policy and the policy/ies relevant to the child’s medical condition. (Anaphylaxis, Epilepsy, Asthma, Diabetes)
- All parents/guardians are made aware of this Policy.
- Staff who are responsible for the child/ren diagnosed at risk of anaphylaxis, epilepsy, asthma or diabetes undertake accredited training, which includes strategies for management, risk minimisation, recognition of the medical condition, emergency treatment. This would also include practice with an auto-injection device trainer or any other devices, and is reinforced at quarterly intervals and recorded annually.
- If food is prepared at the service, measures are in place to ensure children at risk of anaphylaxis or diabetes are not at risk. See Operations policies 2.4 Nutrition, food, beverages and dietary requirements and 2.5 Food safety
- Notify parents/guardians at least 14 days before making any change to this policy or its procedures.

Policy Created Date	July 2014, Reviewed July 2016
Policy Review Date	September 2018
Sources and Further Reading	National Health and Medical Research Council (2005), Staying Healthy in Child Care: Preventing infectious diseases in child care , or email nhmrc.publications@nhmrc.gov.au . Services National Law Act 2010: Section 173, Education and Care Services National Regulations 2011: Regulations 90, 91, 96 Health Act 1958, Health Records Act 2001 Occupational Health and Safety Act 2004
Related to NQS Q.A	2.1.1, 2.3.2, 7.1.2

Attachments

2.12.1 Individual Risk Minimisation Plan

2.12.2 Communication Plan

2.12.3 Medical management plan GENERAL (to be completed by a medical practitioner only)

2.12.4 Service Risk minimisation plan

We are also obliged to use these specific templates relevant to the condition : (these templates replace 2.12.3)

ASCIA Action plan for Anaphylaxis

