

Early Childhood Management Services

Quality Area 2: Dealing with Medical Conditions Procedure Early Childhood Education

Dealing with Medical Conditions Procedure

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.

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- A child's individual risk minimisation plan, 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.

Medical Conditions

The Nominated Supervisor will:

Ensure at all times that a child with a medical condition that may require particular treatment or first aid while at the centre is in attendance at least one staff member on duty will have the skills, knowledge and expertise to meet the child's ongoing health needs and ability to respond in an emergency. This includes knowing about:

- The child's medical management plan.
- The child's risk minimisation plan.
- How to keep the child well.
- The signs and symptoms that the medical condition requires attention or treatment.
- How to respond if the child shows any sign or symptom.

Educators will:

- Provide a safe environment by ensuring the child's risk minimisation plan is collated onto a medical management plan and communication plan and is implemented
- Establish and maintain positive, collaborative relationship with the child's families to facilitate effective communication and decision making
- Inform families of any planned special occasions or events that could affect the child and discuss options for the child's involvement and ways that the child can be fully included.

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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 (Current as at 1 July 2018): Regulations 90, 91, 96
Health Act 1958,
Health Records Act 2001
Occupational Health and Safety Act 2004

Attachments

Individual Risk Minimisation Plan

Communication Plan

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

Service Risk minimisation plan

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