

MEDICAL CONDITIONS POLICY

To support children's wellbeing and manage specific healthcare needs, allergy or relevant medical condition Happy Haven OSHC will work in accordance with the Education and Care Services National Regulations to ensure health related policies and procedures are implemented. Happy Haven OSHC aim to take every reasonable precaution to protect children's health and safety by explicitly adhering to individual medical management plans and risk minimisation and communication plans and responding to any emergency situation should they arise.

NATIONAL QUALITY STANDARD (NQS)

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.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
86	Notification to parent of incident, injury, trauma or illness
87	Incident, injury, trauma and illness record
90	Medical Conditions Policy
90 (1) (a)	The 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
162(c) and (d)	Health information to be kept in enrolment record
168(2)(d)	Policies and procedures are required in relation to dealing with medical conditions in children, including the matters set out in regulation 90
170	Policies and procedures are to be followed
173(2)(f)	Prescribed information to be displayed- a notice stating that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the service
174	Time to notify certain circumstances to Regulatory Authority

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of Medication Policy Allergy Management Policy Asthma Management Policy Anaphylaxis Management Policy Celebrations Policy Child Safe Environment Policy Diabetes Management Policy Enrolment Policy	Epilepsy Management Policy Health and Safety Policy Incident, Injury, Trauma and Illness Policy Privacy & Confidentiality Policy Sick Children Policy Work Health and Safety Policy SOP Identifying Medication Needs of Children in Care, Coupled with Responsible Preparation, and Administration of Medication
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PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure services have policies and procedures in place for medical conditions. Happy Haven OSHC aim to efficiently respond to and manage medical conditions, health care needs or allergies of children and staff ensuring the safety and wellbeing of all children, staff, families and visitors at each of our OSHC services.

SCOPE

This policy applies to children, families, staff, educators and trainees of Happy Haven OSHC.

DUTY OF CARE

Happy Haven OSHC has a legal responsibility to take reasonable steps to ensure the health needs of children enrolled in each service are met. This includes our responsibility to provide:

- a. A safe environment for children free of foreseeable harm *and*
- b. adequate supervision of children at all times.

'Medication' refers to any:

- Prescribed or non-prescribed medication
- over the counter medications e.g. paracetamol, eye drops
- alternative therapies (vitamins, minerals, supplements etc.)

IMPLEMENTATION

Happy Haven OSHC involves all staff, educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our programs. Our OSHC services are committed to adhering to privacy and confidentiality procedures when dealing with individual health care needs, allergies or relevant medical conditions.

There are several concerns that must be considered when a child with a diagnosed health care need, allergy, or medical condition is enrolled at Happy Haven OSHC. Key procedures and strategies must be in place prior to the child commencing at the service to ensure their individual health, safety and wellbeing. It is imperative that all educators at the service follow a child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy, or medical condition.

**THE APPROVED PROVIDER/ REGIONAL DIRECTOR/ NOMINATED SUPERVISOR/
RESPONSIBLE PERSON WILL ENSURE:**

- All enrolment forms are reviewed to identify any specific health care need, allergy or medical condition
- existing enrolment forms are reviewed, and parents contacted to confirm if the existing diagnosed health care need, allergy or relevant medical condition still applies and whether any new needs have been diagnosed
- families are provided with a copy of the service's *Medical Conditions Policy* on enrolment
- a child is not enrolled at, nor will attend the OSHC service without a Medical Management Plan and prescribed medication by their medical practitioner. In particular, medication for life-threatening conditions such as asthma, anaphylaxis or diabetes must be provided to the service each session they attend [e.g. asthma inhalers, adrenaline auto injection devices or insulin]
- educators and staff have knowledge and access to this policy and relevant health management policies (*Asthma Management Policy/ Anaphylaxis Management Policy/Diabetes Management Policy*)
- educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical condition that may be ongoing or acute/short term in nature
- new staff members are provided with induction and ongoing training to assist senior leadership, educators and other staff effectively
- all aspects of operation of the service must be considered to ensure inclusion of each child into the program
- develop a Risk Minimisation and Communication Plan in collaboration with the family and lead educators to ensure communication between families and educators is on-going and effective
- educators are provided with annual ASCIA anaphylaxis e-training to provide consistent and evidence-based approaches to prevention, recognition and emergency treatment of anaphylaxis [this is not mandated]
- at least one educator or Nominated Supervisor attends all times with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate (as a regulation requirement)
- staff, educators and portfolio holders have a clear understanding about their role and responsibilities when caring for children with a diagnosed health care need, allergy or relevant medical condition

- at least one staff member with authority to administer controlled substances is rostered at each service requiring the administration of a controlled substance
- families provide required information on their child's health care need, allergy or relevant medical condition, including:
 - Medication requirements
 - allergies
 - medical practitioner contact details
 - Medical Management Plan.
- A Medical Management Plan has been developed in consultation with families 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 e.g: (ASCIA) or National Asthma Council of Australia
 - an individual Diabetes Management Plan is developed in consultation with parents and the child's medical practitioner
 - an individual Seizure Management Plan and Emergency Medication Management Plan is developed in consultation with parents and the child's medical practitioner.
- A Risk Minimisation and Communication Plan has been developed in consultation with parents and the Responsible Person prior to the child commencing at the service
- all educators will be informed immediately about any changes to a child's Medical Management Plan, Risk Minimisation and Communication Plan or other health support documents
- to record any prescribed health information and retain copies of the Medical Management Plan, Anaphylaxis Management Plan, Seizure Management Plan or Asthma Management Plan and Risk Minimisation and Communication Plan in the child's enrolment folder
- staff and educators have access to emergency contact information for the child
- casual staff are informed of children and staff members who have specific medical conditions, food allergies, the type of condition or allergies they have, and Happy Haven OSHC's procedures for dealing with emergencies involving allergies and anaphylaxis
- 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 OSHC service

- procedures are adhered to regarding the administration of medication at all times
- Medication Log record is accurately completed and signed by the educator and witnesses
- medication self-administered by a child over preschool aged, is only permitted with written authority signed by the child's parent or other responsible person named and authorised in the child's enrolment record to make decisions about the administration of medication (HSP154)
- a notice is displayed prominently in the main entrance of the service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service, and providing details of the allergen/s .
- In the event that a high-risk scenario where a child suffers from a reaction, incident, situation, or event related to a medical condition the educators will follow the child's Emergency Medical Management Plan as per Regulation 90(1)(c)(ii)
 - The first aid responder will commence first aid measures immediately as per the child's medical management plan
 - an ambulance is called by dialling 000 if the child does not respond to initial treatment
 - the Responsible person will contact the child's parent/guardian or emergency contact when practicable, but as soon as possible
 - the Responsible Person will ensure the *Incident, Injury, Trauma and Illness Record* is completed in its entirety
 - the Responsible Person will notify Happy Haven OSHC, who will then notify the regulatory authority (within 24 hours) in the event of a serious incident.

FAMILIES WILL ENSURE:

- The OSHC service enrolment form is completed in its entirety providing specific details about the child's medical condition
- they provide Happy Haven OSHC Families Team and the Responsible Person with information about their child's health needs, allergies, medical conditions, and medication requirements on the enrolment form and through email and verbal communication/meetings
- they provide the OSHC service with a Medical Management Plan (and where relevant an individual Seizure Management Plan, Emergency Medical Management Plan, Asthma

Management Plan, Anaphylaxis Management Plan, or Diabetes Management Plan) prior to enrolment of their child

- they consult with the Nominated Supervisor/ Responsible Person to develop a Risk Minimisation and Communication Plan
- they acknowledge they have received/or are provided access to the Happy Haven OSHC *Medical Conditions Policy and Administration of Medication Policy* at time of enrolment
- they email the OSHC service directly, if any changes are to occur to the Medical Management Plans
- notify the OSHC service, verbally when children are taking any short-term medications AND whether these medications may be self-administered (only applicable for a child over preschool age and a HSP154 Decision Making Tool for Medication Administration form must be completed)
- they provide adequate supplies of the required medication for each session the child attends
- they supply necessary supplies to be able to administer the medication accurately, for example asthma spacer, vessel, measuring device, pill cutter etc
- they provide a Medication Agreement detailing:
 - The child's name
 - medical condition
 - name of medication
 - time medication is to be administered
 - the correct dosage (including strength/ concentration and amount)
 - the route of administration (oral, applied to skin etc)
 - how the condition is to be managed.
- They provide an updated copy of the child's Medical Management Plan annually, prior to its expiry date or supply evidence from a Medical Practitioner to confirm the plan remains unchanged
- they provide written consent for their child's medical management plan to be displayed in the OSHC service, in an area generally accessed by educators ensuring the child's privacy.

Self-Administration of Medication

A child over preschool age may self-administer medication under the following circumstances:

- A family provides written authorisation with consent (HSP154 Decision Making Tool for Medication Administration) which is recorded in the child's enrolment
- medication is stored safely in the original pharmacy labelled container or package
- the responsible staff or educator will provide medication to the child when required
- Supervision is provided by the responsible staff or educator whilst the child is self-administering medication
- an accurate record is made in the child's Medication Log recording that the medication has been self-administered
- the Medication Log is signed by the family upon collection of their child, acknowledging the dose and time of administration of medication (e.g. Asthma inhaler, Diabetic medication).

MEDICAL MANAGEMENT PLAN (Health Care Plan)

A Medical Management Plan is sometimes referred to as a Health Care Plan. The plan must be completed by a Medical Practitioner. Any Medical Management Plan provided by a child's family and/or registered medical practitioner should include the following:

- Specific details of the diagnosed health care need, allergy or relevant medication condition
- supporting documentation (if required)
 - A child with diagnosed epilepsy will also require a *Seizure Management Plan* and *Emergency Management Plan*.
- A recent photo of the child
- current medication and dosage prescribed for the child
- if relevant, state what triggers the allergy or medical condition
- first aid/emergency response that may be required
- any medication that may be required to be administered in case of an emergency
- further treatment or response if the child does not respond to the initial treatment
- when to contact an ambulance for assistance

- contact details of the medical practitioner who signed the plan
- the date of when of when the plan should begin
- the date of 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, whilst ensuring the child's privacy by displaying only in an area generally only available to staff of the OSHC service.

- The OSHC service will support families with reminders to provide a reviewed and updated Medical Management Plan prior to the expiry date
- families will ensure that educators and staff are updated immediately about any changes to a child's medical management plan.

RISK MINIMISATION AND COMMUNICATION PLAN

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation and communication plan in place (regulation 90(1)(c)). The following two forms can be used to support this plan:

- HSP120 Health Support Agreement
- HSP121 Safety and Risk Management Plan

The Director/Responsible Person will arrange a meeting with the family as soon as the OSHC service has been advised of the diagnosed healthcare need, allergy or medical condition.

During this meeting a Risk Minimisation and Communication Plan will be developed in consultation with the family 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 OSHC service is 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 educators and trainees can identify the child, the child's Medical Management Plan and the location of the child's medication. This is done via a thorough induction process, regular training, service orientations and development of Standard Operating Procedures (SOP)
- that the child does not attend the service without required relevant documentation and medication prescribed by the child's medical practitioner in relation to the child's specific health needs, allergy or medical condition
- Risk Minimisation and Communication Plan(s) are reviewed prior to the expiry date of existing plans and/or revised with each change in the Medical Management Plan as authorised by a Medical Practitioner in conjunction with the family
- all relevant information pertaining to the child's health and medical condition is communicated to the family at the end of each day by educators
- the family is notified by the OSHC service in advance (e.g. through Weekly programs /Vacation Care programs) of any special activities taking place such as celebrations, sporting events or excursions to enable families to raise awareness of any additional requirements outside of existing plans and medical documentation currently in place
- appropriate hygiene practices are followed by educators when managing medical conditions in accordance with the *Control of Infectious Diseases Policy*
- All educators and trainees are informed about:
 - Relevant policies such as Medical Conditions and Administration of Medication policies
 - the Medical Management and Risk Minimisation and Communication Plans and the means in which the family can communicate any changes to the diagnosed health care need, allergy or medical condition directly to the service, via email.
- The family is aware that it is their responsibility to communicate any changes to the *Medical Management Plan* and *Risk Minimisation and Communication Plan* for the child directly to the services email address.

At all times, families who have a child attending the OSHC service who have a diagnosed healthcare need, allergy or medical condition will be provided with a copy of the Medical Conditions policy and

other relevant policies specific to their child's health management and Risk Minimisation and Communication plans.

RESOURCES

[ASCIA anaphylaxis e-training for schools and early childhood education/care](#)

[ASCIA plans for Anaphylaxis](#)

[Coeliac Australia](#)

[Cystic Fibrosis Australia](#)

[Diabetes Australia](#)

[Epilepsy Foundation](#)

[National Asthma Australia](#)

SOURCE

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REVIEW

POLICY REVIEWED	APRIL 2022	NEXT DATE	REVIEW	APRIL 2023
MODIFICATIONS	Updated to new ChildCare Desktop format			
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT DATE	REVIEW
April 2022	•		April 2023	
	•			