



Remote Child Care Services NORTHERN MIDLANDS COUNCIL/MIDLANDS RURAL REMOTE CHILD CARE SERVICES

HUMAN RESOURCES POLICIES & PROCEDURES

Policy Name: MEDICAL CONDITIONS AND RISK MINIMISATION PLAN

Policy Number: 1079

Originated Date: March 2015

Amended Date/s:

Applicable Legislation: Work Health and Safety Act 2012

National Quality Framework & Standards, Regulations and the

Law

Child Care Act 2001

Dataworks Reference:

MEDICAL CONDITION POLICY

PURPOSE:

This policy will provide guidelines for Midlands Rural and Remote Child Care Service to ensure that;

- ➤ Clear procedures exist to support the health, wellbeing and inclusion of all children enrolled at the service.
- > Service practices support the enrolment of children and families with specific health care requirements.

POLICY STATEMENT

1. VALUES

The Perth Child Care Service 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 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 Educational and Care Services National Regulations 2011 to ensure that those involved in the programs and activities of the Midlands Kids Club 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.





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Ensuring that educators have the skills and expertise necessary to support the inclusion of children with additional health needs.

2. SCOPE

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

This policy should be read in conjunction with:

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

3. BACKGROUND AN LEGISLATION

BACKGROUND

An approved service must have a policy for managing medical conditions that includes the practices to be followed:

- > In the management of medical conditions
- ➤ When parents are required to provide a medical management plan if an enrolled children has a specific health care need, allergy or relevant medical condition.
- ➤ When developing a risk minimisation plans in consultation with the child's parents/guardians.
- When developing a communication plan for educators and staff members and parents/guardians.

Educators, staff members and volunteers must be informed about the practices to be followed. If a child 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))
- ➤ With two adults in attendance one of whom must be an educators. One adult will be responsible for the administration and the other adult will witness the procedure.





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If the medication is in its original container bearing the child's name, dose and frequency of administration.

Refer to the Administration of Medication Policy for more information.

Educators and 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 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. 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.

Self-administration by a child over preschool age.

Services who provide education and care to a child over preschool age (as defined in the Education and Care Services National Regulations 2011) may allow a child over preschool age to self-administer medication. The Approved Provider must consider their duty of care when determining under what circumstances such permission would be granted.

- ➤ Where a child over preschool age can self-administer medication/medical procedures, written permission must be provided by the child's parent/guardian.
- Parents/guardians will provide written details of the medical information and administration protocols from the child's medical /specialist medical practitioner(s).
- ➤ The self-administration of medication or medical procedures by children over preschool age will be undertaken only under the supervision of a staff member/educator with current approved first aid qualifications.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- Education and Care 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
- National Quality Standard, Quality Area 2: Children's Health and Safety
 - Standard 2.1 Each Child's health is promoted





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- Element 2.1.1 Each child's health needs are supported
- Element 2.3.2 Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.
- National Quality Standard, Quality Area 7: Leadership and Service Management
 - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
 - Element 7.1.2: The induction of educators, co-ordinators and staff members is comprehensive.
- Occupational Health and Safety Act 2004
- National Regulations
 - 90 Medical Condition Policy
 - 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

4. Definitions

Communication Plan: A plan that forms part of the policy and outlines how the service will communicate with parents/guardians and 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 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 conditions, 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 9ASCIA) Action Plan.





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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 staff at the service upon enrolment or diagnosis of the condition (refer to the Anaphylaxis Policy for a sample risk minimisation plan).

5. RELATED POLICIES

Service Policies

- Administration of First Aid Policy
- Administration of Medication Policy
- Anaphylaxis Policy
- Asthma Policy
- Dealing with Infectious Diseases Policy
- Incident, Injury, Trauma and Illness Policy
- Privacy and Confidentiality Policy
- Supervision of Children Policy

PROCEDURES

The Approved Provider is responsible for:

- ➤ Ensuring that all staff, educators, students and volunteers are provided with a copy of this policy and have a clear understanding of the procedures and practices outlined within.
- ➤ 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 relevant educators/staff receive regular training in managing specific health care needs such as asthma management, anaphylaxis management and any other 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.





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- ➤ 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.
- ➤ 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 of a risk minimisation plan) is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed 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.

The Nominated Supervisor is responsible for:

- > 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
- ➤ 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 that 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, 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 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.
- ➤ Ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan.
- ➤ Providing information to the community about resources and support for managing specific medical conditions while respecting the privacy of families enrolled at the service.





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- Administering medications as required, in accordance with the procedures outlined in the Administration of 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.

Certified Supervisors and other educators are responsible for:

- ➤ 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 are responsible for:

- 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 educators and 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 incident relating to the child's specific health care needs.
- 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.





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Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider and Nominated Supervisor will:

- Regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- Monitor the implementation, compliance, complaints and incidents in relation to this policy.
- ➤ Ensure that all information on display and supplied to parents/guardians regarding the management of medical conditions is current.
- ➤ Keep the policy up-to-date with current legislation, research, policy and best practice
- Revise the policy and procedures as part of the service's policy review cycle, or as required

POLICY REVIEW

- . The service will review this Policy, every 12 months or sooner if required.
- . Families are encouraged to collaborate with the service to review the Policy.
- . All Staff are essential stakeholders in the policy review process and will be encouraged to be actively involved.
- . Date of last review January 2020
- Date of next review January 2021

SOURCES

- National Health and Medical Research Council (2005), Staying Healthy in Child Care: Preventing infectious diseases in child care, available at www.nhmrc.gov.au/guidelines.or.email.nhmrc.publications@nhmrc.gov.au.
- ➤ Health and Safety in Children's Services, Model Policies and Practices, 2nd Edition (2003):

www.sphcm.med.unsw.au/SPHCMWeb.nsf/resources/ccModelPolicies.pdf/\$file/ CCModel Policies.pdf





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MIDLANDS RURAL AND REMOTE CHILD CARE CENTRE Risk Minimisation Plan for children at increased risk of medical emergencies (Anaphylaxis/Diabetes/Asthma

The following procedures have been developed in consultation with the parent/guardian and implemented to assist in protecting the child identified as at high risk of a medical emergency:

Childs Name DOB / /

In relation to the child diagnosed at risk	Who is Responsible	Risk Management
of:		Strategies
Current Medical Management Plan,	Parent/Guardian	Action plan
identifying known allergens has been		provided before
provided		attendance.
Parents/guardians are aware that the child	Parent/Guardian/	Ensure medication
is unable to attend the program without	Child/Educator	is at the service
their prescribed medication. It is the		otherwise the child
responsibility of the families to ensure that		will not be able to
medication goes home at the end of the		attend.
day		
Parent/Guardian is informed that the	Educators and staff	Inform
Service provides a second auto injection		parents/guardians
device and Ventolin that may be		that the service
administered by educators and staff as		provide medication
directored by an emergency medical		to be administered
advisor if required.		incase of an
All educators and staff are trained in		emergency ONLY
asthma and anaphylaxis emergency		
procedures and how to adminster an auto		
injection device and ventolin.		
The prescribed medication expiry date has	Parents/ guardians	Expiry Date
been checked at enrolment.		
Educators and staff at the Service have	Educators	Expiry Date
checked prescribed medication expiry date		
quarterly.		
In cases where the child has a severe food	Parent/guardian	Parent/Guardian to
allergy all food for this child should be		assist child to pack
checked and approved by the child's		an appropriate





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parent/guardian in accordance with their individual Risk Minimisation plan.		lunch box.
Drinks and lunch boxes, containers, cutlery and including treats provided by the parent/guardian for this child should be clearly labelled with the child's name.	Parent/Guardian/ Child	Lunch box, containers, cutlery and drink bottle should be clearly labelled before attending the service.
There should be no trading or sharing of food, food utensils and containers with this child whilst in care at the Service.	Child/Educator	Discuss at the Service with all children and educators.
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 other children and should be socially included in all experiences and activities.	Child/Educator	Ensure child is safe from all allergens whilst maintaining a social environment at all times. Hand washing before and after eating. Tables sanitised, hygiene practices adhered to at all times.
Parents/guardians are aware that every child attending the Service with a medical management plan will have a current Action plan and identifying photo displayed in the staff office and Medical management plan folder.	Parents/Educators	The children's safety overrides privacy law, Action plan with photo will be displayed.
Supervision will be increased for children at risk of a severe allergic reaction on special occasions i.e. during excursions and workshops.	Educators/Staff	Children to be monitored at a higher level when risk is increased.
Ensure that all tables and bench tops are washed down and sanitised before and after eating.	Educators/Staff	Educators to follow standard practices.
Some food, food containers, boxes and packaging in crafts, cooking and science experiments, may be restricted depending on the allergens/triggers of the children attending the service at the time.	Educators/Staff	Where necessary and practical allergens and triggers will be removed from the





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		service.
Foods used in experiences, should be	Educators/Staff	Educator
consistent with the risk minimisation plan		awareness will
and will be discussed with the		ensure the
parent/guardian of a child at risk of a		experiences are
severe medical reaction such as		appropriate for the
anaphylaxis, asthma and diabetes.		children at the
		Service.
Food must be consumed in designated	Educators/Staff/Children	Keep food to
areas and all children will be closely		designated areas
supervised at meal and snack times.		
All parents/guardians of children attending	Educators/Staff	All
the service will be sent home a letter,		parents/guardians
informing them that a child with a severe		are made aware
anaphylactic reaction attends the service		that a child with a
stating the allergens.		severe
		anaphylactic
		reaction attends
		the Service.
All parents/guardians will be asked not to	Parents/Guardians	Parents/Guardians
send food containing ingredients		to follow
containing the allergens that have been		appropriate
identified as a potential trigger; as		policies and
specified in a child's Risk Minimisation		procedures.
plan.		
CONANALINICATION DI ANI DEC CO		

COMMUNICATION PLAN REG 90 c iv

The Service Director, educators, staff and Northern Midlands Council are responsible for managing and maintaining regular updates about the anaphylaxis, sourcing information for all staff regarding children who may be at risk of anaphylaxis in care. This includes reviewing all policies and documents annually.

The Service Director, educators, staff are responsible for ensuring that a current Medical Management Policy and Communication Plan is developed and distributed to all parents and educators/staff. Individual communication plans will be developed in conjuction with parents/guardians and will provide information to guide all educators, staff, children, students parents/guardians in the management of the medical condition including potential triggers, relevant medication and the appropriate first aid response.

The parents/guardians is responsible for informing the Service of any changes to their Child's Risk Minimisation Plan and Anaphylaxis Medical Management Plan.

The Director/Educators/Staff will inform families and the service community that a child at risk of anaphylaxis is in care and will endeavour to ensure that the items identified in the Medical Management Policy, Anaphylaxis Management Plan and Risk Minimisation Plan are not present in the program or service.

Parents Addtional Comments/Instructions: i.e please note here if the child is to self





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administer

I have received a copy of the Midlands Kids Club Anaphylaxis and Allergies in Children Policy
1,
and have read and agree to the conditions of the Risk Minimisation Plan. This plan was
developed/reviewed in consultation with the parent/guardian on//,/,
<i>,,</i> / and//
Signed Director of Midlands Kids Club
Printed name:
Signature of Parent/Guardian: