



# GUIDING PRINCIPAL MEDICAL CONDITIONS POLICY

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY

## **Introduction:**

We work closely with children, families and, where relevant, schools and other health professionals to manage medical conditions of children attending the service. We will support children with medical conditions to participate fully in the day to day program in order to promote their sense of wellbeing, connectedness and belonging to the service ("My Time, Our Place" 1.2, 3.1).

Our Educators will be fully aware of the nature and management of any child's medical condition and will respect the child and the family's confidentiality ("My Time, Our Place" 1.4). Medications will only be administered to children in accordance with the National Law and Regulations.

This policy is designed to support and educate all parties of the procedures, policies and management around medical conditions including, but not limited to, *Allergy and Anaphylaxis, Asthma, Diabetes and Epilepsy*.

## **Governance:**

- All educators (whether casual, part time or full time) are subject to the policies and procedures in governing PCYC- Out of School Hours.

## **Definition:**

- Educators: Staff who hold qualifications in Children's Education and Care
- Staff: Staff who don't hold any qualifications in Children's Education and Care
- Family: Parent or legal guardian of child

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**Procedure:****The service Coordinator has a responsibility to:**

- Communicate with the family to arrange a suitable time to discuss the child's medical condition and develop appropriate medical plan.
- Provide family with a copy of this policy in accordance with Regulation 91.
- Discuss with families the medication administration procedures and ensure their understanding. This may include self-medicating.
- Communicate with all Educators, staff and Club Manager of the child's medical condition and provide copies of the appropriate risk minimisation and communication plan.
- Ensure all medical plans are received in colour, with a clear and coloured photo of the child attached.
- Ensure medical conditions management plan is completed in full and includes:
  - Emergency details of parent/guardian
  - Details of the medical condition
  - Details of any medication required and administration methods
  - Details of symptoms or identified behaviours
  - Risk assessment
  - Medical equipment required
  - Communication plan (to be updated regularly)
- Ensure the plan remains current, reviewed every 6 months and any changes communicated to relevant Educators, staff and Club Manager.
- Medication, if any, is kept in a lockable box accessible to all Educators and staff in the event of an emergency

**The Educators/Staff will:**

- Communicate with families regarding their child's medical management plan and of any noticeable observations or symptoms throughout the day.
- Read and understand the medical management plan and follow all medication and risk minimisation directions as outlined in the plan.
- Medication, if any, is kept in a lockable box accessible to all Educators and staff in the event of an emergency
- If a child has no known diagnosis or medical management plan and shows signs or symptoms of an anaphylactic reaction, staff must commence emergency procedures and immediately call emergency services on '000'. Staff are to follow advice given by the operator whilst waiting for ambulance to arrive. Signs and symptoms of an anaphylactic reaction can include but are not limited to:
  - Skin reactions such as hives or paleness
  - Nausea, vomiting or diarrhea
  - Weak and rapid pulse
  - Swollen tongue or lips
  - Wheezing or difficulty breathing
  - Tingling hands, feet, mouth or scalp
  - Runny nose or sneezing
  - Abdominal pain
  - Difficulty swallowing or the feeling of a lump in the throat

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- If anaphylaxis has progressed to anaphylactic shock, the symptoms can include but are not limited to:
  - Struggling to breathe
  - Dizziness or confusion
  - Sudden feeling of weakness
  - Loss of consciousness
- If a child has no known diagnosis or medical management plan and shows signs or symptoms of an asthmatic attack, staff must commence emergency procedures and immediately call emergency services on '000'. Staff are to follow advice given by the operator whilst waiting for ambulance to arrive. Signs and symptoms of an anaphylactic reaction can include but are not limited to:
  - Severe shortness of breath, chest tightness or pain, and coughing or wheezing
  - Symptoms that fail to respond to use of a quick acting inhaler

#### **The Family will:**

- Notify the service of any medical conditions upon enrolment or as soon as possible in the case of existing enrolment.
- Provide the service with all medical plans in relation to the child's medical condition.
- Complete medical management plan in collaboration with service Coordinator.
- Ensure the below, where medication is necessary:
  - Appropriate medication is provided and clearly labelled with administration, dosage and child details
  - Instructions from medical practitioner detailing medication type, dosage and administration required.
- Notify the service in writing of any changes to the child's medical condition as soon as possible. This may require a further meeting to re-develop the medical management plan.

#### **Related Policies and Documents:**

- Medication Policy
- Incident, Injury and Illness Form
- Medical Conditions Management Plan
- Allergy and Anaphylaxis Management Plan
- Asthma Management Plan

#### **Considered Documents:**

- Education and Care Services National Law 2010
- Education and Care Services National Regulations 2010 and 2014 Update (r85,86,87,88)
- National Quality Standards (Standard 2.1)
- My Time, Our Place
- Work, Health and Safety ACT 2011
- Staying Healthy in Child Care 5<sup>th</sup> Edition

#### **Acknowledgement:**

Staff Name: \_\_\_\_\_

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Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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