

DEALING WITH MEDICAL CONDITIONS POLICY

Implementation

- The service will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The service will adhere to privacy and confidentiality procedures when dealing with individual health needs.
- A copy of the Medical Conditions Policy must be given to all educators and volunteers at the service. The policy must also be provided to parents of children enrolled at the service. Educators are also responsible for raising any concerns with a child's parents about any medical condition known to the service, or any suspected medical condition that arises.
- No child enrolled at the service will be able to attend the service without medication prescribed by their medical practitioner. Families are required to provide this information on the Enrolment Form as outlined below and are responsible for updating the service on any new medication, ceasing of medication, or any changes to their child's prescription.
- It is the parents' responsibility to provide updated information to the service. Parents will be reminded via newsletters to provide any updated information about medical conditions to the service.

Information that must be provided on the Enrolment Form and Health Care Information form

The service's enrolment form and Health Care Information form provides an opportunity for parents to help the service effectively meet their child's needs relating to any medical condition.

Information in relation to the following must be provided to the service:

- Asthma
- Diabetes
- Allergies
- Anaphylaxis
- Diagnosed at risk of anaphylaxis
- Any other specific medical condition(s) mentioned by a child's parents or registered medical practitioner using the Enrolment Form.
- Any other specific medical condition(s) mentioned by a child's parents or registered medical practitioner at any point during the child's education and care at the service.

Any Medical Management Plan put forward by a child's parents and/or registered medical practitioner. The Medical Management Plan must be used to inform the Medical Conditions Risk Minimisation Plan. Parents are responsible for updating their child's Medical Management Plan as necessary and will be reminded by staff and via newsletters.

Identifying Children with Medical Conditions

Any information relating to the above medical conditions will be shared with the Nominated Supervisor, Executive Facilitator, Certified Supervisors, Educators, Volunteers and any other staff member at the service. Individuals will be briefed by the Executive Facilitator or representative on the specific health needs of each child.

Information relating to a child's medical conditions, including the child's Medical Management Plan, Medical Conditions Risk Minimisation Plan, and the location of the child's medication will be shared with all educators and volunteers and displayed in areas of prominence to ensure all practices and procedures are followed accordingly:

DEALING WITH MEDICAL CONDITIONS POLICY - CONTINUED

- All educators and volunteers at the service must follow a child's Medical Management Plan in the event of an incident related to a child's specific medical conditions/ requirements.
- All educators must ensure updated information in relation to a child's health and medical condition is reported to the Executive Facilitator to ensure it is recorded and communicated.
- All educators and volunteers at the service must be able to identify a child with medical conditions easily.
- All educators and volunteers at the service must be able to locate a child's medication easily.

Medical Conditions Risk Minimisation Plan

Using a child's Medical Management Plan, the service will develop a Medical Conditions Risk Minimisation Plan in consultation with a child's parents. The Medical Conditions Risk Minimisation Plan must ensure that any risks are addressed and minimised. The plan must be developed with the child's parents and medical professionals and these individuals must inform the Medical Conditions Risk Minimisation Plan. To promote consistency and ensure the welfare of all children using the service, we will follow all health, hygiene and safe food policies and procedures. Any allergens that may be present at the service will be communicated to parents and addressed through the Medical Conditions Risk Minimisation Plan.

Whilst developing the Medical Conditions Risk Minimisation Plan (see below) and to minimise the risk of exposure of children to foods that might trigger severe allergy or anaphylaxis in susceptible children, the service will consider and implement the following:

- While not common, anaphylaxis is life threatening. Anaphylaxis is a severe allergic reaction to a substance. While prior exposure to allergens is needed for the development of true anaphylaxis, severe allergic reactions can occur when no documented history exists.
- Be aware that allergies are very specific to the individual and it is possible to have an allergy to any foreign substance.
- Anaphylaxis can be caused by insect bites such as bees or wasps but is usually caused by a food allergy. Foods most commonly associated with anaphylaxis include peanuts, seafood, nuts and, in children, eggs and cow's milk.
- Other common groups of substances which can trigger allergic reaction or anaphylaxis in susceptible children include:
 - All types of animals, insects, spiders and reptiles.
 - All drugs and medications, especially antibiotics and vaccines.
 - Many homeopathic, naturopathic and vitamin preparations.
 - Many species of plants, especially those with thorns and stings.
 - Latex and rubber products.
 - Band-Aids, Elastoplast and products containing rubber based adhesives.
- All educators have relevant first aid qualifications and should be aware of symptoms related to allergic reactions. In the event of an anaphylactic occurrence appropriate first aid will be administered, an ambulance will be called and parents/carer will be phoned.

DEALING WITH MEDICAL CONDITIONS POLICY - CONTINUED

- However, steps should be taken to prevent anaphylaxis occurring as outlined below:
Upon enrolment, seek medical information from parents about any known allergies. Ask parents for supporting documentation as well as a Medical Management Plan. This Medical Management Plan should include a photo of the child, what triggers the allergy, first aid needed and contact details of the doctor who has signed the plan. This should be kept on the child's enrolment file and also be displayed in the service, in an area where all educators can easily access near a telephone. A copy should also be kept where the child's medication is stored. If the child is taken on an excursion, a copy of the management plan should be taken on the excursion. Should a child be known to have allergies requiring medication if a reaction occurs, the parents will be asked to provide the medication. Furthermore, should the child's treatment change, families are asked to provide the service with a new Medical Management Plan from their child's medical practitioner. Documentation will then be updated at the service.
- If displaying personal information about children's or staff member's allergies in food preparation or serving areas, do so in accordance with privacy guidelines, such as displaying in an area accessible to staff and not accessible to visitors or other families. Explain to families the need to do so for purpose of safety of the child and obtain parental consent.
- Risk minimisation practices will be carried out to ensure that the service is to the best of our ability providing an environment that will not trigger an anaphylactic reaction in a child. These practices will be documented and reflected upon, with any practice that may be discovered amended to decrease risk. For example, a procedure to ensure that the child is never at the service without their EpiPen or AnaPen or relevant medication.
- The service will display an Australasian Society of Clinical Immunology and Allergy inc (ASCI) generic poster called Action Plan for Anaphylaxis in a key location at the service.
- Ensure that no child who has been prescribed an adrenaline auto-injection device is permitted to attend the service or its programs without the device.
- Develop an ongoing communication plan with the child's parents and with educators at the service to ensure that all relevant parties are updated on the child's treatment, along with any regulatory changes that may change the service's practices in regards to anaphylaxis.
- Provide support and information to the service's community about resources and support for managing allergies and anaphylaxis.
- The service will ensure that the auto-injection device kit is stored in a location that is known to all staff, including relief staff; easily accessible to adults; inaccessible to children; and away from direct sources of heat.
- Routinely, the service will review each child's medication to ensure it hasn't expired.
- If it is decided that the child will have food prepared for them at the service, this will be prepared in line with their management plan and family recommendations.
- The use of food products in craft, science experiments and cooking classes may need to be changed in order to allow children with allergies to participate.

DEALING WITH MEDICAL CONDITIONS POLICY - CONTINUED

- Parents will be asked not to send food with their children that contain high allergenic elements even if their child does not have an allergy.
- Restrict the use of foods likely to cause allergy in craft and cooking play.
- Follow correct health, hygiene and safe food policies and procedures.
- Children will be supervised at lunch and shared fruit times and consume food in specified areas. To minimise risk children will not be permitted to 'wander around' the service with food.
- Cooking experiences at the service should not contain ingredients such as eggs or nuts.

Where a child is known to have a susceptibility to severe allergy or anaphylaxis to a particular food, the service will develop an "allergy-awareness policy" for that particular food, that encourages families not to send eggs, nuts or any products containing these foods or any other foods mentioned specific to an allergy that have been outlined in a Virginia Preschool Policy.

In the situation where a child who has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction, staff will:

- Call an ambulance immediately by dialling 000.
- Commence first aid procedures.
- Contact the parent/guardian.
- Contact the person to be notified in the event of illness if the parent/guardian cannot be contacted.

The service will adhere to the first aid qualification requirements set out by the National Quality Standard laws and regulations.

Sources Education and Care Services National Regulations 2011 National Quality Standard