PANORAMA HEIGHTS PRESCHOOL

MANAGEMENT OF MEDICAL CONDITIONS

Mandatory – Quality Area 2

PURPOSE

This policy will provide guidelines for Panorama Heights Preschool to ensure that:

- Clear procedures exist to support the safety, 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
- Information is provided to staff and volunteers about managing individual children's' medical conditions
- Requirements for medical management plans are provided by families for the child
- Risk-minimisation and communication plan are developed in conjunction with Panorama Heights staff and families.

POLICY STATEMENT

VALUES

Panorama Heights Preschool 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 *Education and Care Services National Regulations 2011* to ensure that those involved in the programs and activities of Panorama Heights Preschool are protected from harm
- informing educators, staff, volunteers, children and families on the importance of adhering to the *Management of 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
- ensuring that educators have the skills and expertise necessary to support the inclusion of children with additional health needs.

SCOPE

This policy applies to the Approved Provider, all staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Panorama Heights Preschool including during offsite excursions and activities.

This policy should be read in conjunction with the:

- *Anaphylaxis Policy*
- *Asthma Policy*
- *Diabetes Policy*

RESPONSIBILITIES	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Families	Contractors, volunteers and students
R indicates legislation requirement, and should not be deleted					
Ensuring that families who are enrolling a child with specific health care needs are provided with a copy of this and other relevant service policies (Regulation 91, 168)	**R**	√			
Ensuring families provide information on their child's health, medications, allergies, their registered medical practitioner's name, address and phone number, emergency contact names and phone numbers (Regulations 162),	**R**	√		√	
Ensuring families provide a medical management plan (if possible, in consultation their registered medical practitioner), following enrolment and prior to the child commencing at the service (Regulation 90)	**R**	√		√	
Ensuring that a risk minimisation plan (refer to Definitions) is developed in consultation with families to ensure that the risks relating to the child's specific health care need, allergy or relevant medical condition are assessed and minimised, and that the plan is reviewed at least annually (refer to Attachment 1) (Regulation 90 (iii))	**R**	√	√	√	
Ensuring a new risk assessment is completed and implemented when circumstances change for the child's specific medical condition	**R**	√			
Developing and implementing a communication plan (refer to Definitions) and encouraging ongoing communication between families 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 (Regulation 90 (c) (iii))	**R**	√	√	√	
Ensuring a copy of the child's medical management plan is visible and known to staff in the service. (Regulations 90 (iii)(D)). Prior to displaying the medical management plan, the nominated supervisor must explain to families the need to display the plan for the purpose of the child's safety and obtain their consent (refer to Privacy and Confidentiality Policy)	**R**	√			

Informing the approved provider of any issues that impact on the implementation of this policy		√	√	√	√
Ensuring all staff are informed where medication is stored and/or any specific dietary restrictions relating to the child's health care need or medical condition.	**R**	√	√		√
Ensuring staff are trained in the administration of emergency medication	**R**	√			
Ensuring families and ECT/educators/staff understand and acknowledge each other's responsibilities under these guidelines	√	√			
Ensuring ECT/educators/staff undertake regular training in managing the specific health care needs of children at the service including asthma, anaphylaxis, diabetes, epilepsy and other medical conditions. This includes training in the management of specific procedures that are required to be carried out for the child's wellbeing and specific medical conditions	√	√	√		
Ensuring that at least one ECT/educator with current approved first aid qualifications (refer to Definitions) is in attendance and immediately available at all times that children are being educated and cared for by the service (Regulation 136(1) (a)). This can be the same person who has anaphylaxis management training and emergency asthma management training	R	√			
Ensuring all ECT/educators and staff are aware of and follow the risk minimisation procedures for the children, including emergency procedures for using EpiPens.	R	√	√		√
Ensuring that if a child is diagnosed as being at risk of anaphylaxis, ensure that a notice is displayed in a position visible from the main entrance to inform families and visitors to the service (refer to Anaphylaxis and Allergic Reactions Policy)	R	√	√		
Displaying, with consideration for the children's privacy and confidentiality, their medical management plan and ensure that all educators and staff are aware of and follow the risk minimisation plans for each child	**R**	√			
Ensuring each child's health is monitored closely and being aware of any symptoms and signs of ill health, with families contacted as changes occur		√	√		√
Administering medications as required, in accordance with the procedures outlined in the Administration of Medication Policy (Regulation 93)	R	R	√		
Ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan	√	√	√		
Maintaining ongoing communication between ECT/educators/staff and families in accordance with the strategies identified in the communication plan (refer to	R	√	√		

Attachment 1), to ensure current information is shared about specific medical conditions within the service.					
Following appropriate reporting procedures set out in the Incident, Injury, Trauma and Illness Policy in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma	R	√	√		√
Ensuring that the Ambulance Victoria How to Call Card (refer to Sources) is displayed near all telephones	√	√			
Ensuring children do not swap or share food, drink, food utensils or food containers	√	√	√		√
Ensuring 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 they have, and the service's procedures for dealing with emergencies involving allergies and anaphylaxis (Regulation 90 (iii)(B))	R	√	√		√
Providing information to the community about resources and support for managing specific medical conditions while respecting the privacy of families enrolled at the service	√	√			

BACKGROUND AND 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 child has a specific health care need, allergy or relevant medical condition
- when developing a risk minimisation plan in consultation with the child's parents/guardians
- when developing a communication plan for staff members and parents/guardians.
- 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 educator. One adult will be responsible for the administration and the other adult will witness the procedure.
- 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.

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
- *Public Health and Wellbeing Act 2008*
- *Public Health and Wellbeing Regulations 2009*
- *Health Records Act 2001*
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
    - Standard 2.1: Each child's health is promoted
        - 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.*

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

AV How to Call Card: A card that the service has completed containing all the information that Ambulance Victoria will request when phoned.

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 condition, 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 (ASCIA) Action Plan (of which the anaphylaxis plan template is available at https://allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis/).

Risk minimisation: The implementation of a range of strategies to reduce the risk of an adverse affect 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.

SOURCES AND RELATED POLICIES

Sources

- National Health and Medical Research Council (2012, updated June 2013), *Staying Healthy in Child Care: Preventing infectious diseases in child care*, 5th ed., 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): https://catalogue.nla.gov.au/catalog/937192

Related Policies

- *Anaphylaxis Policy*
- *Asthma Policy*
- *Diabetes Policy*
- *Administration of First Aid Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Dealing with Infectious Diseases Policy*
- *Privacy Policy*

EVALUATION

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

- regularly seek feedback from everyone 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.

ATTACHMENTS

- Medication Expiry List Template

AUTHORISATION

This policy has been approved by the Committee of Management of Panorama Heights Preschool: April 2026

NEXT REVIEW DATE: April 2029

ATTACHMENT 1: MEDICATION EXPIRY LIST TEMPLATE

Child's Name	Medication Name	Expiry Date	Term 1	Term 2	Term 3	Term 4	Action Taken