

Medical Conditions Policy

Quality Area 2 – Children’s Health and Safety

Policy Statement

This policy acts to ensure that Ambrose Education and Care services adhere to their duty of care requirements in relation to medical conditions as outlined by the Education and Care Services National Regulations 2011. Ambrose team members will support children to feel physically and emotionally well. Parents/Guardians and children can expect to feel safe in the knowledge that their child’s wellbeing and individual health needs will be met.

At all times team members will act in the best interests of the children and ensure the health, safety and wellbeing of all children being educated and cared for at the service.

Goals / What are we going to do?

Ambrose services will ensure that procedures implemented will support the health, wellbeing and inclusion of all children.

Practical and child centred practices will be implemented to support children enrolled with specific health care requirements. These practices will be reviewed and maintained throughout the child’s period of enrolment.

Strategies- How will it be done?

- Team members who are first aid trained will undertake training to adequately perform first aid duties including administration of medication.
- Team members will collaborate with parent/guardians of children with medical conditions to develop a Risk Minimisation Plan (RMP) and maintain a medical communication log

First Aid Qualifications

Team members will maintain first aid qualifications as outlined by the Ambrose Administration of First Aid Policy.

Refer to the Ambrose Administration of First Aid Policy.

Enrolment

- On application for enrolment parent/guardians will be required to complete full details about their child’s medical needs.
- Upon receiving a parent/guardian disclosure of a child’s medical needs the Nominated Supervisor/Responsible Person will provide a copy of the Medical Conditions Policy and any further information to support a smooth enrolment process.

- Where children require medication or have specific medical needs, parent/guardian will be asked to provide:
 - A colour medical management plan as completed by a medical practitioner.
 - Medication as detailed on the medical management plan, including chemist label.
 - Consultation on the development of a risk minimisation plan.
 - Authorisation for administration of medication.
- All medical documentation and medication is required to be present at the Ambrose service while the child is in attendance. Should documentation or medication not be present, the child's enrolment will not commence or will be placed on pause.
- Individual medical management plans will be securely stored until the child turns 25 years of age.

Administration of medication

- Medication can only be administered to a child: With supporting medical documentation that outlines administration of medication instructions. E.g. Letter obtained from medical professional, medical management plan or diagnosis.
- 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 Ambrose team members in attendance. The person administering medication must be first aid trained. The second team member will check the dosage is correct and witness the administration. Upon completion of administration both team members are to complete the child's medication log.
- If the medication (including over the counter medication) is in its original packaging bearing the child's name, dose and frequency of administration (pharmacy label).
- Emergency asthma and anaphylaxis medication (i.e. Salbutamol, EpiPen or Anapen) is in its original container, bearing the child's name and written instructions (pharmacy label).
- Medication to be administered must be the same as listed on medical management plan.

Medication will not be administered if:

- an Ambrose team member is required to cut or crush medication. Where medication requires cutting, medication is to be supplied in a webster pack bearing the child's name, dose and frequency of administration (pharmacy label).
- a child is required to self-administer medication. Children are not permitted to self-administer medication.
- it is a regular medication that has expired, or the pharmacy label does not meet the requirements listed above. Emergency medication can still administered in the event of a medical episode.

Ceasing of administration of medication can only occur if:

- Medical practitioner documentation is provided to the service detailing requirement to cease administration and;

- Written authorisation is provided from the parent/guardian or a person named in the child's enrolment record as authorised to consent to cease administration of medication (Regulation 92(3)(b)).

Medical Management Plans

- Medical management plans must be provided as follows:
 - A colour, in date allergy, anaphylaxis, medication allergy, epilepsy, eczema, FPIES, immunodeficiency medical management plan dated, signed and/or stamped by a medical practitioner. Emergency contacts must be listed.
 - An in-date asthma, diabetes or other medical management plan dated, signed and/or stamped by a medical practitioner for the child. Emergency contacts must be listed.
 - In the form of a diagnosis or medical practitioner letter for any medical conditions not detailed above.
- All medical management plans must include a current colour photo of the child and must clearly outline procedures to be followed by team members in the event of an incident.
- Medical management plans will be followed in the event of an incident relating to the child's specific health care need.
- Medical Management plans must not be completed by a parent/guardian, school staff or Ambrose team member.
- Medical management plans must be reviewed every 12 months unless otherwise advised by a medical practitioner, when medication requirements change or when the person's medical condition changes.
- In consultation with Ambrose team members, parents/guardians are provided opportunities to communicate any changes to their child/rens medical management plan.

Generic emergency medical management plans (Anaphylaxis, Asthma) will be made available nearby service emergency medication.

Risk Minimisation and Communication Plans

Risk Minimisation and communication plans must:

- be developed in consultation with the parent/guardian of a child.
- align with the medical management plan and any further information provided by a medical practitioner.
- be reviewed every 12 months, or sooner should there be an update to the medical management plan.

In consultation with Ambrose team members, parents/guardians are provided opportunities to communicate any changes to their child/ren's risk minimisation plan.

Asthma

Whenever a child with asthma is enrolled at a service, team members including students and volunteers, will be aware of the following:

- the child's name, and where applicable the room they are educated and cared for in.
- child's risk minimisation plan.
- where the child's medical management plan will be located.
- where the child's preventer/reliever medication etc. will be stored.
- asthma reliever medications will be stored out of reach of children, in an easily accessible central location.
- the signs and symptoms associated with the child's asthma plan.

Reliever medications together with a spacer will be included in our service's first aid kit in case of an emergency situation where a child does not have their own reliever medication with them.

Anaphylaxis and Allergies

Whenever a child with anaphylaxis or allergies is enrolled at a service, or is newly diagnosed with anaphylaxis or an allergy, team members including students and volunteers will be aware of:

- the child's name and where applicable the room they are educated and cared for in.
- the child's risk minimisation plan.
- where the child's medical management plan will be located.
- where the child's adrenaline auto-injector is located.
- the signs and symptoms associated with the child's anaphylaxis or allergy diagnosis.

Junior (Jnr) and/or Adult auto injectors will be in service's first aid kit in case of an emergency situation.

Diabetes

Whenever a child with diabetes is enrolled at our service, or is newly diagnosed, team members including students and volunteers will be aware of:

- the child's name and where applicable the room they are educated and cared for in.
- the child's risk minimisation plan.
- where the child's medical management plan will be located.
- where the insulin/snack box etc is stored.
- the signs and symptoms of low blood sugar including the child presenting pale, hungry, sweating, weak, confused and/or aggressive. Signs and symptoms of high blood sugar include thirst, need to urinate, hot dry skin, smell of acetone on breath.

Management of diabetes in children at a service will be supported by the child having in place an Medical Management Plan which includes:

- If administration of Insulin is needed, information on method, range of dosage and storage of insulin. Insulin may be delivered as a shot, an insulin pen, or via an insulin pump.
- Information about any prescribed oral medications, including how and when they should be administered.
- Guidance on the timing of meals and snacks to help manage blood sugar levels effectively.
- Instructions on when and how frequently blood sugar should be tested by educators.

Storage of Medication

- Medications are to be stored out of reach of children and/or in a lockable cupboard
- Medications are kept in an easily accessible central location as per storage instruction on medication label.
- Medications are to be taken on excursions, and readily available during workshops and regular outings.
- Medications are to accompany the child/ren during evacuations, lockdowns or shelter-in-place, where safe to do so.

Medical Emergencies

- Where emergency services attend, a child's medical management plan and any administered medication will be shared with emergency services.
- In a medical emergency, team members may receive verbal authorisation from a parent/guardian or authorised nominee as per enrolment form. In the event a parent/guardian or authorised nominee cannot be contacted verbal authorisation may be received by a registered medical practitioner or emergency services (Regulation 93).
- Despite regulation 93, medication may be administered to a child without an authorisation in case of an anaphylaxis or asthma emergency (Regulation 94).
- If medication is administered under regulation 94, the approved provider or a nominated supervisor of the education and care service must ensure that the following are notified as soon as practicable—
 - a parent of the child;
 - emergency services.

Roles and Responsibilities

Role	Authority / Responsibility For
Approved Provider/Delegates	<ul style="list-style-type: none"> • Provide, guidance and advice to ensure the adherence to this policy.

	<ul style="list-style-type: none"> • Ensure the Ambrose Medical Conditions Policy is available to all team members for the purpose of providing it to parents/guardians. • Ensure team members receive regular training relevant to their role in manage specific health care needs and relevant procedures. • At least one team member or one Nominated Supervisor of the service who holds a current approved first aid qualification will be in attendance (Regulation 136(a)). • At least one team member or one Nominated Supervisor of the service who has undertaken current approved anaphylaxis management training (Regulation 136(b)). • At least one team member or one Nominated Supervisor of the service who has undertaken current approved emergency asthma management training. (Regulation 136(c)). • Ensure that services have a means to attain emergency medication. • Where reasonably possible, refrain from bringing known allergens into the service environment. • Maintain privacy and confidentiality at all times.
Nominated Supervisor/Responsible Person	<ul style="list-style-type: none"> • Adhere to this Policy. • Provide supervision, guidance, and advice to team members to ensure adherence to this policy. • Ensure the development of a medical communication log and encourage ongoing communication between parents/guardians and Ambrose team members regarding children's medical conditions. • At least one team member or one Nominated Supervisor of the service who holds a current approved first aid qualification will be in attendance (Regulation 136(a)). • At least one team member or one Nominated Supervisor of the service who has undertaken current approved anaphylaxis management training will be in attendance (Regulation 136(b)). • At least one team member or one Nominated Supervisor of the service who has undertaken current approved emergency asthma management training will be in attendance (Regulation 136(c)). • Ensure team members receive regular training opportunities in first aid and management of medical conditions, where relevant to their role. • Ensure that a risk minimisation plan (RMP) in conjunction with parent/guardian is developed for each child with a medical condition on enrolment or upon diagnosis, and that the plan is reviewed at a minimum of every 12 months or should there be an update to the medical management plan. • Ensure that RMPs are accessible to all team members.

	<ul style="list-style-type: none"> • Ensure that parents/guardians who are enrolling a child with specific health care needs are provided with a copy of the Medical Conditions Policy and other relevant policies and procedures. • Ensure that parents/guardians or authorised nominees are contacted when concerns arise regarding a child's health and wellbeing. • Ensure Ambrose team members, students and volunteers working directly with children are informed of all medical conditions at the service and individual risk minimisation plans. • Ensure team members are informed about the medical conditions policy. • Ensure that team members are informed about any changes and or updates to an individual child's medical conditions, medical management plans and RMPs. • Ensure that all team members are aware of each child's medical management plan and the location of each child's medication. • Ensure that a child/ren does not attend the service without medication prescribed by the child's medical practitioner as stated in their medical management plan. • Unless in the event of an emergency, refrain from administering medication, without parent/guardian or authorised nominee consent. • Ensure a medication record is maintained wherever administration of medication occurs (Regulation 92). • Maintain the rights and dignity of a child/ren when administering medication. • Ensure that the risks relating to each child's specific health care need, allergy or relevant medical condition are assessed and minimised. • Ensure that practices and procedures in relation to safe handling, preparation, consumption, and service of food are developed and implemented. • Adhere to mealtime procedures to ensure the safe service of food to children. • Ensure that practices and procedures are implemented to notify families of any known allergens that pose a risk to child/ren. • Where reasonably possible, refrain from bringing known allergens into the service environment. • Maintain privacy and confidentiality at all times.
Educators	<ul style="list-style-type: none"> • Adhere to this policy. • Undertake regular training in managing specific health care needs including first aid training.

	<ul style="list-style-type: none"> • Understand and be aware of each child diagnosed with a medical condition and: • Medical Management Plan • Risk minimisation plan • Location of Medication. • Monitor signs and symptoms of specific medical conditions, where required and trained to, administer first aid and communicate any concerns to the Nominated Supervisor or Responsible Person. • Unless in the event of an emergency, refrain from administering medication, without parent/guardian or authorised nominee consent. • Ensure a medication record is maintained wherever administration of medication occurs (Regulation 92). • Maintain the rights and dignity of each child/ren when administering medication. • Follow practices and procedures in relation to safe handling, preparation, consumption and service of food. • Adhere to mealtime procedures to ensure the safe service of food to children. • Where reasonably possible, refrain from bringing known allergens into the service environment. • Maintain privacy and confidentiality at all times.
Families	<ul style="list-style-type: none"> • Inform the service of individual child/ren's medical conditions, if any, and inform the service of any specific requirements that the child/ren may have. • Provide a colour in date allergy, anaphylaxis, medication allergy, epilepsy, eczema, FPIES, immunodeficiency medical management plan dated, signed and/or stamped by a medical practitioner. Emergency contact must be listed. • Provide an in-date asthma, diabetes or other medical management plan dated, signed and/or stamped by a medical practitioner. Emergency contacts must be listed. • Complete all required administration of medication documentation for non-emergency medication. E.g. Medication record. • All medical management plans must include a current colour photo of the child and must clearly outline procedures to be followed by team members in the event of an incident relating to the child's specific health care needs. • Medical Management plans must not be completed by a parent/guardian, authorised nominee, school staff or Ambrose team member. • Notify the Nominated Supervisor/Responsible Person when there is a change in a child's medical condition.

	<ul style="list-style-type: none"> • Develop a risk minimisation plan in consultation with the Nominated Supervisor/Responsible Person and/or team members. • Provide a new medical management plan as required. • Provide medication including over the counter medication in its original container bearing the child's name, dose and frequency of administration (pharmacy label). • Medications listed on an Asthma medical management plan and Epi pen/Anapen medication is in its original container, bearing the child's name and written instructions (pharmacy label). • Provide the Medication required to be administered. It must be the same as listed on medical management plan. • Ensure that your child/ren does not attend an Ambrose service without all medication as listed on the medical management plan. • Where reasonably possible, refrain from bringing known allergens into the service environment. • Maintain privacy and confidentiality at all times
Students and Volunteers	<ul style="list-style-type: none"> • Adhere to this Policy • Maintain privacy and confidentiality at all times. • Understand and be aware of each child diagnosed with a medical condition and: <ul style="list-style-type: none"> ○ Medical Management Plan ○ Risk minimisation plan ○ Location of Medication. • Seek support and guidance from the Nominated Supervisor/Responsible Person or fellow team members. • Respond to children promptly and inform first aid trained team members of any concerns regarding a child/ren with medical condition. • Do not administer medication unless first aid trained and under the direction of the Nominated Supervisor/Responsible Person. • Maintain the rights and dignity of a child/ren • Where reasonably possible, refrain from bringing known allergens into the service environment.
Support Office	<ul style="list-style-type: none"> • Adhere to this Policy. • Maintain privacy and confidentiality at all times. • If a support office team member is not considered to be directly working with children as per the service roster, are not to undertake administration of medication unless in the event of an emergency and is trained to do so • Maintain the rights and dignity of a child/ren. • Where reasonably possible, refrain from bringing known allergens into the service environment.

Monitoring, Evaluation, and Review

This policy will be monitored to ensure compliance with legislative requirements and unless deemed necessary through the identification of practice gaps, the service will review this policy as per the policy schedule and/or as required.



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RELATED LEGISLATION

Education and Care Services National Law Act 2010: Section 174

Education and Care Services National Regulations: Regulations 79, 90, 91, 92, 93, 94, 95, 96, 168

Health Records and Information Privacy Act 2002

Child Safe Standards- [Guide to the Child Safe Standards \(nsw.gov.au\)](https://www.nsw.gov.au/child-safe-standards)

RELATED GUIDELINES, STANDARDS, FRAMEWORKS

National quality standard, quality area 2: Children's health and safety- standard 2.1, 2.2

National quality standard, quality area 7: Governance and leadership- standard 7.1, elements 7.12, 7.13

SOURCES/ USEFUL RESOURCES

Guide to the National Law and National Regulation

Community Early Learning Australia - www.cela.org.au

Definitions

Diagnosed as at risk of anaphylaxis	in relation to a child, means a child who has been diagnosed by a registered medical practitioner as at risk of anaphylaxis
Medication	means medicine within the meaning of the Therapeutic Goods Act 1989 of the Commonwealth;
Registered medical practitioner	means a person registered under the Health Practitioner Regulation National Law to practise in the medical profession (other than as a student);
Serious incident	(a) the death of a child— (i) while that child is being educated and cared for by an education and care service; or (ii) following an incident occurring while that child was being educated and cared for by an education and care service;

	<p>(b) any incident involving serious injury or trauma to a child occurring while that child is being educated and cared for by an education and care service—</p> <p>(i) which a reasonable person would consider required urgent medical attention from a registered medical practitioner; or</p> <p>(ii) for which the child attended, or ought reasonably to have attended, a hospital;</p> <p>Example— A broken limb.</p> <p>(c) any incident involving serious illness of a child occurring while that child is being educated and cared for by an education and care service for which the child attended, or ought reasonably to have attended, a hospital;</p> <p>Example— Severe asthma attack, seizure or anaphylaxis reaction.</p> <p>(d) any emergency for which emergency services attended;</p> <p>(e) any circumstance where a child being educated and cared for by an education and care service—</p> <p>(i) appears to be missing or cannot be accounted for; or</p> <p>(ii) appears to have been taken or removed from the education and care service premises in a manner that contravenes these Regulations; or</p> <p>(iii) is mistakenly locked in or locked out of the education and care service premises or any part of the premises.</p>
Medical conditions	<p>Not defined in the National Law or Regulations.</p> <p>May be described as a condition that has been diagnosed by a registered medical practitioner</p>
Medical Management Plan	<p>A document that has been prepared and signed by a registered medical practitioner 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.</p>

Breaches

<p>An approved provider must notify the Regulatory Authority of the following information in relation to an approved education and care service operated by the approved provider—</p> <p>(a) any serious incident at the approved education and care service;</p>	<p>Penalty: \$4500 \$22900 in any other case.</p>
<p>The approved provider of an education and care service that provides food or a beverage to children being educated and cared for by the service must ensure that the food or beverage provided is chosen having regard to the dietary requirements of individual children taking into account—</p> <p>(i) each child's growth and development needs; and</p> <p>(ii) any specific cultural, religious or health requirements.</p>	<p>Penalty: \$2200</p>

<p>A nominated supervisor of an education and care service that provides food or a beverage to children being educated and cared for by the service must ensure that the food or beverage provided is chosen having regard to the dietary requirements of individual children taking into account—</p> <ul style="list-style-type: none"> (i) each child's growth and development needs; and (ii) any specific cultural, religious or health requirements. 	Penalty: \$2200
<p>The approved provider of an education and care service must ensure that medication is not administered to a child being educated and cared for by the service unless—</p> <ul style="list-style-type: none"> (a) that administration is authorised; and (b) the medication is administered in accordance with regulation 95 or 96. 	Penalty: \$2200
<p>The approved provider of an education and care service must ensure that written notice is given to a parent or other family member of a child as soon as practicable, if medication is administered to the child under an authorisation referred to in sub regulation (5)(b).</p>	Penalty: \$1100
<p>A nominated supervisor of an education and care service must ensure that medication is not administered to a child being educated and cared for by the service unless</p> <ul style="list-style-type: none"> (a) that administration is authorised; and (b) the medication is administered in accordance with regulation 95 or 96. 	Penalty: \$2200
<p>The approved provider of an education and care service must ensure that the service has in place policies and procedures in relation to the matters set out in subregulation</p>	Penalty: \$1100
<p>The approved provider of a centre-based service must ensure that each of the following persons are in attendance at any place where children are being educated and cared for by the service, and immediately available in an emergency, at all times that children are being educated and cared for by the service—</p> <ul style="list-style-type: none"> (a) at least one staff member or one nominated supervisor of the service who holds a current approved first aid qualification; (b) at least one staff member or one nominated supervisor of the service who has undertaken current approved anaphylaxis management training; (c) at least one staff member or one nominated supervisor of the service who has undertaken current approved emergency asthma management training. 	Penalty: \$2200