DEaling with medical conditions POLICY

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| Responsible person: | CFC Executive Director | Approved by CoM on: | Pending: 25th August 2021 |
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# Purpose

This policy will provide guidelines for:

* clear procedures to support the health, wellbeing and inclusion of all children enrolled Craig Family Centre (CFC)
* service practices support the enrolment of children and families with specific health care requirements.

# Policy statement

## Values

The CFC 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 CFC's duty of care requirement to ensure that those involved in the programs and activities of Craig Family Centre are protected from harm
* informing CFC employees, contractors, students on placement, volunteers, children and parents/guardians of 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 CFC
* ensuring that CFC employees have the skills and expertise necessary to support the inclusion of children with additional health needs.

## Scope

This policy applies to the CFC’s employees, contractors, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of CFC, including during offsite excursions and activities.

This policy should be read in conjunction with:

* Anaphylaxis Policy
* *Asthma Policy*
* *Diabetes Policy*
* *Epilepsy Policy*

## Background & LEGISLATION

Background

CFC is required to 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
* 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.

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
* *Health Records Act 2001* (Vic)
* *National Quality Standard*, Quality Area 2: Children’s Health and Safety
* *National Quality Standard*,Quality Area 7: Governance and Leadership
* *Occupational Health and Safety Act 2004* (Vic)
* *Public Health and Wellbeing Act 2008* (Vic)
* *Public Health and Wellbeing Regulations 2009*(Vic)

## DEFINITIONS

The terms defined in this section relate specifically to this policy.

***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 beenprepared 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.

**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.

## Procedures

All CFC employees are responsible for:

* ensuring 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 First Officer to ensure all information held by CFC is current
* undertaking relevant training to assist with the management of specific medical conditions of children at CFC
* being aware of individual requirements of children with specific medical conditions and following their risk minimisation plan and medical management plan
* monitoring signs and symptoms of specific medical conditions and communicating any concerns to the Nominated First Aid Officer
* adequately supervising all children, including those with specific medical conditions
* raising any concerns with a child’s parents/guardians about any medical condition known to CFC, or any suspected medical condition that arises.
* informing the Nominated Supervisor of any issues that impact on the implementation of this policy.

#### Parents/guardians are responsible for:

* informing CFC of their child’s medical conditions, if any, and informing CFC of any specific requirements that their child may have in relation to their medical condition
* developing a risk minimisation plan with CFC staff members
* 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 CFC staff 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 CFC Executive Director of any issues that impact on the implementation of this policy by CFC.

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

When a child enrolled at CFC has a specific health care need, allergy or relevant medical condition

CFC's enrolment form provides parents/guardians with an opportunity for parents to help CFC effectively meet their child's need relating to any medical conditions.

The following information must be provided by parents/guardians of children with a specific health care need, allergy or relevant medical condition (either at enrolment or immediately upon diagnosis of an ongoing medical condition):

* Relevant diagnoses, such as:
  + Asthma
  + Allergies
  + Anaphylaxis
  + At risk of anaphylaxis
  + Diabetes
* Any other relevant medical condition, allergy or health care need diagnosed by a registered medical practitioner
* A medical management plan signed by a medical practitioner containing a current photo of the child and procedures to be followed by CFC employees in the event of an incident relating to the child’s specific health care needs
* their medical practitioner’s name, address and phone number, emergency contact names and phone numbers

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 enrolled by CFC, it is vital that prior arrangements are negotiated with the parent/guardian, authorised employees or appropriate health care workers to prepare for the event that the child will require a procedure while in attendance at CFC. 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.

Supporting documents, as necessary, will be attached to the enrolment form and kept on file at CFC.

* if a child enrolled at the service has a specific health care need, allergy or other relevant medical condition, parents/guardians will be provided with a copy of this and other relevant policies (via the CFC website or available on request from the CFC office)
* the medical management plan will be used to inform the risk minimisation plan. A risk minimisation plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually. The risk minimisation plan will be developed with parents/guardians of children with specific medical conditions that require medical management plans
* CFC employees and volunteers will be informed about the practices to be followed relating to a child's specific health care needs
* a risk minimisation plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually
* information relating to a child's medical conditions, including the child's medical management plan, risk minimisation plan and the location of the child's medication will be shared with all employees and volunteers. This information will be displayed prominently in each child services room at CFC, ideally in a position that is accessible to staff but not accessible to visitors. Prior to displaying the medical management plan, the teacher will explain to parents/guardians the need to display the plan for the purpose of the child’s safety and obtain their consent (refer to *Privacy and Confidentiality Policy*).

Management of medical conditions

* Parents/guardians are required to provide information on a child's specific medical conditions on enrolment or upon diagnosis, and are responsible for updating CFC if there are changes in the child's medical management
* no child enrolled at the service will be able to attend the service without medication required in their management plan and prescribed by their medical practitioner. Parents/guardians are responsible for updating CFC on any new medication, ceasing of medication, or any changes to their child’s prescription. 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
  + 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.

* CFC staff, volunteers and students on placement are aware of individual requirements of children with specific medical conditions and following their risk minimisation plan and medical management plan
* 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, staff follow appropriate reporting procedures set out in the *Incident, Injury, Trauma and Illness Policy*.

Staff training

* A copy of the *Dealing with Medical Conditions Policy* will be provided to all CFC employees, students on placement and volunteers during induction
* all CFC employees, including relief staff, are informed of children who have specific medical conditions or food allergies, the type of condition or allergies they have, and CFC’s procedures for dealing with related emergencies
* all CFC teachers and assistants receive 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
* CFC will identify specific training needs for employees who work with children diagnosed with a medical condition and will ensure at least one employee with current accredited training in emergency management requirements for specific medical conditions is in attendance and immediately available at all times that children is being educated and cared for by CFC.

## Evaluation

In order to assess whether the values and purposes of this policy have been achieved, the Craig Family Centre:

* 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
* notify parents/guardians at least 14 days before making any change to this policy or its procedures.

## related policies

#### Craig Family Centre policies

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

# Attachments

* Attachment 1: Medical Conditions Communication Plan

Attachment 1

Medical Conditions Communication Plan

The communication plan outlines how Craig Family Centre Inc. (CFC) will communicate with parents/guardians and employees in relation to caring for a child with a medical condition. It 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 centre.

**EMPLOYEES**

* All CFC childcare educators and assistants hold the following current, approved first aid qualifications:
  + First aid training (renewed every three (3) years)
  + CPR training (updated annually)
  + Anaphylaxis management training (updated annually)
  + Emergency asthma management training (updated annually).
* All CFC employees (including relief staff), volunteers and students on placement will be informed of:
  + CFC's *Dealing with Medical Conditions Policy*, *Anaphylaxis Policy, Asthma Policy, Diabetes Policy* and *Epilepsy Policy*.
  + CFC's procedures for identification of children at risk of anaphylaxis
  + Medical conditions management at CFC, including action plans, risk minimisation plans and the location of medication for individual children.
* The above communications will take place through:
  + Workplace induction
  + Staff meetings and briefings
  + First aid, CPR and anaphylaxis and asthma training
  + Adrenaline autoinjector practice (conducted three times a year)
  + Staff notices/memos

CFC encourages ongoing communication between parents/guardians and staff, especially where it relates to the current status of a child’s specific health care needs, allergy or other relevant medical condition.

**PARENTS/GUARDIANS**

At the time of enrolment or upon diagnosis, parents/guardians are required to inform CFC of their child’s medical conditions, if any, and inform CFC of any specific requirements that their child may have in relation to the medical condition; develop a risk minimisation plan with CFC staff members; provide a medical management plan signed by a medical practitioner, notify CFC of any changes to the status of their child’s medical condition and provide a new medical management plan in accordance with these changes.

* All parents/guardians will be informed of:
  + CFC's *Dealing with Medical Conditions Policy*, *Anaphylaxis Policy, Asthma Policy, Diabetes Policy* and *Epilepsy Policy*.
  + Informed if a child at risk of anaphylaxis is being educated and cared for at CFC
  + Known allergens that pose a risk to children at CFC and risk minimisation strategies
* The above communications will take place through:
  + CFC policies (accessible via the CFC website or on request from reception)
  + Prominent notices informing those entering Craig Family Centre that a child at risk of anaphylaxis is attending the service
  + Newsletters
  + Notices sent to parents/guardians and/or displayed at CFC
  + Parent Handbook