

HEALTH & SAFETY – MEDICAL CONDITIONS

POLICY – The aim of this policy is to ensure all children with medical conditions will have a current action plan.

Rationale

Children may suffer from a range of medical conditions that require an authorised management plan; these include but are not limited to: anaphylaxis, asthma, diabetes, epilepsy, genetic conditions and syndromes. It is essential that accurate and up to date information is available to all staff in an accessible, detailed and easily understood format. The information must be clearly displayed in the child's room, with a copy in the child's file, and the Room Leader must ensure that all permanent and relief educators are aware of the requirements. Ways to minimise risk to the child and recognise signs and symptoms will be discussed with parents and educators, and medical practitioners where necessary, and appropriate action taken. The centre has a general medical conditions management plan, and utilises Asthma Victoria's Anaphylaxis management plan for anaphylaxis and Diabetes Victoria's Diabetes Management Plan for Diabetes.

PROCEDURE

1. On enrolment, Director, Assistant Director or authorised staff member will check if the child has a medical condition; parents should initially note this on enrolment form.
2. If a condition is identified, the parent will be given a copy of the medical conditions policy and a copy of the appropriate medical condition and action management form. This form should be completed in consultation with the child's medical practitioner and returned to the centre before the child commences care.
3. Copies of the plan will be posted in the child's room, in the staff room and with the child's enrolment form. All educators, including relievers, will be made aware of the requirements outlined in the plan, and the educators will discuss how to implement the plan in the case of an incident.
4. Training will be provided to educators by an appropriately qualified health practitioner to ensure the management of the condition and the wellbeing of the child are maintained at all times.
5. The centre will develop a risk minimisation strategy, in consultation with the child's family. In the case of anaphylaxis, the centre will inform all parents of the need to minimise allergens in the centre, and appropriate control mechanisms will be developed by staff for non-food allergies. Food allergies and any other dietary requirements relevant to the child's medical condition will be discussed with the centre cook to ensure safe food handling and the minimisation of cross contamination. All educators will be informed about the specific practices for each child, including the location and administration of medication. Children with life-threatening conditions that require medication (e.g. EpiPen) will not be accepted into care without their medication, and this should be checked and recorded by receiving educators.
6. The room leader, parent and director should ensure that the medical management plan is reviewed at least 12 monthly, or as a change in the condition/management occurs, and any changes are recorded on all copies.
7. Children will not self administer medication, and all medication should be handed to the appropriate educator for safe storage.
8. This policy will be read in conjunction with the appendix relevant to the specific condition.

Source: ACECQA National Law and Regulations, Nov 2011, part 4.2, 90, 91
Royal Children's Hospital website
DET website and Regulations guide 2011. National Regulations Nov 2011 88, 168(2)(d)
Anaphylaxis Victoria Inc website, Diabetes Victoria website