Policy



Early Years Policy – Dealing with Medical Conditions

Date of Adoption	10 April 2013						
Adoption Method		CEO		Director Community			
Director Signature		signed by: Maria Wriss A4566C08D5B4450		Date	06-12-2024		
Responsible Officer and Unit	Samantha Waymouth, Coordinator Early Years Services						
Nominated Review Period	Annually Every 4 years Other (please specify)						
Last Endorsement Date	October 2020						
Next Endorsement Date	November 2025						

Macedon Ranges Shire Council acknowledges the Dja Dja Wurrung, Taungurung and Wurundjeri Woi Wurrung Peoples as the Traditional Owners and Custodians of this land and waterways. Council recognises their living cultures and ongoing connection to Country and pays respect to their Elders past, present and emerging. Council also acknowledges local Aboriginal and/or Torres Strait Islander residents of Macedon Ranges for their ongoing contribution to the diverse culture of our community.

Contents

Purpose/Objective	3
Scope	3
Background/Reasons for Policy	3
Gender Impact Assessment	5
Definitions	5
References	6
Related Policies	6
Related Legislation	7
Responsibilities	8
Evaluation	11
Attachments	11



Purpose/Objective

This policy outlines the responsibilities for Council's Early Years Services to ensure:

- 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 childrens' medical conditions
- requirements for medical management plans are provided by parents/guardians for the child
- risk-minimisation and a communication plan are developed in conjunction with parents/guardians.

Scope

This policy applies to the staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Council's Early Years Services, including during offsite excursions and activities.

This policy should be read in conjunction with:

- Early Years Policy Anaphylaxis and Allergic Reactions
- Early Years Policy Asthma
- Early Years Policy Diabetes
- Early Years Policy Epilepsy and Seizures

Background/Reasons for Policy

The Education and Care Services National Regulations 2011 (Regulation 168) states that the approved service must have a policy for managing medical conditions which includes the following practices:



- the management of medical conditions
- parents to provide a medical management plan if an enrolled child has a specific health care need, allergy or relevant medical condition
- developing a risk minimisation plan in consultation with the child's parents/guardians
- developing a communication plan for staff members and parents/guardians.

Staff members and volunteers must be informed of any 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 staff in attendance, one of whom must be an educator. One adult will be responsible for the administration of medication, the other 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 Early Years Policy - Administration of Medication for more information.

Staff may require 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 requires invasive clinical procedures or support and is accepted by the service, it is vital that prior arrangements are negotiated with the parent/guardian, authorised nominees and/or appropriate health care workers to prepare in the event the child may require a procedure whilst in attendance at the service. Parents/guardians and the service should liaise with either the child's medical practitioner or allied health professionals to establish such an arrangement. Arrangements must be formalised following enrolment, and prior to the child commencing at the service.



Gender Impact Assessment

In accordance with the *Gender Equality Act 2020*, a Gender Impact Assessment was not required in relation to the subject matter of this policy.

Definitions

Term	Definition
AV How to Call Card	A card that the service has completed, containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from <u>https://www.ambulance.vic.gov.au/community/education/calling-an-</u> <u>ambulance/</u>
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.
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 (refer to the Early Years Policy - Anaphylaxis and Allergic Reactions for a sample risk minimisation plan).

References

- Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th edition, 2013) National Health and Medical Research Council: <u>https://www.nhmrc.gov.au/about-us/publications/staying-healthy-preventing-infectiousdiseases-early-childhood-education-and-care-services</u>
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011 <u>https://www.acecqa.gov.au/sites/default/files/2018-01/NQF-Resource-02-Guide-to-ECS-Law-Regs.pdf</u>
- > Ambulance Victoria: How to call card: <u>https://www.ambulance.vic.gov.au/wp-content/uploads/2019/08/How-To-Call-Card.pdf</u>
- Dealing with medical conditions in children policy and procedure guidelines -<u>https://www.acecqa.gov.au/media/31946</u>

Related Policies

> Early Years Policy - Administration of First Aid



- > Early Years Policy Administration of Medication
- > Early Years Policy Dealing with Infectious Diseases (including Child Immunisation)
- > Early Years Policy Anaphylaxis and Allergic Reactions
- > Early Years Policy Asthma
- > Early Years Policy Diabetes
- Early Years Policy Epilepsy and Seizures
- > Early Years Policy Supervision of Children
- > Early Years Policy Incident, Injury, Trauma and Illness
- > Privacy Policy (Council)

Related Legislation

- > 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
 - 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 (Vic)
- > Public Health and Wellbeing Act 2008 (Vic)
- > Public Health and Wellbeing Regulations 2009 (Vic)

Responsibilities

Mandatory Quality Areas 2 and 7

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	Parents/guardians	Contractors, volunteers and students
R indicates legislation requirement, an	id should no	t be deleted			
Ensuring that parents/guardians 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	V			
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	V		✓	
Ensuring families provide a medical management plan (if possible, in consultation with 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	R	√	√	✓	



minimised, and that the plan is reviewed at least annually (refer to Attachment 1) (Regulation 90 (iii))					
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	V	V	✓	
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 Council's Privacy Policy)	R	V			
Informing the approved provider of any issues that impact on the implementation of this policy		V	V	~	1
Ensuring families and early childhood teachers/educators/staff understand and acknowledge each other's responsibilities under these guidelines	✓	✓			
Ensuring early childhood teachers/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 early childhood teachers/educator with current approved first aid qualifications is in attendance and	R	✓			



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				
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 Early Years Policy - Anaphylaxis and Allergic Reactions)	R	V	V	
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		\checkmark	✓	✓
Administering medications as required, in accordance with the procedures outlined in the Early Years Policy - Administration of Medication (Regulation 93)	R	R	V	
Ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan	\checkmark	V	✓	
Maintaining ongoing communication between early childhood teachers/educators/staff and families in accordance with the strategies identified in the communication plan (refer to Attachment 1), to ensure current information is shared about specific medical conditions within the service	R	V	V	
Following appropriate reporting procedures set out in the Early Years Policy - Incident, Injury, Trauma and Illness 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	V	V	✓



Ensuring that the Ambulance Victoria How to Call Card (refer to References) is displayed near all telephones	\checkmark	\checkmark		
Ensuring children do not swap or share food, drink, food utensils or food containers	V	V	V	√
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	V	V	✓

Evaluation

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

- 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 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 all stakeholders, including parents/guardians, at least 14 days before making any significant changes to this policy or its procedures unless a lesser period is necessary due to risk (Regulation 172 (2)).

Attachments



• Attachment 1: Risk Management and Communication Plan Guidelines (D23-76911)

