



DEALING WITH MEDICAL CONDITIONS IN CHILDREN

2024

The
After
School
Klub

DEALING WITH MEDICAL CONDITIONS IN CHILDREN, 2024

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH, AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
90	Medical Conditions Policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
96	Self-administration of medication

Purpose

TASK service practices support the enrolment of children and families with specific health care requirements.

We aim to efficiently respond to and manage medical conditions at the Service ensuring the safety and wellbeing of all children, staff, families, and visitors.

Medical conditions include, but are not limited to asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis. In many cases, if not managed appropriately, these can be life threatening.

Strategies

Our Service is committed to adhering to privacy and confidentiality procedures when dealing with individual health and medical requirements. There are several concerns that must be considered when a child with a diagnosed health care need, allergy, or medical condition is enrolled at the service.

Key procedures and strategies must be in place prior to the child commencing at the Service to ensure their individual health and safety. Our services employ a NURSE to assist management of these medical conditions.

Enrolment

- On application for enrolment families will be required to complete full details about their child's medical needs (**National Regulation 90**). We will assess whether Educators are appropriately trained to manage the child's special health needs at that time.
- Where children require medication or have special medical needs for long term conditions or complaints, the child's doctor or allied health professional and parent/guardian must complete a Medical Action Plan (**National Regulation 90**). Such a plan will detail the child's special health support needs including administration of medication and other actions required to manage the child's condition.
- TASK nurse and the Health and Medical Team will also consult with the child's family to develop a Risk Minimisation Plan (**National Regulation 90(c)(iii)**). This plan will assess the risks relating to the child's specific health care needs, allergy or medical condition; any requirements for safe handling, preparation and consumption of food; notification procedures that inform other families about allergens that pose a risk; procedures for ensuring educators/students/volunteers can identify the child, their medication.
- Children with specific medical needs must be reassessed in regard to the child's needs and our TASK's continuing ability to manage the child's special needs, on a regular basis, depending on the specific child's medical condition.
- If a child's medical, physical, emotional or cognitive state changes the family will need to complete a new Medical Action Plan and our service will re-assess its ability to care for the child, including whether educators are appropriately trained to manage the child's ongoing special needs.
- It is a condition of enrolment that parents and families review and update medical conditions for their child. Enrolments will be cancelled if the Health and Medical Condition are not up to date.

Self-Administration of Medication

Children who self-medicate must be over preschool age (**National Regulation 90(2)**). Parents must give permission to the service for the service to allow the child to self-medicate and this will be kept in the child's file. Parents can email the permissions to enrol@task-kids.com.au

Communication Strategies

Our service will maintain the review and development of communication strategies to ensure that:

- Relevant staff members, volunteers and parents/carers are informed about the medical conditions policy and the Medical Action Plan and Risk Minimisation Plan for each child.
- A child's parent should communicate any changes to the Medical Action Plan and Risk Minimisation Plan for the child, setting out how that communication is to occur. Email is preferred to enrol@task-kids.com.au

Administration of Prescribed Medication

Prescribed medication, authorised 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 (**National Regulation 92(b)**).
- If the prescribed medication is in its original container bearing the child's name, dose and frequency of administration (**National Regulation 95**).

Medical Action Plans

Medical Action Plans are required if a child enrolled at our service has a specific health care need, allergy or relevant medical condition. This involves:

- Requiring a parent of the child to provide a Medical Action Plan for the child. The Medical Action Plan must clearly outline procedures to be followed by staff in the event of an incident relating to the child's specific health care needs (**National Regulation 90(c)(i)**).
- Requiring the Medical Action Plan to be followed in the event of an incident relating to the child's specific health care need, allergy or relevant medical condition (**National Regulation 90(c)(ii)**).
- A copy of the Medical Action Plan will be available for Educators and Staff to see to ensure the safety and wellbeing of the child, whilst ensuring the child's privacy by displaying only in the Health and Medical folder at each service.
- The Health & Medical Team acquiring an updated plan from the parents/carers prior to the 'review date' on the Medical Action Plans

Risk Minimisation Plans

All children with a diagnosed medical condition must have a risk minimisation plan in place.

Risk Minimisation Plans are required to be developed in consultation with the parents of a child (**National Regulation 90(c)(iii)**):

- To ensure that the risks relating to the child's specific health care need, allergy or relevant medical condition are assessed and minimised.
- To ensure that practices and procedures ensuring that all staff members and volunteers can identify the child, the child's Medical Action Plan and the location of the child's medication are developed and implemented.
- If relevant, to ensure that practices and procedures ensuring that the child does not attend the service without medication prescribed by the child's medical practitioner in relation to the child's specific health care need, allergy or relevant medical condition are developed and implemented.

Food Risk Minimisation and Control Methods:

TASK captures dietary requirements at enrolment. There is space to nominate food allergies, medical conditions as well as cultural/religious-based reasons for food choices. TASK offers vegetarian, halal and gluten-free and coeliac options when advised by parents/careers. TASK is nut-free, seafood-free and egg-free to minimise risk. As per TASK policies and procedures.

- TASK will only distribute food that is prepared by the service or by an approved supplier to students to ensure it remains a nut, seafood and egg free service.
- TASK or approved provider will ensure that all food is correctly labelled prior to distribution.
- All students will be supervised by TASK staff when eating food during break times.
- Students are required to wash their hands prior to eating food to assist in preventing cross contamination and germs.
- Staff will ensure they have cleaned their hands prior to preparing and handling food.

Asthma

- Whenever a child with asthma is enrolled at our service, or newly diagnosed as having a asthma, communication strategies will be developed to inform all relevant Educators, including students and volunteers, of:
 - the child's name, and room they are educated and cared for (in the child's Risk Minimisation Plan)
 - where the child's Medical Action Plan will be located
 - where the TASK preventer/reliever medication etc. will be stored

Asthma Emergencies

In the case of an asthma emergency, medication may be administered to a child without written parent/guardian authorisation. If medication is administered the parent/guardian of the child or the child's registered medical practitioner will be contacted as soon as possible

The National Asthma Council (NAC), recommends that should a child not known to have asthma appear to be in severe respiratory distress, the Asthma First Aid plan should be followed immediately.

The following steps are recommended:

- If someone collapses and appears to have difficulty breathing, call an ambulance immediately, whether or not the person is known to have asthma; Give 4 puffs of a reliever medication and repeat if no improvement.
- Keep giving 4 puffs every 4 minutes until the ambulance arrives.
- No harm is likely to result from giving reliever medication to someone who does not have asthma.

Anaphylaxis

- Whenever a child with severe allergies is enrolled at our service, or is newly diagnosed as having a severe allergy, a communications plan will be developed to inform all relevant educators, including students and volunteers (**National Regulations 90(1)(b)**), of:
 - The child's name and allergy/medical condition details
 - Where the risk minimisation plan and action plan is located
 - Where the medication and or auto injectors are located in case of emergency and who is responsible in case of a medical emergency
 - Changes to the child's medical condition.
- In accordance with the Education and Care Services National Regulations, our service will advise families that a child who has been diagnosed as at risk of anaphylaxis is enrolled at the education and care service (**National Regulation 173(f)(i)**).
- It is required that the child at risk of anaphylaxis will have a Medical Action Plan. Educators will become familiar with the child's plan and also develop an Individual Anaphylaxis Risk Minimisation Plan for the child in consultation with the child's parents/guardians and appropriate medical professional.
- Any changes to a child's medical requirements must be communicated to the relevant staff within the service.

Anaphylaxis Emergencies

- In the case of an anaphylaxis emergency, medication may be administered to a child without written parent/guardian authorisation. If medication is administered the parent/guardian of the child will be contacted as soon as possible.
- For anaphylaxis emergencies, educators will follow the child's Emergency Action Plan. If a child does not have an adrenaline auto-injector and appears to be having a reaction, the educator will administer adrenaline with the TASK auto Injector at the service. Staff administering the adrenaline will follow the instructions stored with the device. An ambulance will always be called.
- TASK always has several additional auto-injector's at our services.

Diabetes

Whenever a child with diabetes is enrolled at our service, or is newly diagnosed as having diabetes, a communications plan will be developed to inform all relevant educators, including students and volunteers, of:

- the child's name
- the child's Risk Minimisation Plan;
 - where the child's Emergency Action Plan will be located;
 - where the child's insulin/snack box etc. will be stored;
- Educators will be aware of 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 our service will be supported by the child having in place an Emergency Action Plan which includes: Administration of Insulin, if needed - information on how to give insulin to the child, how much insulin to give, and how to store the insulin. Insulin may be delivered as a shot, an insulin pen, or via an insulin pump.

- Meals and snacks – Including permission to eat a snack anytime the child needs it.
- Blood sugar testing – information on how often and when a child's blood sugar may need to be tested by educators
- Symptoms of low or high blood sugar – one child's symptoms of low or high blood sugar may be different from another. The child's Action Plan should detail the child's symptoms of low or high blood sugar and how to treat it. For high blood sugar, low blood sugar, and/or hypoglycaemia, educators will follow the child's Emergency Action Plan.
- Diabetes Action Plans are valid for 12 months

Responsibilities of the Approved Provider

- Ensuring the development of a communication plan and encouraging ongoing communication between parents/ guardians 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 (**National Regulation 90 (1)(c)(iv)**).
- Ensuring relevant staff have clear understanding and receive regular training in managing specific health care needs such as asthma management, anaphylaxis management and any other specific procedures that are required to be carried out as part of the care and education of a child with specific health needs.
- Notify any changes to policy within 14 days
- Ensuring at least one educator/staff member who has current accredited training in First Aid for specific medical conditions is in attendance and immediately available at all times that children are being educated and cared for by the service (**National Regulation 136(1)**).
- Ensuring that a Risk Minimisation Plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed regularly
- 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 (**National Regulation 91**).
- Ensuring educators have access to emergency contact information.
- Ensuring families have submitted a Medical Action Plan.

Responsibilities of the Nominated Supervisor

- Implementing this policy at the service and ensuring that all staff adhere to the policy.
- Informing the Approved Provider of any issues that impact on the implementation of this policy.
- Identifying specific training needs of staff who work with children diagnosed with a medical condition, and ensuring, that staff access appropriate training.
- Ensuring children do not swap or share food, 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.
- Ensuring a copy of the child's Medical Action Plan is visible and known to staff in the service.
- Ensuring staff follow each child's Risk Minimisation Plan and Medical Action Plan.
- 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 staff and parents/guardians in accordance with the strategies identified in the communication strategy to ensure current information is shared about specific medical conditions within the service.
- In the event that a child suffers from a reaction, incident, situation, or event related to a medical condition the Service and staff will:
 - Follow the child's Emergency Medical/Action Plan
 - Call an ambulance immediately by dialing 000
 - Commence first aid measures/monitoring
 - Contact the parent/guardian when practicable but as soon as possible
 - Contact the emergency contact if the parents or guardian can't be contacted when practicable but as soon as possible
 - Notify the regulatory authority (within 24 hours)

Responsibilities of the Educators

- Communicating any relevant/changes information provided by parents/guardians regarding their child's medical condition to the Nominated Supervisor to ensure all information held by the service is current.
- Being aware of individual requirements of children with specific medical conditions and following their Risk Minimisation Plan and Medical Action Plan.
- Monitoring signs and symptoms of specific medical conditions and communicating any concerns to the Nominated Supervisor.
- Ensure that parents/guardians are contacted when concerns arise regarding a child's health and wellbeing.

Responsibilities of the Families

- Informing the service of their child's medical conditions, if any, and informing the service of any specific requirements that their child may have in relation to their medical condition upon enrolment of child(ren).
- Developing a Risk Minimisation Plan with the nominated supervisor and/or other relevant staff members at the service.
- Providing a Medical Action Plan signed by a medical practitioner, either on enrolment or immediately upon diagnosis of an ongoing medical condition. This Medical Action plan must clearly outline procedures to be followed by staff in the event of an incident relating to the child's specific medical needs **(National Regulation 90(1)(c)(i))**.
- Families are responsible for communicating any changes and updating documents to their child's medical management. Email to medicalhealthsupport@task-kids.com.au

Links to other policies:

<https://www.task-kids.com.au/s/Incident-Injury-Trauma-and-Illness-Policy-2020-ST.pdf>

<https://www.task-kids.com.au/s/Nutrition-Food-Beverage-and-Dietary-Policy-2020-ST.pdf>

<https://www.task-kids.com.au/s/Administration-of-First-Aid-Policy-y4wz.pdf>

<https://www.task-kids.com.au/s/Enrolment-and-Orientation-Policy-2020-ST-jbyc.pdf>

<https://www.task-kids.com.au/s/Child-Safe-Environment-Policy-2020-y4p9.pdf>

<https://www.task-kids.com.au/s/Acceptance-and-refusal-of-Authorisations-Policy-2020-ST.pdf>