



Medical Conditions

Related Documentation	Administering Medication Medical Condition Plan Medical Information for Service Educators/Staff Nutrition Procedure
Relevant Legislation	Legislation, Standards and Guidance Material – Reference Table
Responsible Officer	Nominated Supervisor, Family Day Care Educator, Educators, staff, and volunteers at the service.

Uncontrolled when printed.

Definitions

Nil

Objectives

To inform educators, staff and volunteers of health needs, potential health risks and requirements of children in care and to plan for ways in which to manage and reduce these risks to children in partnership with the child’s parents or guardian and service educators, staff and volunteers.

Training and Competence

Council is committed to staff receiving training relevant to the tasks/activities undertaken in this procedure. Training requirements will be reviewed at least annually as part of the performance appraisal program, and recorded in Pulse. All training will be evaluated to ensure continuous improvement.

Competence of employees, including any contractors, labour hire employees or volunteers, will be assessed prior to their being expected to carry out the tasks associated with this procedure.

Records Management

All records related to this procedure are to be stored in IRIS (Intelligent Record Information System) in accordance with Council’s Records Management Policy.

Review and Evaluation

To maintain relevance and currency, this procedure will be reviewed on a two-yearly basis or as required due to changes in relevant legislation and codes of practice or changes to systems and processes.

The procedure will also be evaluated in consultation with employees at appropriately identified intervals to evaluate its effectiveness.

Regular review and evaluation is an opportunity to determine whether the procedure is fit for purpose and reflective of operational practice, and provide an opportunity to implement corrective measures or amend the procedure if required.

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Procedure

If a child has a diagnosed medical condition, such as:

- asthma
- diabetes
- a diagnosis that a child is at risk of anaphylaxis
- an allergy, or
- other specific health care need

A Medical Condition Plan must be completed in consultation with the child's parent or guardian prior to their acceptance of enrolment at the service:

The Medical Condition Plan will include:

1. Medical Management Plan

All Medical Condition Plans for children must be accompanied by a Medical Management Plan from the child's doctor or medical practitioner explaining the child's condition, symptoms and medical advice. This management plan must include the medical practitioner's provider number, contact details and doctor's stamp.

In the event of an incident relating to the child's specific identified health care need, allergy or relevant medical condition, the child's management plan provided by the medical practitioner is to be followed.

2. Medical Condition Risk Minimisation Plan

All Medical Condition Plans must include the following risk minimisation information:

- a) An assessment of the risks relating to the child's specific health care need, allergy or relevant medical condition
- b) Any practices or procedures, which are required in relation to the safe handling, preparation, consumption and service of food (if these practices differ to the Nutrition Procedure/FDC Educators Procedures and Guidelines).
- c) A record of known allergens that pose a risk to the child and strategies that will be implemented to minimise these risks.
- d) The procedure to ensure that all staff members and volunteers can identify the child, the child's Medical Management Plan and the location of the child's medication.
- e) An agreement signed by the child's parent or guardian that the child will 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.

3. Medical Condition Communication Plan

All Medical Condition Plans must include the following communication information:

- a) A signed acknowledgement by all relevant staff members and volunteers/FDC Educators and Educator Assistants that they are aware of the requirements of the:
 - Medical Conditions Procedure
 - Child's individual Medical Management Plan, Risk Minimisation Plan and Communication Plan.
- b) Details of how the child's parent or guardian can communicate any changes to the Medical Management Plan, Risk Minimisation and Communication Plan.

The Nominated Supervisor/FDC Educator will ensure that all educators, staff members and volunteers/Educator Assistants can identify a child with a medical condition, allergy, or other specific

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health care need as well as the child's Medical Management Plan and the location of the child's medication by displaying the Medical Information for Service Educators/Staff form in a prominent position in the service. The location of the child's medication will be determined on a case-by-case basis and specified on the Medical Information for Service Educators/Staff form. Emergency medication should always be accessible and never stored in a locked medication box.

This Medical Information for Service Educators/Staff form should remain confidential and only be accessible to educators, staff members and volunteers at the service (for example, displayed in the staff room or a storeroom).

At the beginning of each term, the Nominated Supervisor/FDC Educator or designated staff member will review the Medical Condition Plan with the parent or guardian to discuss if the management and risk minimisation plans are still current. Both the families and Nominated Supervisor/FDC Educator must sign the plan review section of Medical Condition Plan.

If a parent or guardian has any changes to the Medical Condition Plan, it must be communicated in writing (preferably via email) to the Nominated Supervisor/FDC Educator. Once written confirmation of changes is received, the Nominated Supervisor/FDC Educator must ensure that a revised Medical Condition Plan is developed and the changes are communicated to all educators, staff and volunteers/Educator Assistants. General information such as exposures, reactions, follow up appointments can be documented in the comments/progress notes section of the Medical Condition Plan.

A child with a medical condition such as asthma, diabetes, a diagnosis that a child is at risk of anaphylaxis, an allergy, or other specific health care need will 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.

If a child's medical management plan is to cease (for example; if a child 'grows out' of their allergy) the parent must provide evidence of this in writing from the child's Doctor.

Information regarding the administration of medication can be found in the [Administering Medication Procedure](#).

END OF PROCEDURE

This procedure is required under the Education and Care Services National Regulations and should not be edited or rescinded without permission from the Education and Care Services Senior Leadership Team.

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