

## **MANAGING AND RESPONDING TO MEDICAL CONDITIONS IN CHILDREN POLICY**

### **AIM:**

To comply with the Education and Care Services National Regulation 2012, specifically part 4.2, Division 3, clause 90, Medical Conditions policy; clause 94, Exception to authorisation requirement – anaphylaxis or asthma emergency.

To protect the health and well-being of children in care and detail the steps to be followed by carer/educators in response to an emergency relating to a child with a diagnosed medical condition such as Asthma, Anaphylaxis, Epilepsy, allergies or any other illness/condition.

### **RATIONALE:**

Australian statistics show that the incidence of medical conditions in children such as Asthma, Anaphylaxis and allergies are on the rise. These conditions are potentially life threatening and the management of these conditions and response to emergency situations arising from these conditions must be taken seriously by carer/educators and all other who work with young children.

In Australia today an estimated 40 per cent of children have an allergy of some sort, whether asthma, a food allergy, anaphylaxis or dermatitis.

The rise of food allergies is particularly concerning, because in children food allergies are the ones most likely to cause the severe and life threatening allergic reaction called anaphylaxis.

### **POLICY:**

#### **First aid qualifications**

- All carer/educators and carer/educator assistants registered with Clarence Family Day Care, and Child Development Officers of the service must hold a current first aid qualification that is approved by the Workcover Authority of NSW.
- All carer/educators and carer/educator assistants registered with Clarence Family Day Care must undertake approved Anaphylaxis Management training and ensure on-going currency of the training.
- All carer/educators and carer/educator assistants registered with Clarence Family Day Care must undertake approved Asthma Management training and ensure on-going currency of the training.

#### **First Aid and Information Provisions**

- It is essential that every child who has a diagnosed medical condition that is managed by medication in an emergency situation brings their prescribed medication to care for every session of care attended. Parents may be asked to provide the medication for their child prior to leaving their child in the care of the carer/educator.
- When a parent of a child receiving care indicates that the child has been diagnosed as having a medical condition that may require emergency first aid or medical treatment, the parent is to furnish the carer/educator and/or the scheme with an Emergency Action Plan that has been completed in consultation with and signed by, the child's doctor. It is the responsibility of the carer/educator to ensure that they have a current Emergency Action Plan for each child that requires one.
- If a parent does not provide an emergency action plan as required, it will be noted on the Enrolment Record, Parent/Carer Agreement and Carer Information Sheet that, despite having being requested to provide an action plan for their child, they have failed to do so.

- Emergency Action Plans are to be updated:-
  - i) whenever the child's medical condition changes, (*eg. worsens or improves*)
  - ii) following an emergency relating to the child's condition, that required administration of emergency medication (*eg: an Asthma attack or Anaphylactic reaction*)
  - iii) Twelve months after the date on the current plan.

### **Responsibilities of Parents**

- The parent of a child receiving care who has been diagnosed as suffering from a medical condition that may result in a health emergency **must inform the carer/educator and Clarence Family Day Care, in writing, of the details of the child's medical condition.**
- The parent of a child receiving care who has been diagnosed as having a medical condition that may require emergency first aid or medical treatment in the event of an emergency, **is to furnish the carer/educator and/or the scheme with an Emergency Action Plan that has been completed in consultation with, and signed by, the child's doctor.**
- Parents and carer/educators will work together to **develop a risk minimisation plan** that relates to the child's specific medical condition.
- If on commencing care, an emergency action plan has not been developed and lodged with the carer/educator, the carer/educator and/or the scheme may not accept the child into care.
- The parent of a child who has been prescribed medication for use in an emergency situation relating to a diagnosed medical condition, **must ensure that the child's medication is provided to the carer/educator at the beginning of every session of care.**
- The medication **must be in it's original packaging, bearing the original label** with the **name of the child** to whom the medication is to be administered and is to be **within it's expiry or use by date.**
- The parent of a child that may require medication to be administered by the carer/educator or that may be self-administered (*in the case of a child over pre-school age*) **must complete written authorisation for the carer/educator to administer or allow to be self-administered, the medication.** This authorisation must be recorded on the Authorisation to Administer Medication form and must include:-
  - a) the name of the child;
  - b) the authorisation to administer medication (including, if applicable, self-administration), signed by the parent or a person named on the child's enrolment record as authorised to consent to administration of medication;
  - c) the name of the medication to be administered;
  - d) the time and date the medication was last administered;
  - e) the time and date, or the circumstances under which, the medication should be next administered;
  - f) the dosage of the medication to be administered;
  - g) the manner in which the medication is to be administered:
- If a parent requests that a carer/educator provides relief or short term care for a child that is normally in care with another carer/educator, **the parent must furnish the relief carer/educator with information relating to the health and medical needs of the child.** In circumstances where the child has specific health or medical needs

the carer/educator providing relief or short term care must have in their possession, prior to the commencement of care, any emergency action plans, risk minimisation plans, medication permissions etc. relating to the child.

### **Responsibilities of Carer/Educators**

- If a carer/educator is informed by the parent of a child, that the child has been diagnosed as suffering from a medical condition that may be potentially life threatening, **the carer/educator must ensure that Clarence Family Day Care is made aware, in writing, of the diagnosis.**
- Carer/educators and parents will work together, and in consultation with the child's doctor, to **develop a risk minimisation plan** (*risk assessment*) that relates to the child's specific medical condition.
- The carer/educator of a child who has been diagnosed as suffering from a medical condition that may at some time present as an emergency situation **must ensure that the parent of the child furnishes them with an Emergency Action Plan that details the steps to take in the medical emergency.**
- The carer/educator of a child who has been prescribed medication for use in an emergency situation relating to a diagnosed medical condition, **must ensure that the child's medication is provided by the parent at the beginning of every session of care.**
- The carer/educator of a child who has been diagnosed as suffering from a medical condition that at any time may result in the need for emergency treatment, must at the first opportunity, **undertake training and/or professional development relating to the management of the condition and emergency response procedures.**
- Where a child has been diagnosed as being **at risk of anaphylaxis, a notice** stating this, and **including a photo of the child, must be displayed** at the service.
- If requested by a parent to provide relief or short term care for a child that is normally in care with another carer/educator, **the carer/educator providing the relief or short term care must seek and obtain information relating to the health and medical needs of the child.** In circumstances where the child has specific health or medical needs the carer/educator providing relief or short term care must have in their possession, **prior to the commencement of care, any emergency action plans, risk minimisation plans, medication permissions etc. relating to the child.**
- If a child with a medical diagnosis that requires the carer/educator to hold an emergency action plan and/or medication for the child, is taken on an excursion whilst in care, the carer/educator **must take on the excursion, a copy of the emergency action plan and any medication** that has been provided by the child's parent.
- If a child suffers a medical emergency whilst in care, the carer/educator will take all reasonable steps in response to the medical emergency and will **ensure that agreed procedures are followed** to protect the well-being of the child.
- Carer/educators will encourage children to take increasing responsibility for their own health and physical well-being by discussing health, hygiene and safety issues with children and involve them in developing an understanding of healthy lifestyles, good nutrition and resilience in the care of themselves.

### **Responsibilities of the Scheme**

Clarence Family Day Care will:-

- keep a register of children suffering from diagnosed medical conditions and/or disabilities. This register will be based upon the information provided by the parents of the children registered with the service and will be updated when information is received.
- provide relevant information, and facilitate the provision of specific training in the management of, and emergency responses to, diagnosed medical conditions suffered by children in care, for carer/educators and parents of those children. Timing of, and access to, the specific training will be dependant on availability constraints related to the regional location of the service. Training may be in the form of one-to-one sessions with medical personnel, group training sessions, on-line training or written information.
- endeavour to keep carer/educators and parents informed of their legal responsibilities regarding duty of care.
- provide a copy of this policy to parents of children enrolled at the service with specific health care needs, allergy or other relevant medical condition.

### **Relevant Legislation:**

*Education and Care Services National Regulation 2011:*

### **Key Resources:**

*Australian Society of Clinical Immunology and Allergy Inc. [www.allergy.org.au](http://www.allergy.org.au):  
[www.asthmaaustralia.org.au](http://www.asthmaaustralia.org.au):*