


YWCA Canberra		Policy No CS:2
DEALING WITH MEDICAL CONDITIONS IN CHILDREN POLICY		
Formulated: September 2009 Revised: October 2019		
Endorsed by: Senior Management		
Policy Type	Services	YWCA CANBERRA
Purpose of the Policy	To ensure that all educators working within YWCA Canberra Children's Services Programs can effectively respond to and manage medical conditions including asthma, anaphylaxis, diabetes, and epilepsy to ensure the safety and wellbeing of all children, educators, and visitors.	
Definitions	<p>Nut Free Service all nut-based products are eliminated from the centre.</p> <p>Diabetes is a complex disease that affects the body's ability to produce or use insulin.</p> <p>Asthma is a respiratory condition that causes the bronchi of the lungs to spasm causing difficulty in breathing.</p> <p>Epilepsy is a neurological disorder marked by sudden and recurrent episodes of sensory disturbance, loss of consciousness and seizures.</p> <p>Anaphylaxis is an acute potentially life-threatening allergic reaction</p> <p>Medical Risk Minimisation and Communication Plans are created by parents/carers to provide information to guide all staff, children, and parents/carers in the management of the medical condition including potential triggers, relevant medication and the appropriate first aid response.</p>	
Scope	<i>All YWCA Canberra Children's services that operate under the Education and Care National Regulations (2011), including Family Day Care, Before and After School Care Service, Holiday Programs, Early Learning services and any other interim or adhoc service provided by the portfolio, as deemed appropriate by the Children's Services Portfolio Director. Parents and Authorised Nominees of children enrolled at any YWCA Canberra Children's Services Programs</i>	
Policy	<p>YWCA Canberra Children's Services will involve educators, families, and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Our Services will adhere to privacy and confidentiality procedures when dealing with individual health needs. A copy of the Medical Conditions Policy is to be given to all parents on enrolment and on receiving a copy of the medical risk minimisation and communication plan.</p> <p><u>Identifying Children with Medical Conditions</u></p> <p>Parents/guardians are responsible to advise the education and care service about any medical condition, suspected medical condition, or known allergens that pose risk to the child. The service, in consultation with parents, are responsible of ensuring a Medical Communication Plan, Medical Action Plan and Risk Minimisation Plan is created for all children</p>	

with medical conditions. This must be reviewed within every 12 months and before the medical practitioner advised renewal date of the Medical Action plan.

Any child enrolled in a service who has been prescribed medication is not permitted to attend the service without the device/medication.

Families are required to provide information on their child's medical condition. This includes information on what the condition is, the symptoms and triggers of the condition, and the action to be taken if these symptoms occur.

Each Service will:

- Clearly display a child's Medical Action Plan in a space that is accessible to staff only i.e. Staff Room, Kitchen or Office.
- Maintain records relating to the child's medical condition at the service, including a Risk Minimisation Plan and Medical Communication Plan.
- Clearly display a sign that identifies the location of each child's medication.

Families are responsible for updating the service of any changes to their child's health care needs including any new medications, ceasing of medication, or changes to their child's prescription.

All educators and volunteers working within the service must follow a child's Medical Action Plan, Risk Minimisation Plan and Medical Communication Plan, in the event of an incident related to a child's specific health care need, allergy or medical condition.

A child's Risk Minimisation Plan and Communication Plan is to be renewed with families annually or as changes to the child's medical conditions occurs.

Information that must be provided in Enrolment Form

YWCA Canberra Children's Services Enrolment Forms allow for families to provide information to Service about their child's medical condition and the action they can take if symptoms occur. Each Service Director must ensure that they are familiar with the information in each enrolment form to ensure that medical plans have been provided if allergies are indicated.

Each child's enrolment form must contain the following details:

- Specific health care needs or medical conditions of the child, including disability status, allergies, dietary restrictions, asthma, diabetes, epilepsy, and whether the child has been diagnosed or is at risk of anaphylaxis.
- Any Medical Action Plan provided by a child's parent's and/or registered medical practitioner. Each Action Plan should:

1. Have supporting documentation if appropriate
2. Include a photo of the child
3. If relevant, state what triggers the allergy or medical condition
4. First aid response
5. Contact details of the child's treating doctor
6. Plan review date.

Copies of the plan should be kept with the child's medication and with their enrolment form. These forms are to accompany the child on any excursions they attend.

Anaphylaxis/Allergy Management

Anaphylaxis is usually caused by a food allergy. Foods most commonly associated with anaphylaxis include cow's milk, eggs, peanuts, tree nuts, sesame seeds, soy, fish, shellfish, and wheat. To decrease the risk of an anaphylactic reaction:

- The parent must provide medical information about the child at risk. This information should be in written form as a Medical Action Plan.
- Children with allergies and anaphylaxis must have a personalised Risk Minimisation Plan which outlines the steps the program will take to reduce the risk. This needs to be signed and dated by parents.
- Children with allergies and anaphylaxis must have a communication plan which outlines how the service will communicate the management of the allergy or anaphylaxis to all staff and how the family will communicate changes to the child's risk minimisation plan or condition to the service. This plan is to be fully updated within every 12 months.
- Educators responsible for the care of children at risk will be provided training in responding to anaphylactic reactions, including instruction on the use of an EpiPen®.
- Age-appropriate education will be provided to children with severe food allergies.

General procedures

- There will be no sharing or trading of food, food utensils and food containers.
- Children with severe food allergies will only eat meals that are prepared separately in line with a child's Medical Action Plan and family recommendations.
- Bottles, other drinks, and lunch boxes provided by the parent should be clearly labelled with the name of the child for whom they are intended.
- Prevent cross-contamination during food handling, preparation and serving of food. Hand washing and general food preparation procedures are appropriate measures.

- Specific requirements will be considered and accommodated when planning menus and cooking activities.

Because of the allergic reactions some individuals experience when meeting peanut and other nut products, the service will take measures to be a nut free service. This includes being vigilant not to purchase or use products containing these items and alerting families that products containing these foods are not to be brought into the service.

Our services will ensure that all medication for children with a medical condition is stored in a signed location that is known to all educators, including relief educators, easily accessible to adults (not locked away), inaccessible to children, stored as per medication instructions and away from direct sources of heat.

Educators should be on the lookout for symptoms of an allergic reaction as they need to act rapidly if they do occur. If a child is displaying symptoms of an anaphylactic reaction our service will:

- Call an ambulance immediately by dialling 000
- Ensure the first aid trained educator delivers appropriate first aid which may include the delivery of medication in line with a child's action plan, providing CPR if the child stops breathing.
- Contact the parent/guardian or the person to be notified in the event of illness if the parent/guardian cannot be contacted.

Asthma Management [R 90]

Risk minimisation practices will be carried out to ensure that the service is to the best of our ability providing an environment that will not trigger an asthmatic reaction.

An asthma attack can become life threatening if not treated properly. If a child is displaying asthma symptoms, our Services will:

- Ensure a first aid trained educator or educator immediately attends to the child. If the procedures outlined in the child's Medical Action Plan do not alleviate the asthma symptoms, or the child does not have a Medical Action Plan, the educator will contact emergency services and provide appropriate first aid.
- Children with asthma must have a personalised Risk Minimisation Plan which outlines the steps the program will take to reduce the risk of asthma attacks. This needs to be signed and dated by parents.
- Children with asthma must have a communication plan which outlines how the service will communicate the management of the asthma to all staff and how the family will communicate changes to the child's risk minimisation plan or condition to the service.
- Contact the child's other parent in the first instance or authorised contact where the parent cannot be reached.

Each Service will ensure that each First Aid Kit contains a Salbutamol reliever puffer and at least 2 spacer devices that are compatible with the puffer. For Early Childhood Services and Family Day Care, each first aid kit must also contain at least 2 face masks compatible with the spacer for use by children under 5.

Diabetes Management [R90]

The Services will implement procedures, where possible, to ensure children with diabetes do not suffer any adverse effects from their condition while at the service. These include ensuring they do not suffer from hypoglycaemia which occurs when the blood sugar levels are too low or Hyperglycaemia which occurs when the blood sugar levels are too high.

Children with diabetes may require a specific diet which the service will cater to where possible. The service will ensure information about the child's diet including the types and amounts of appropriate food is part of the child's Medical Action Plan. Children with diabetes must have a Risk Minimisation Plan which outlines the steps the program will take to reduce the risk of Hypoglycaemia or Hyperglycaemia. This needs to be signed and dated by parents. Children with diabetes must have a communication plan which outlines how the service will communicate the management of the diabetes to all staff and how the family will communicate changes to the child's risk minimisation plan or condition to the service.

If a child is displaying symptoms of 'hypoglycaemia' our service will:

- Ensure the first aid trained educator provides immediate first aid which will be outlined in the child's Medical Action Plan and may include giving the child some quick acting and easily consumed carbohydrate.
- Call an ambulance by dialling 000 if the child does not respond to the first aid and CPR if the child stops breathing.
- Contact the parent/guardian or the person to be notified in the event of illness if the parent/guardian cannot be contacted.

If a child is displaying symptoms of 'hyperglycaemia' our service will:

- Ensure a first aid trained educator provides immediate first aid which may be outlined in the child's Medical Action Plan and may include providing the child with extra fluids.
- Call parent or guardian to collect the child or call emergency services.

Specific training may be required for educators in the care of children with Diabetes.

Epilepsy Management [R 90]

Our Services will implement procedures where possible to minimise the exposure of susceptible children to the common triggers which can cause

an epileptic seizure. Children with epilepsy must have a Risk Minimisation Plan which outlines the steps the program will take to reduce the risk. This needs to be signed and dated by parents. Children with epilepsy must have a communication plan which outlines how the service will communicate the management of epilepsy to all staff and how the family will communicate changes to the child's risk minimisation plan or condition to the service.

If a child is displaying symptoms of an epileptic seizure our service will:

- Ensure an educator with the appropriate first aid training provides immediate first aid which will be outlined in the child's Medical Action Plan.
- Administer medication if outlined in child's Medical Action Plan
- Call an ambulance by dialling 000 if the child does not respond to the first aid or if it is deemed appropriate.
- Contact the parent/guardian or the person to be notified in the event of illness if the parent/guardian cannot be contacted.

Specific training may be required for educators in the care of children with epilepsy.

Infectious Diseases

The program is required by law to notify the Department of Health if an outbreak of any of the following infectious diseases occurs:

- Diphtheria
- Measles
- Mumps
- Poliomyelitis
- Rubella
- Whooping cough
- Tetanus
- HIB (Haemophilus Influenza type b)
- Meningococcal disease
- Covid-19

It is recommended that the program informs the Department of Health of an outbreak of a gastrointestinal or respiratory illness.

A medical certificate stating that the child is fit to return to the Service is required after an exclusion period. Programs must follow advice from Public Health to ensure outbreaks are contained and ongoing risk of infection minimised.

A copy of the infectious diseases policy and exclusion periods must be made available to parents at the time of enrolment. An 'exclusion period for infectious diseases' poster, detailing the minimum exclusion periods, must be displayed prominently at each Service.

Cytomegalovirus (CMV)

	<p>CMV is a virus which may cause birth defects. Educators working in a Children’s Services environment who are pregnant should take care when changing soiled nappies or assisting with children’s toileting. Other precautions related to infectious diseases include:</p> <ul style="list-style-type: none"> • Washing hands after changing nappies or handling any bodily secretions • Washing hands before and after food preparation • Not handling cat faeces • Not kissing children • Not gardening without gloves • Avoiding undercooked meats • Not sharing cutlery with children <p>YWCA Canberra will recommend during the employee induction process that educators have a test for CMV immunity before planned pregnancy. This allows informed decisions on work practices. Women who are pregnant are encouraged to inform their supervisor.</p> <p><u>Control of Communicable and Infectious Diseases</u> Ways to prevent the spread of infection include hand washing, cleaning, and sanitising, immunisation and excluding children and educators with contagious conditions from Early Education in accordance with Infectious Diseases/Exclusion Periods policies.</p> <p>This Policy must be given to Families at the time of enrolment.</p>
References including legislation	<p>Education and Care Services National Regulations 2011 (90, 168) Education and Care Services National Law (ACT) Act 2011 ACT Health Australasian Society of Clinical Immunology and Allergy (ASCIA) NHMRC Staying Healthy in Childcare 5th edition National Asthma Council Australia Asthma Australia Australian Diabetes Council Epilepsy ACT Epilepsy Action Australia</p>
Review Date	<p>August 2023</p>
Related Policies	<p>Enrolments and Orientation Record Keeping Supervision of Children Incident, Illness, Injury or Trauma Communication First Aid Serious or Critical Incidents Administration of Medication including Herbal or Homeopathic Remedies Immunisation and Health Records</p>
Prepared By	<p>Children’s Services</p>

