Dealing with Medical Conditions

Policy/Procedure Number: **QA2 - 9**

Policy/Procedure Requirement: National Quality Standards 2 & 7; Regulations 90, 91 & 168

Policy Statement

The Service will ensure that every child with a diagnosed medical condition, allergy, or specific health care need (including asthma, diabetes, epilepsy, and risk of anaphylaxis) is provided with safe, inclusive, and effective care. This includes the development and implementation of **Medical Management Plans**, **Risk Minimisation Plans**, and **Communication Plans** in line with the **Education and Care Services National Regulations**, **ACECQA guidance**, and health authority recommendations.

The Service requires **all Educators, Coordinators and Nominate Supervisor** to hold current First Aid certificate for early childhood setting (**HLTAID012**).

Rationale

To ensure that children with medical conditions are cared for safely, and that educators, coordinators, and volunteers are equipped with the knowledge and procedures needed to manage medical conditions and emergencies.

This includes clear processes for communication with families, training of staff, documentation, and compliance with current health authority guidance such as **ASCIA Action Plans**, **National Asthma Council Australia**, and **Diabetes Australia**.

Strategies and Practices

Enrolment and Orientation

- Before a child can commence orientation or family day care, families must complete an online enrolment form that contains detailed information about the child's health needs, including:
  - any diagnosed medical condition
  - allergies and the risk of anaphylaxis
  - contact details for any person who is authorised to consent to medical treatment or administration of medication to the child
- At orientation and enrolment, the Educator and/or Nominated Supervisor will meet with families to discuss their child's health needs, including any adjustments that may be needed to support meaningful inclusion. The Educator will advise families of relevant policies and procedures, and any additional requirements that may need to be fulfilled before the child starts care

Medical Management Plan

- A Medical Management Plan must be in place for every child enrolled at the Service who has been diagnosed with a health care need or medical condition
- This could be a specialised management plan specific to a medical condition. For example, an ASCIA Anaphylaxis Action Plan, Asthma Action Plan or Epilepsy Management Plan
- Orientation may be delayed until a Medical Management Plan has been provided
- If a child develops a specific health care need or medical condition after they are enrolled, their family will need to provide a Medical Management Plan as soon as possible

- The Medical Management Plan must be:
  - prepared and completed by the child's medical practitioner or health care provider
  - provided to the Service by the child's family
  - included in the child's enrolment record and in the child's folder at FDC residence
  - implemented at all times for any child with a specific health care need or medical condition - for example, asthma, type 1 diabetes, epilepsy or anaphylaxis

The **Medical Management Plan** should include the following:

- details of the diagnosed health care need or medical condition
- if relevant, known triggers for the allergy or medical condition
- any reasonable adjustments or supports required
- any current medication prescribed for the child, including dosage and storage requirements
- the response required in relation to the emergence of symptoms
- any medication that must be administered in an emergency
- the response required if the child does not respond to initial treatment
- when to call an ambulance for assistance
- contact details of the medical practitioner who signed the plan
- the date when the plan should be reviewed

A copy of the Medical Management Plan is kept in the child's folder at easy reach for the Educator. The Medical Management Plan always **remains current**, and is reviewed at least annually.

Management of Specific Medical Conditions

- **Asthma:** Follow the child's **Asthma Action Plan** (National Asthma Council). Ensure reliever medication and spacer is available at all times
- **Anaphylaxis:** Follow the child's **ASCIA Action Plan for Anaphylaxis**. Adrenaline auto-injectors (e.g., EpiPen) must be accessible and checked for expiry. Coordinators will check Educators' knowledge in using EpiPen during the 3 monthly assessment.
- **Diabetes:** Follow the child's **Diabetes Management Plan** (Diabetes Australia). Ensure access to glucose monitoring and hypo/hyperglycaemia management procedures. The Service requires Educators to complete a suitable diabetes management training if caring for a child with diabetes (e.g, Practical Diabetes for Childcare Educators)
- **Epilepsy or other conditions:** Follow medical management plans developed with a child's medical practitioner

Risk Minimisation Plans

- Developed in **consultation with parents** and the **Service** for each enrolled child with a medical condition. Plans will:
  - Be informed by the Medical Management Plan
  - Identify known allergens and triggers
  - Be updated immediately if there are any changes to the child's medical condition
  - Outline strategies to minimise exposure to allergens (e.g., food restrictions, cleaning procedures, supervision at mealtimes)
  - Ensure **parents of other children are informed** (without breaching confidentiality) of known allergens (e.g., nuts) that pose a risk to a child

- Ensure children do not attend without their prescribed medication (e.g., EpiPen, Ventolin, insulin)

Communication Plans

- The Service will ensure **communication plans** are in place and explain:
  - Informed of the Service's **Dealing with Medical Conditions Policy**
  - Inform all Educators, Coordinators, and volunteers of the child's medical needs
  - Provide clear instructions on responding to an emergency (e.g., ASCIA plans displayed in sleep areas, kitchen, and first aid kits)
  - Ensure parents are updated on changes to plans, incidents, or exposure to allergens
  - Remind families regularly (via newsletters or meetings) **to update** medical management plans annually or as changes occur
- Educators will ensure that all staff, volunteers, and relief educators are:
  - Shown how to identify children with medical conditions
  - Made aware of the child's **Medical Management Plan**, **Risk Minimisation Plan**, and the **location of the child's medication**
- Visual identifiers (e.g., photo ID on medical plans stored in the kitchen/first aid area) will support quick recognition

Medication Record and Self-Administration

- Educators must complete the **Medication Record** whenever a child is administered medication
- If a child self-administers medication (where permitted by their medical practitioner and parents), Educators must:
  - Record the time, dose, and circumstances in the Medication Record
  - Monitor the child to ensure correct administration
  - Notify parents of the self-administration

Reviewing and Updating Plans

- Medical Management Plans, Risk Minimisation Plans, and Communication Plans will be:
  - Reviewed **at least annually**
  - Updated immediately if the child's condition, medication, or treatment changes
  - Shared with all relevant staff, Educators, and volunteers after each review

Responsibilities of the Service:

The Service will ensure:

- Nominated Supervisor, Coordinators, Educators, students on placement and volunteers are provided with a copy of this policy (available on Service website) and have a clear understanding of, and adhere to, its procedures and practices
- Families who are enrolling a child with specific health care needs are advised of this policy (available on Service website)
- Coordinators and Educators are made aware of their responsibilities with regard to maintaining the confidentiality and privacy of health/ medical information of children
- Ensure that children with a medical condition are not discriminated against in any way

Responsibilities of the Educators:

The Educators will:

- Follow Medical Management Plans, which include plans for asthma, anaphylaxis and diabetes, in the event of an incident relating to the child's specific health care need, allergy or relevant medical condition
- **Inform the Service Manager** and **Coordinators** of the requirements of the Medical Management Plan
- In consultation with the Parents and the Coordinator, prepare and maintain a **Risk Minimisation Plan** and **Medical Communication Plan** for **each child with a medical condition**
- **Display a notice** near the front entrance of the FDC residence advising that an enrolled child has been diagnosed as being at risk of anaphylaxis
- Ensure Risk Minimisation Plans are carried out in line with this policy and procedure
- Monitor the child's health closely, being aware of any symptoms and signs of ill health, and contacting families if changes occur
- Follow the Medication Policy including appropriate storage, administration and disposal of medications
- Regularly communicate with families about their child's medical condition
- Ensure all staff, including the nominated supervisor, are informed of any changes to a child's medical condition
- Understand the individual needs of children in their care who have a Medical Management Plan and Risk Management Plan in place
- **Update and implement** the Risk Management Plan **when circumstances change** for a child's health care need or medical condition
- Ensure all children's health and medical needs are taken into consideration on excursions and during outdoor play
- Ensure that children with a medical condition are not discriminated against in any way
- Maintain current approved first aid, CPR, asthma and anaphylaxis training (HLTAID012)
- Only administer prescribed medication if it's in its original container, bearing the original label with the name of the child, the dosage to be given and is within the expiry and use by date
- Ensure that all non-prescribed medication (as an example: Paracetamol, nappy cream) are in the original container with the original label, have clear dosage instructions and a used date not past
- Provide parents/guardians a copy of the Service's *Dealing with Medical Conditions Policy* to the parent at time of enrolment
- Provide the *Incident, Injury, Trauma and Illness Record* to the Service to be kept until the child turns 25 years
- Keep children's personal medication (e.g. Epipen) and Medical Management Plan easily recognisable and accessible to adults
- Ensure that children's personal medication and Medical Management Plans are with the child whenever they are taken out of the Educator's home
- Follow the template Medical Condition Risk Minimisation Plan and Medical Communication Plan provided below

Responsibilities of Parents:

The Parents will:

- **Complete a Medical Management Plan** for a child with a known medical condition, allergy or other health care need with the assistance of the child's medical practitioner and provide it to the Educator
- **Administer the first dose of medication at least 2 hours before the child attends care**, due to the possibility of side effects
- Sign and provide the **Medication Record** Form to the Educator authorising the Educator to administer specific/prescribed medicines
- Inform the Educator of any changes to their child's medical needs and if required provide updated Medical Management Plan
- In case of emergency, provide verbal authorisation to the Educator
- Review and update the medical management plans annually

Medical Condition Risk Minimisation Plan (e.g. Anaphylaxis)

Child's Name _____

Rationale

Risk Minimisation Plan and Communication Plan for children with specific health care needs, such as anaphylaxis, asthma and relevant medical conditions

Minimising Medical risks

- FDC Educator has First Aid training with Anaphylaxis and Asthma management
- The medical management plan and risk minimisation plan are kept in the child's folder at easy reach for the Educator
- A copy of the medical management plan and child's medication are also kept with the First Aid Kit and in the Educator's emergency evacuation bag
- A copy of the Medical Management Plan prepared by a medical practitioner and the child's medication are kept with the First Aid Kit and in the Educator's emergency evacuation bag
- The child's medication is stored safely and out of reach of children in a locked cupboard
- The child's medication will be checked to ensure it is current and has not expired
- There is a notification displayed near the **front entrance of the FDC residence** that a child in care is at **risk of anaphylaxis,** with other prescribed information such as **evacuation plan**
- The Educator will notify the Service and/or the Nominated Supervisor (Service Manager) of all children with specific health care needs, allergies or diagnosed medical conditions
- Parents are required to **authorise administration of medication** on the Medication Record, and Educator will **complete administration of medication record** whenever medication is provided
- A copy of the parent's authorisation to administer medication is attached to medical management plan and original filed in the child's folder
- The Educator will **notify parents** of other children attending care of **any allergens that pose a risk to the child**

Potential triggers for child's health care need, allergy, or medical condition:

- Educator should list the **triggers and allergens** based on the medical management plan and information from parents. Examples include:
  - → Eating certain foods
  - → Using products containing certain foods, chemicals or other substances
  - → Temperature
  - → Dust
  - → Physical activity
  - → Laughing
  - → Exposure to certain animals or plants
  - → Mould/pollen
  - → Missed meals
  - → Too much insulin (diabetes)

- Triggers that are specific to the Child's medical condition:
  →
  →
  →
  →

Educator will minimise the effect of triggers by:

- The Educator must take all appropriate precautions when preparing and/or serving food while caring for a child with allergy. For example:
  → Clean tables and floors of any dropped food as soon as practical
  → Child will be supervised at all times vigilantly while other children are eating and drinking
  → The child will only eat food prepared and bought to the service by the parents
  → The child's food items will be labelled clearly. Educators may refuse to give the child unlabelled food
  → Child to be seated a safe distance from other children when eating and drinking with an educator positioned closely to reduce the risk of the child ingesting other children's food or drinks
- The Educator must write down the actions in response to known **allergens** or child's health care needs. For example:
  → Keeping the care area warm
  → Keeping the child indoor when weather turns cooler
  → FDC residence will be cleaned daily to reduce allergens
  → Educator will use damp clothes to dust so it's not spread into the atmosphere
  → Child will be supervised to prevent movements from hot or warm environments to cold environments
  → Child will not feed pet chickens

- The Educator will complete the following to eliminate/ minimise the effect of triggers for the Child with medical condition:

Risks	Strategy	Who is responsible?

Medical Communication Plan

Educator and Coordinator:

Action	Check
Coordinator will ensure that all Educators, volunteers and students understand the medical conditions for the child	☐
Medical Management Plan is fully completed and easily accessible by the Educator	☐
The Risk Minimisation Plan is developed and completed by Educator and family	☐
The Educator will notify the Service of any changes to the child's medical condition	☐
Medication will be stored out of reach of children, but in a recognisable location known. Medication will be checked to ensure it meets policy requirements.	☐
The Coordinator and the Educator will ensure the Medical Management, Risk Minimisation and Communication Plan are reviewed annually, or when changes are identified	☐

Parents/ Guardians:

Action	Check
Medical Management Plans are correct and current to ensure the correct information is provided to the Educator and Service	☐
If medical condition is food-related, families will ensure they have spoken with the Educator about their child's requirements	☐
The Risk Minimisation Plan has been developed in consultation with the family and the Educator	☐
Any changes to the child's medical condition will be communicated immediately to the Educator and Service	☐
All medications required will be given to the Educator when the child is in attendance. Medication will be prescribed by the child's doctor, in-date and clearly labelled	☐
The Medical Management, Risk Minimisation and Communication Plan will be reviewed annually, or when changes are identified	☐

I/we agree to these arrangements, including the display of a notice alerting parents and visitors that a child with a specific allergy/ condition attends care (without identifying the child) and prohibiting food or other items that may trigger the allergy/ condition from being brought into the FDC residence during care hours.

Parent/s Name and Signature _____ Date _____

FDC Educator Signature _____ Date _____

Resources and Further Readings

- ACECQA (2023) Guide to the National Quality Framework
- ACECQA (2023) Policies and procedures guidelines: *Dealing with medical conditions in children policy and procedure guidelines*
- ACECQA (2023) Information Sheets
- Education and Care Services National Law Act 2010 (Amended 2023)
- Education and Care Services National Regulations (Amended 2023)
- ACECQA National; Quality Framework Resource Kit www.acecqa.gov.au
- Asthma Foundation - http://www.Asthmafoundation.org.au
- Allergy & Anaphylaxis Australia - https://www.allergyfacts.org.au/
- Australasian Society of Clinical Immunology and Allergy - http://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis#sthash.1MriX2GY.dpuf

Related FDC Policies, Procedures & Documents

- Nutrition and Dietary Requirements
- Administration of First Aid
- Interactions with Children
- Acceptance and Refusal of Authorisations
- Parent Agreement Form
- Authorisation of Medication Form
- Medication Self Administration Form
- Incident, Injury, Trauma and Illness Form
- Medical Management Plan

Last Reviewed: October 2025
Next Review: October 2026