



# Lake Boga Primary School

## OSHC

*'Be the best that we can be'*

### Medical Conditions Policy

**Rationale:** An important objective of the National Quality Framework is to ensure the safety, health and wellbeing of all children attending education and care services. When a child who has a diagnosed health care need, allergy or relevant medical condition is enrolled at an education and care service additional requirements must be met to ensure that the child's safety, health and wellbeing is protected.

**Purpose:** This policy ensures compliance with the Education and Care Services National Regulations by outlining the procedures to be followed when accepting an enrolment of a child who has a diagnosed health care need, allergy or relevant medical condition diagnosed by a registered medical practitioner.

**Background:** A medical management plan and risk minimisation plan must be prepared for every child who is enrolled in a service and who has a diagnosed health care need, allergy or relevant medical condition (regulation 90(1)). Other documentation and legislation that is relevant to this policy includes:

- Education and Care Services National Law Act 2010: Section 173
- National Quality Standard, Quality Area 2: Children's Health and Safety
  - Standard 2.1 Each child's health is promoted
    - Element 2.1.1 Each child's health needs are supported
    - Element 2.3.2 Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
- Children's Services and Education Legislation Amendment (Anaphylaxis Management) Act 2008 (Vic):
  - On 14 July 2008, the Children's Services and Education Legislation Amendment (Anaphylaxis Management) Act 2008 came into effect amending the Children's Services Act 1996 and the Education and Training

Reform Act 2006 requiring that all licensed children's services and schools have an anaphylaxis management policy in place.

### **Implementation:**

The **Approved Provider** is responsible for:

- Development, monitoring and review of the Medical Conditions Policy and related systems, ensuring all content meets legislative requirements
- Developing and Implementing a communication plan and encouraging ongoing communication between parents/guardians and staff regarding the current status of child's specific health care needs, allergy or medical condition
- Ensuring at least one staff member who has current accredited training in emergency management requirements for specific medical conditions is in attendance and immediately available at all times for the children being educated and cared for by the service
- Establishing robust induction procedures that include the provision of information regarding the implementation of the practices outline in this policy
- Overseeing the implementation and adherence to this Medical Conditions Policy
- Seeking individual community feedback and facilitating an active consultation process with service users as appropriate
- Addressing any instance of non-compliance with this policy, and implementing strategies to prevent such occurrences
- Ensuring suitable resources and support systems are in place to enable compliance with this policy and support to children/families with diagnosed health care needs
- Following appropriate reporting procedures in the event that a child is ill, or is involved in a medical emergency or an incident at the service that results in injury or trauma.

The **Nominated Supervisor** is responsible for:

- Ensuring all staff are aware of and have access to this Medical Conditions Policy
- Facilitating annual policy training to OSHC educators on the appropriate implementation of this policy, including the process of developing a risk minimisation plan

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- Informing the Approved Provider of any issues that impact on the implementation of this policy
- Reviewing all enrolment records and identifying any children with medical conditions as part of the enrolment and orientation process
- Ensuring all staff (including relief and volunteers) are familiar with all children diagnosed with medical conditions in the services care
- Ensuring a medical management plan has been provided by the parents/guardians upon enrolment for any child with a specific health care need, allergy or medical condition that requires a medical management plan
- Ensuring a child with a specific health care need, allergy or medical condition does not commence care until all relevant documentation is provided
- Ensuring children do not stay at the service if a medical management plan is not available or is out of date
- Ensuring coloured photo identification of the child is provided with the medical management plan to assist staff identifying the child
- Developing a Risk Minimisation Plan and implementing the strategies identified
- Keeping a minimum of 3 copies of the medical management plan for each medical condition; one located with the child's enrolment, one with any medication required and one to be displayed for the educators, whilst taking into account child's privacy
- Discussing with parents the need to display the plan (with child's identification) for the purpose of the child's safety and obtain their consent
- Ensuring in the event of an incident relating to the specific health care need, staff will follow the child's individual medical management plan and will call an ambulance if symptoms accelerate or become life threatening
- Monitoring the safety, health and wellbeing of all children being educated and cared for
- Ensuring all parents/guardians are regularly asked if their child has developed any diagnosed health care need, allergy or relevant medical condition
- Ensuring additional precautions are enacted when preparing food for children with dietary restrictions (following food health and safety regulations)

- Ensuring food preparation, food service and relief staff are informed of children and staff who have a specific medical condition or food allergy, the type of condition or allergies they have, and service procedures for dealing with emergencies involved in allergies and anaphylaxis
- Ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan
- Administering medications as required, in accordance outlined in the Administration of Medications Policy
- Supervising any children whom are able to self-administer to do so safely and in alignment with their minimisation plans
- Maintaining ongoing communication between educators/staff and parents/guardians in accordance with the strategies identified in the communication plan, ensuring current information is shared about specific medical conditions within the service

**Educators** are responsible for:

- Meeting the requirements outlined in this policy
- Adequately supervising all children, including those with specific medical conditions
- Monitoring for signs and symptoms of specific medical conditions, and communicating any concerns with the Nominated Supervisor or Responsible Person
- Ensuring in the event of an incident relating to the specific health care to follow the child's individual medical management plan and call an ambulance if symptoms accelerate or become life threatening

**Parents/Guardians** are responsible for

- Informing the service at any time of any diagnosed health care needs, allergies or relevant medical conditions for their child
- Providing the service with a medical management plan signed by a medical practitioner, either on enrolment or immediately on diagnoses of an ongoing medical condition. This must include a current photo of the child and must clearly outline procedures to be followed by educators/staff in the event of an incident relating to the child's specific health care needs
- Participating in the development of a risk minimisation plan with the service

- Informing the service of any relevant changes to the nature of, or management of, the child's diagnosed health care need, allergies or relevant medical condition and if necessary providing an updated management plan
- Meeting the cost of training staff to perform specific medical procedures relevant to their child, as required
- Ensuring all medications required are provided to the OSHC service
- Informing the Nominated Supervisor of any issues that impact the implementation of this policy.

**Volunteers and Students**, whilst at the service, are responsible for following this policy and its procedures

### **Risk Minimisation Plans**

Developed by the Nominated Supervisor and families of children with specific medical conditions that require medical management plans, risk minimisation plans should include;

- Identification and assessment of all risks relating to a child's specific health care need, allergy or medical condition
- Strategies to minimise all identified risks
- If relevant, practices and procedures that are to be put into place in relation to food handling, preparation, consumption and service of food
- The development of any practices in relation to the self-administration of medication by children (including supervising the child and ensuring a medication record is kept)
- Practices and procedures to embed into program that ensures all staff members and volunteers can clearly identify the child, the location of their medical management plan and the location of the child's medication
- Communication procedures for notifying parents/guardians of any known allergens that pose a risk to the child within the care environment and strategies to minimise risk
- If relevant, practices and procedures to ensure the child does not attend the service without the appropriate medication prescribed by the child's medical

practitioner in relation to the child's specific health care need, allergy or relevant medical condition

## Allergies

Students with a mild or moderate allergy to a food or insect and those with medication allergy should have an Australian Society of Clinical Immunology and Allergy (ASCIA) action plan for allergic reactions that has been completed by the student's medical practitioner. It is the Responsibility of the **Parent/Guardians** to provide the Lake Boga OSHC with an up to date copy of this action plan and work with the staff to develop a risk minimisation plan for their child.

The **Nominated Supervisor** is responsible for:

- Developing a risk minimisation plan for all students with mild to moderate allergies in conjunction with their parents/guardian and ensuring these are reviewed annually
- Developing prevention strategies to be used by Lake Boga Primary School OSHC to minimise the risk of an allergic reaction
- Communicating with relevant staff, students and members of the school community about students with allergies and how they will be managed
- Meeting with parents or guardians about medication and responding appropriately to an allergic reaction
- Establishing and annually reviewing First Aid response procedures for OSHC programs
- Reviewing each student's Individual Allergic Reactions Management Plan immediately prior to any excursion in which the student is participating to ensure risks are minimised
- Ensuring the Allergy plan is enacted and the procedures listed are followed in the event of an allergic reaction of the child

**Note:** Although children with a Green Plan are assessed as being at less risk for anaphylaxis it is important to note that anaphylaxis can occur in any child with food/insect allergy at any time. General use adrenaline auto injectors held by the Lake Boga OSHC should be administered in the event of anaphylaxis occurring in these children.

## Anaphylaxis

Anaphylaxis is a severe, rapidly progressive allergic reaction that is life threatening. Students with severe allergies should have an Australian Society of Clinical Immunology and Allergy Action Plan for Anaphylaxis that has been completed by the student's medical practitioner. The plan outlines the student's known severe allergies and the emergency procedures to be taken in the event of an allergic reaction. It is the responsibility of the **parent/guardians** of a child with a severe allergy to provide Lake Boga OSHC with a copy of their child's ASCIA Action Plan for Anaphylaxis (with a up-to-date photo of the student) and to inform the OSHC if their child's medical condition changes.

The **Nominated Supervisor** is responsible for:

- Developing a risk minimisation plan for all students with severe allergies in conjunction with their parents/guardian and ensuring these are reviewed annually
- Developing prevention strategies to be used by Lake Boga Primary School OSHC to minimise the risk of anaphylactic reaction
- Communicating with relevant staff, students and members of the school community about students with allergies and how they will be managed
- Meeting with parents or guardians about medication and responding appropriately to an allergic reaction
- Establishing and annually reviewing First Aid response procedures for OSHC programs
- Maintaining competency with the use of an adrenaline auto injector (Anaphylaxis qualification)
- Reviewing each student's Individual Action Plan for Anaphylaxis immediately prior to any excursion in which the student is participating to ensure risks are minimised
- Taking students adrenaline auto injectors when participating in excursions
- Ensuring the Action plan is enacted and the procedures listed are followed in the event of an allergic reaction of the child

## Asthma

Asthma is a chronic, treatable health care condition that affects approximately one in ten Australian children and is one of the most common reasons for childhood admission into hospital. Asthma management should be viewed as a shared responsibility. Whilst Lake Boga Primary School OSHC recognises its duty of care towards children with asthma during their time at the service, the responsibility of ongoing asthma management rests with the child's family and medical practitioner.

The **Nominated Supervisor** is responsible for:

- Ensuring parents/guardians have access to the Medical Conditions Policy, and helping them understand their responsibilities in relation to their child's participation in the service
- Identifying children with Asthma during the enrolment process and informing staff member
- Ensuring parents/guardians have access to and complete an Asthma care plan in consultation with a medical practitioner, and provide this to OSHC prior to commencement
- Developing a risk management plan for every child with Asthma, in consultation with parents/guardians
- Ensuring a medication record is kept for each child whom medication is to be administered by the service
- Implementing an asthma first aid procedure consistent with national recommendations if an asthmatic emergency occurs
- Displaying Asthma First Aid procedures within the OSHC room and in service 1<sup>st</sup> Aid Kits
- Ensuring all staff are aware of asthma first aid and assist students who are displaying signs of asthma
- Ensuring the expiry date of reliever medication is checked regularly and replaced when required
- Facilitating communication between management, educators and parent/guardians regarding these asthma guidelines
- Identifying and minimising asthma triggers for children attending the service
- Communicating any concerns with the parents/guardians regarding the management of children with asthma at the service
- Ensuring that medication is administered in accordance to the administration of medication policy
- Ensuring that when medication has been administered to a child in an asthma emergency without authorisation from a parent/guardian or authorised nominee, the parents/guardians of the child and emergency services are notified as soon as practicable
- Following appropriate reporting procedures
- Ensuring Asthma first aid is taken on excursions

**Educators** are responsible for:



- Ensuring they are aware of the services Medical Conditions policy and procedures that relate to asthma management
- Ensuring they can identify children displaying symptoms of an asthma attack and locate their personal medications, asthma care plans and the service first aid kit
- Maintaining current approved Emergency Asthma Management qualifications
- Identifying and where possible, minimising asthma triggers within the service environment
- Administering prescribed asthma medication in accordance with a child's asthma care plan and the administration of medication policy
- Consulting with the parents/guardians of children with asthma in relation to the health and safety of their child, and the supervised management of the child's asthma
- Communicating any concerns to the parents/guardians if the child's asthma is limiting their ability to participate fully in all activities
- Ensuring children with asthma are not discriminated in any way

**Parents/Guardians** are responsible for:

- Reading and understanding these Asthma guidelines in this Medical Conditions Policy
- Informing Lake Boga Primary School OSHC, either on enrolment or on initial diagnosis, that their child has asthma
- Providing a copy of their child's Asthma care plan to the service and ensuring it has been prepared in consultation with, and signed by, a medical practitioner. The Asthma Care plan should be reviewed and updated at least annually
- Working with the staff to develop a risk management plan for their child
- Providing an adequate supply of appropriate asthma medications and equipment for their child at all times and ensuring it is appropriately labelled with the child's name
- Notifying staff, in writing, of any changes to the information on the asthma care plan, enrolment form or medication record
- Communicating regularly with educators/staff in relation to ongoing health and wellbeing of their child, and the management of their child's asthma
- Encouraging their child to learn about their asthma, and to communicate with service staff if they are unwell or experiencing asthma symptoms

## Signs and Symptoms of an Asthmatic Flare Up

### MILD TO MODERATE

- Minor difficulty breathing
- Able to talk in full sentences
- May cough or wheeze
- Able to walk and move around

Ask the Child/Person if they have asthma and if they need help? Follow the instructions on the child's Asthma Management Plan. If the Child/Person is undiagnosed but displaying signs of Asthma, Follow Asthma 1<sup>st</sup> Aid procedures.

### SEVERE

- Obvious difficulty breathing
- Cannot speak a full sentence in one breath
- Needing reliever again within 3 hours
- Tugging in of skin between ribs or at base of neck
- May have a cough or wheeze
- Lethargic
- Sore tummy (young children)

Call Ambulance on 000

### LIFE-THREATENING

- Gasping for breath
- Unable to speak or 1-2 words per breath
- Not responding to reliever medication
- May no longer have a cough or wheeze
- Drowsy / confused / exhausted
- Collapsed / unconscious
- Skin Discoloration (blue lips)

Call Ambulance on 000

## Diabetes

Lake Boga Primary School OSHC is committed to embedding strategies to ensure the health and safety of all persons with Type 1 and Type 2 Diabetes involved in the service, including responding to hypoglycaemia and hyperglycaemia.

**Type 1 Diabetes** is an autoimmune condition that occurs when the immune system damages the insulin-producing cells in the pancreas. Type 1 Diabetes occurs due to a severe deficiency of insulin. Insulin is a hormone that controls blood glucose levels (BGLs). Signs and symptoms of diabetes include lethargy, weight loss, increased urination and excessive thirst. Without insulin the disease progresses to a life-threatening condition marked by dehydration, high blood glucose levels and build-up of acids (ketones) in the blood (ketoacidosis). Treatment for Type 1 Diabetes involves insulin injections, blood glucose monitoring and food management.

**Type 2 Diabetes** occurs when either insulin is not working effectively or the pancreas does not produce sufficient insulin (or a combination of both). Usually emerging during adulthood, Type 2 Diabetes is associated with the following risk factors: being overweight, inactivity and a genetic predisposition. However, Type 2 Diabetes affects some children, in particular children with identified risk factors that are compounded by disadvantaged socioeconomic conditions and/or other medical conditions.

The **Nominated Supervisor** is responsible for:

- Developing a risk minimisation plan in consultation with the child's parents/guardians and in alignment with the child's medical management plan provided by the child's medical practitioner
- Participating in any relevant information or training sessions required if a person with Type 1 or 2 Diabetes becomes involved with the service
- Discussing these guidelines with the parents/guardians or children with Diabetes
- Regularly review the children's medication and hypo-kits to ensure they are complete and nothing has expired
- Creating a safe environment for the child
- Aiding with the recognition of the signs and symptoms and the appropriate treatment of hypoglycaemia (low blood sugar) and hyperglycaemia (high blood sugar)
- Ensuring adequate supervision of and ability to perform blood glucose testing if required
- Assisting in the administering of medications and/or insulin injections (in alignment with administration of medication policy)
- Advocating and positively supporting healthy dietary behaviour
- Ensuring physically active play is available and encouraged in OSHC program

**Parents/Guardians** are responsible for:

- Reading and being familiar with the guidelines set out in the medical conditions policy

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- Liaising with the Nominated Supervisor in regards to their child's diabetes and any concerns they may have whilst the child is in care
- Bringing relevant issues to the attention of the Nominated Supervisor and educators of the service
- Maintaining a food plan and hypo kit for the service, which includes additional carbohydrates

At present Lake Boga Primary School OSHC has no students, staff or volunteers participating whom have Type 1 or 2 Diabetes. If this shall arise this Policy and all practices regarding Diabetes within our service will be reviewed accordingly.

### **Notification of changes to the Medical Conditions Policy**

Parents of children enrolled at the service must be notified at least 14days before making any change to the medical conditions policy if the change may have a significant impact on the services provision of education and care to any child enrolled at the service, or the family's ability to utilise the service (Regulation 172).

If the notice period would pose a risk to the safety, health or wellbeing of any child enrolled in the service, the parents of the child must be notified as soon as practicable after making a change to a relevant policy.