



ILLNESS & MEDICAL: DEALING WITH MEDICAL CONDITIONS

PURPOSE

This policy provides clear guidelines for supporting and managing children with medical conditions at Essential Early Learning. We are committed to ensuring that children with medical conditions can participate safely and fully in all aspects of the service's programs while their health and wellbeing are protected.

Our service will:

- Provide a safe and inclusive environment for children with medical conditions
 - Implement effective medical management plans for all children with diagnosed medical conditions
 - Ensure all educators and staff are trained to respond to medical emergencies
 - Work in partnership with families and health professionals
 - Store and administer medication safely and according to prescribed instructions
 - Maintain confidentiality and respect for each child's privacy
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SCOPE

This policy applies to:

- All children enrolled at the service who have diagnosed medical conditions
- The approved provider, nominated supervisor, educators and staff
- Students on placement and volunteers
- Families and parents/guardians
- All situations at the service involving children with medical conditions

Medical Conditions Covered:

This policy addresses (but is not limited to) the following medical conditions:

- Anaphylaxis (severe allergies)
 - Asthma
 - Diabetes
 - Epilepsy
 - Cardiac conditions
 - Other ongoing medical conditions requiring management
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LEGISLATIVE REQUIREMENTS

This policy is based on the following legislation and standards:

Education and Care Services National Law Act 2010

- Section 167: Protection from harm and hazards
- Section 169: Offence relating to required programs

Education and Care Services National Regulations 2011

- Regulation 85: Incident, injury, trauma and illness policies and procedures
- Regulation 90: Medical conditions policy
- Regulation 91: Medical conditions policy to be provided to parents
- Regulation 92: Medication record
- Regulation 93: Administration of medication



- Regulation 94: Exception to authorisation requirement - anaphylaxis or asthma emergency
- Regulation 95: Procedure for administration of medication
- Regulation 96: Self-administration of medication
- Regulation 136: First aid qualifications
- Regulation 168: Education and care service must have policies and procedures

National Quality Standard

- Quality Area 2: Children's Health and Safety
- Element 2.1.1: Each child's wellbeing and comfort is provided for
- Element 2.1.2: Every reasonable precaution is taken to protect children from harm and hazard
- Element 2.1.4: Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines
- Quality Area 6: Collaborative Partnerships with Families and Communities

NSW-Specific Legislation:

- Work Health and Safety Act 2011 (NSW)
- Poisons and Therapeutic Goods Act 1966 (NSW)
- Public Health Act 2010 (NSW)
- Privacy Act 1988
- Disability Discrimination Act 1992

KEY DEFINITIONS

Medical Condition: Any health condition requiring specific health support, ongoing medical care, or emergency treatment.

Medical Management Plan: A written plan developed by a child's medical practitioner that provides specific information about the medical condition, treatment requirements, and emergency response procedures. Also known as an Action Plan or Care Plan.

Risk Minimisation Plan: A plan developed by the service in consultation with families to identify and minimize risks associated with a child's medical condition at the service.

Communication Plan: A plan outlining how information about a child's medical condition and management will be shared between the service, families, and relevant stakeholders.

Anaphylaxis: A severe, potentially life-threatening allergic reaction that requires immediate emergency treatment with an adrenaline auto-injector (e.g., EpiPen, Anapen).

Asthma: A chronic lung condition where airways become inflamed and narrow, making breathing difficult. Can be managed with preventive and reliever medications.

Diabetes: A condition affecting blood glucose (sugar) levels. Types include Type 1 diabetes (requires insulin) and Type 2 diabetes.

Epilepsy: A neurological condition characterized by recurrent seizures. Requires specific emergency response procedures.

POLICY STATEMENT

1. Enrolment and Assessment

Information Collection:

On enrolment, families must provide:



- Complete information about any diagnosed medical conditions
- A current Medical Management Plan (Action Plan) from the child's medical practitioner
- Written authorization to administer prescribed medication
- Current prescribed medication in original packaging with pharmacy label
- Emergency contact details
- Details of the child's medical practitioner
- Any specific care requirements or triggers for their condition

Risk Assessment:

Before a child with a medical condition begins attending the service, the nominated supervisor will:

- Conduct a risk assessment in consultation with the child's family
- Develop a Risk Minimisation Plan
- Develop a Communication Plan
- Ensure all relevant educators and staff are briefed
- Confirm all necessary medication and equipment is available
- Arrange any additional training required for staff

2. Medical Management Plans

Requirements:

A Medical Management Plan (Action Plan) must:

- Be completed and signed by the child's medical practitioner
- Be current and reviewed at least annually or more frequently if required
- Include the child's name and photograph
- Detail the medical condition
- Provide clear instructions for regular medication (if required)
- Provide clear instructions for emergency treatment
- Identify symptoms or signs requiring emergency response
- Include family and emergency contact details
- Be signed by the parent/guardian

Storage and Access:

- Medical Management Plans will be displayed in the child's room (with family consent)
- Copies will be kept with emergency medication
- Copies will be included in emergency evacuation kits
- All educators working with the child will have immediate access to the plan
- Plans will be taken on excursions

Review:

Medical Management Plans will be reviewed:

- At least annually
- Whenever the child's medical condition, treatment or medication changes
- After any medical emergency or incident
- If there are concerns about the plan's effectiveness

3. Risk Minimisation and Communication Plans

Risk Minimisation Plan:

The Risk Minimisation Plan will be developed in consultation with families and will include:

- Identification of potential triggers or risk factors at the service



- Strategies to minimize exposure to triggers
- Safe storage and accessibility of emergency medication
- Emergency response procedures
- Supervision requirements during high-risk activities
- Procedures for excursions and special events
- Specific considerations for the service environment

Communication Plan:

The Communication Plan will outline:

- How information about the child's condition will be shared with relevant educators and staff
- How families will be kept informed about their child's health at the service
- What information will be shared with other families (with consent)
- Communication protocols during emergencies
- How information will be communicated to relief staff and students
- Privacy and confidentiality considerations

4. Medication Management

Medication Requirements:

All medication must:

- Be in original packaging with pharmacy label
- Have the child's name on the label
- Be within expiry date
- Be provided by the parent/guardian (not the service)
- Have written authorization from the parent/guardian for administration
- Match the instructions on the Medical Management Plan

Medication Storage:

- Emergency medication (EpiPens, asthma relievers) will be stored in an easily accessible location known to all staff
- Emergency medication will be inaccessible to children but immediately available to educators
- Non-emergency medication will be stored in a locked cabinet
- Medication requiring refrigeration will be stored in a designated, labeled container in the refrigerator
- A medication register will be maintained
- Expiry dates will be checked regularly

Medication Administration:

When administering medication, educators will:

- Check the child's identity
- Check the medication label matches the child's name and Medical Management Plan
- Check the medication is within expiry date
- Administer the correct dosage as per instructions
- Have another educator witness the administration (if available)
- Record administration immediately in the medication record
- Inform the parent/guardian at pick-up
- Monitor the child for any adverse reactions

Emergency Medication Exception:

In accordance with Regulation 94, in an emergency (anaphylaxis or asthma):



- Educators may administer emergency medication without prior authorization if a child is displaying signs of anaphylaxis or severe asthma and no individual plan is in place
- Emergency services (000) must be called immediately
- Parents must be notified immediately
- Administration must be recorded

5. Staff Training and Competency

Required Training:

All educators and staff will:

- Hold current approved first aid qualifications including anaphylaxis and asthma management
- Be trained in the implementation of this policy
- Receive specific training on Medical Management Plans for children in their care
- Know how to recognize symptoms of medical emergencies
- Know how to administer emergency medication
- Practice emergency response procedures

Specific Training:

Educators working directly with children with specific medical conditions will receive training in:

- Understanding the specific medical condition
- Recognizing symptoms and triggers
- Following the Medical Management Plan
- Administering specific medications and equipment
- Emergency response procedures
- Risk minimisation strategies

Training Records:

- The service will maintain records of all staff training related to medical conditions
- Training will be updated regularly and refreshed annually
- New staff will receive briefing and training before working with children with medical conditions

6. Management of Specific Medical Conditions

Anaphylaxis (Severe Allergies):

- Children at risk of anaphylaxis must have an ASCIA Action Plan for Anaphylaxis
- Adrenaline auto-injector (EpiPen or Anapen) must be provided by family and stored correctly
- Known allergens will be minimized or excluded from the service environment
- All food provided will be checked for allergens
- Signs of anaphylaxis include: difficulty breathing, swelling of tongue/throat, persistent cough, wheeze, pale/floppy, abdominal pain, vomiting
- Emergency response: Lay child flat, administer adrenaline auto-injector, call 000, call family
- The service will maintain a general-use adrenaline auto-injector for emergency use

Asthma:

- Children with asthma must have an Asthma Australia Asthma Action Plan
- Reliever medication (usually blue puffer) and spacer must be provided by family
- Preventer medication (if required) will be administered as per the plan
- Asthma triggers will be minimized (dust, smoke, strong smells, exercise)
- Signs of asthma attack include: difficulty breathing, wheezing, tight chest, persistent cough
- Emergency response: Sit upright, give 4 puffs of reliever via spacer (one puff at a time), wait 4 minutes, if no improvement give 4 more puffs, if still no improvement call 000



- The service will maintain a reliever puffer and spacer for emergency use

Diabetes:

- Children with diabetes must have a Diabetes Management Plan from their endocrinologist
- Blood glucose monitoring equipment and supplies must be provided
- Insulin (if required) and delivery device must be provided and stored appropriately
- Hypo (low blood sugar) treatment supplies must be readily available
- Meal and snack times must be consistent
- Physical activity must be monitored
- Signs of hypoglycemia: pale, sweaty, shaky, confused, weak, aggressive behavior
- Emergency response for hypo: Give rapid-acting glucose (jelly beans, juice), follow with longer-acting carbohydrate, call family, call 000 if unconscious

Epilepsy:

- Children with epilepsy must have an Epilepsy Management Plan from their neurologist
- Emergency medication (if prescribed) must be provided
- Seizure triggers will be minimized where possible
- Regular medication (if required) will be administered as per the plan
- During a seizure: Protect from injury, time the seizure, place on side when possible, stay with child, do NOT restrain or put anything in mouth
- Call 000 if: Seizure lasts more than 5 minutes, multiple seizures, injury occurs, first seizure, breathing difficulties

7. Emergency Response Procedures

When a Medical Emergency Occurs:

- Follow the child's Medical Management Plan immediately
- Call another educator for assistance
- Administer emergency medication if required
- Call 000 if required by the plan or if condition is not improving
- Contact parents/guardians immediately
- Continue to monitor and provide care
- Take Medical Management Plan to hospital (if ambulance is called)
- An educator will accompany the child in the ambulance if parents have not arrived
- Complete an incident report
- Notify the Regulatory Authority within 24 hours (if a serious incident)
- Debrief with staff and review procedures

When to Call 000:

Call 000 immediately if:

- Signs of anaphylaxis
- Severe asthma attack not responding to medication
- Seizure lasting more than 5 minutes or multiple seizures
- Child is unconscious
- Difficulty breathing
- As directed by the Medical Management Plan
- Any other life-threatening situation

8. Excursions and Special Events

When children with medical conditions attend excursions:

- A risk assessment specific to the child's medical condition will be conducted



- The Medical Management Plan will be taken on the excursion
- All required medication will be taken
- At least one educator trained in the child's condition will attend
- Mobile phone will be carried
- Proximity to medical facilities will be considered
- Family will be notified of excursion details

Educator and staff responsibilities

Nominated Supervisor/Person in Day-to-Day Charge:

- Ensure all staff understand and follow this policy
- Coordinate development of Medical Management Plans, Risk Minimisation Plans, and Communication Plans
- Ensure all required documentation is current
- Ensure all staff are trained in relevant medical conditions
- Monitor medication storage and expiry dates
- Communicate with families about their child's medical needs
- Review and update plans regularly
- Coordinate emergency responses

All Educators and Staff:

- Be familiar with Medical Management Plans for children in their care
- Know how to recognize symptoms of medical emergencies
- Know the location of emergency medication and equipment
- Follow risk minimisation strategies
- Administer medication correctly and document administration
- Monitor children with medical conditions
- Respond appropriately to medical emergencies
- Communicate with families
- Maintain confidentiality
- Participate in training and practice drills

Family responsibilities

Families are responsible for:

- Informing the service about their child's medical condition on enrolment
- Providing a current Medical Management Plan (Action Plan) from their child's medical practitioner
- Providing all required medication in original packaging with pharmacy labels
- Ensuring medication is within expiry date and replacing expired medication
- Providing written authorization for medication administration
- Updating the service immediately of any changes to their child's condition or treatment
- Updating the Medical Management Plan annually or as required
- Participating in the development of Risk Minimisation and Communication Plans
- Ensuring emergency contact details are current
- Being contactable during service hours
- Communicating openly with educators about their child's health

RELATED POLICIES AND PROCEDURES

- Administration of Medication Policy
- Administration of First Aid Policy



- Incident, Injury, Trauma and Illness Policy
 - Emergency and Evacuation Policy
 - Anaphylaxis Management Policy
 - Asthma Management Policy
 - Enrolment and Orientation Policy
 - Excursion Policy
 - Inclusion and Equity Policy
 - Privacy and Confidentiality Policy
 - Supervision of Children Policy
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REFERENCES AND RESOURCES

- ACECQA: Guide to the National Quality Framework
 - Education and Care Services National Law Act 2010
 - Education and Care Services National Regulations 2011
 - National Quality Standard
 - Australian Children's Education and Care Quality Authority (ACECQA) website: www.acecqa.gov.au
 - Allergy & Anaphylaxis Australia: www.allergyfacts.org.au
 - ASCIA (Australasian Society of Clinical Immunology and Allergy): www.allergy.org.au
 - ASCIA Action Plans for Anaphylaxis
 - Asthma Australia: www.asthmaaustralia.org.au
 - Asthma Australia Asthma Action Plans
 - Diabetes Australia: www.diabetesaustralia.com.au
 - Diabetes NSW & ACT: www.diabetesnsw.com.au
 - Epilepsy Action Australia: www.epilepsy.org.au
 - NSW Health: www.health.nsw.gov.au
 - Safe Work Australia: Managing the risk of anaphylaxis in the workplace
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POLICY REVIEW

This policy will be reviewed every two years or more frequently if required due to:

- Legislative changes
- Changes in best practice or medical guidelines
- Following a medical emergency
- Feedback from families, educators or staff
- Following regulatory assessment and rating
- Updates from medical organizations (ASCIA, Asthma Australia, etc.)
- Changes to medication or treatment protocols

Date policy was last reviewed: 07/01/26

Date for next review: 07/01/28

Reviewed by: Director and Staff