Playford
Primary School
excellence & empowerment

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DEALING WITH MEDICAL CONDITIONS IN CHILDREN POLICY

To support children's wellbeing and manage specific healthcare needs, allergy or relevant medical condition our OSHC Service will work in accordance with the Education and Care Services National Regulations to ensure health related policies and procedures are implemented. We aim to take every reasonable precaution to protect children's health and safety by explicitly adhering to individual medical management and risk management plans and responding to any emergency situation should they arise.

PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure services have policies and procedures in place for medical conditions. We aim to efficiently respond to and manage medical conditions, health care needs or allergies of children and staff ensuring the safety and wellbeing of all children, staff, families and visitors at our OSHC Service.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor, students, volunteers and visitors of the OSHC Service.

DUTY OF CARE

Our OSHC Service has a legal responsibility to take reasonable steps to ensure the health needs of children enrolled in the service are met. This includes our responsibility to provide:

a. a safe environment for children free of foreseeable harm and
b. adequate supervision of children at all times.

PRINCIPLES

- All staff are informed of any child diagnosed with a medical condition or specific health care need and the risk minimisation procedures in place.
- All staff are informed where medication is stored and/ or any specific dietary restrictions relating to their health care need or medical condition.
- All children with diagnosed medical conditions have a current risk minimisation plan and communication plan that is accessible to all staff.
- Staff are trained in the administration of emergency medication.
- Families can expect that educators will act in the best interests of the children in their care at all times and meet the children's individual health care needs.
- We will partner with families of children with diagnosed conditions to develop a risk minimisation plan to ensure the risks relating to the child's specific health care need or relevant medical condition are assessed and minimised. In conjunction with the risk minimisation plan, a communication plan will be developed setting out how communication occurs if there are any changes to the medical management plan or risk management plan for the child. The communication plan ensures all staff are informed of the child's medical condition and relevant documentation.

KEY TERMS

ACECQA – Australian Children's Education and Care Quality Authority
The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children. Source: acecqa.gov.au
Approved anaphylaxis management training
Anaphylaxis management training approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website. Source: National Regulations
Approved first aid qualifications
A qualification that includes training in the matters set out below, that relates to and is appropriate to children and has been approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website. Matters are likely to include: Emergency life support and cardio-pulmonary resuscitation; convulsions; poisoning; respiratory difficulties; management of severe bleeding; injury and basic wound care; and administration of an autoimmune adrenalin device. Source: National Regulations
Communication plan
A plan that forms part of the policy and outlines how the service will communicate with families and staff in relation to the policy. The communication plan also describes how families and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of any medical condition such as anaphylaxis is enrolled at the service.
Medication
Medicine within the meaning of the Therapeutic Goods Act 1989 of the Commonwealth. Medicine includes prescription, over-the-counter and complementary medicines. All therapeutic goods in Australia are listed on the Australian Register of Therapeutic Goods, available on the Therapeutic Goods Administration website (htga.gov.au) Source: National Regulations
Medical condition
This may be described as a condition that has been diagnosed by a registered medical practitioner. Source: Guide to the NQF
Medical management plan
A document that has been prepared and signed by a registered medical practitioner that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition, and includes the child's name.
Risk minimisation plan
A document prepared by service staff for a child, in consultation with the child's parents, setting out means of managing and minimising risks relating to the child's specific health care need, allergy or other relevant medical condition. Source: Guide to the NQF

THE RESPONSIBLE PERSON/MANAGEMENT WILL ENSURE:

- obligations under the Education and Care Services National Law and National Regulations are met
- all educators, staff, students and volunteers have knowledge of and adhere to this policy
- all enrolment forms are reviewed to identify any specific health care need, allergy or medical condition
- a child is not enrolled at, nor will attend the OSHC Service without a medical management plan and prescribed medication by their medical practitioner. In particular, medication for life-threatening conditions such as asthma, anaphylaxis or diabetes must be provided to the service and stored in the OSHC Office [e.g., asthma inhalers, adrenaline auto injection devices or insulin]
- all medication provided to the OSHC Service, including over the counter medication that forms part of the child's medical management plan, must be clearly labelled with the child's name and prescribed dosage
- educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical condition that may be ongoing or acute/short term in nature
- new staff members are given a clear understanding of children's individual health care needs during their induction period.
- a communication plan is developed in collaboration with the Responsible Person to ensure communication between families and educators is on-going and effective
- communication regarding children's health requirements is delivered to families in a culturally sensitive and respectful manner
- at least one staff member or nominated supervisor is in attendance at all times and is available immediately in an emergency with a current accredited first aid certificate, emergency asthma management and emergency anaphylaxis management certificate (as approved by ACECQA)
- educators and staff have a clear understanding about their role and responsibilities when caring for children with a diagnosed health care need, allergy or relevant medical condition
- families provide required information on their child's health care need, allergy or relevant medical condition, including:
    * medication requirements
    * allergies
    * medical practitioner's contact details
    * medical management plan
- a medical management plan has been developed in consultation with parents and the child's medical practitioner and provided to the OSHC Service and/or
    * an individual Asthma or Anaphylaxis Action Plan is developed in consultation with parents and the child's medical practitioner e.g.: (ASCIA) or National Asthma Council of Australia
    * an individual Diabetes Management Plan is developed in consultation with parents and the child's medical practitioner
- a risk minimisation plan and communication plan has been developed in consultation with parents and management prior to the child commencing at the OSHC Service
- educators and staff will be informed immediately about any changes to a child's medical management plan, risk management plan
- to store any prescribed health information and retain copies of medical management plan, anaphylaxis management plan or asthma management plan, consent to display information, communication plan and risk minimisation plan in the child's individual medical folder or the Playford OSHC Medical Folder which is stored in the locked cupboard in the OSHC Office
- educators have access to emergency contact information for the child
- risk minimisation plans and communication plans for individual children are accessible to all staff

- procedures are adhered to regarding the storage and administration of medication at all times
- educators are informed of specific medication requirements for children with medical management plans, including where medication is stored and/or any specific dietary requirements
- administration of medication record is accurately completed and signed by the administering educator and a secondary educator who witnessed the administration of medication
- medication self-administered by a child over preschool aged, is only permitted with written authority signed by the child's parent or other responsible person named and authorised in the child's enrolment record to make decisions about the administration of medication
- a notice is displayed prominently in the main entrance of the Service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service and providing details of the allergen/s (Reg. 173).
- information regarding the health and wellbeing of a child or staff member is not shared with others unless consent is provided in writing, or provided the disclosure is required or authorised by law under relevant state/territory legislation

EDUCATORS WILL:

- follow this policy and any associated medical policies and procedures
- inform the Responsible Person of communication from families that may impact changes and updates to the individual medical management plan
- notify the Responsible Person of any issues implementing this policy or procedure
- ensure medication is stored and administered in accordance with the Administration of Medication Policy and Procedure, including ensuring 2 educators are present during the administration of medication
- follow medical management plans at all times, including in the event of a medical emergency
- closely monitor children and ensure any symptoms or signs of illness are responded to immediately, including notifying the Responsible Person so they are able to contact the families as soon as possible
- participate in the review of risk assessments and implement changes as required
- ensure medication and medical management plans are taken on all excursions and during emergency evacuations
- maintain current accredited first aid qualification, emergency asthma management and emergency anaphylaxis management training (as required)
- undertake specific training as required for individual medical conditions.

FOLLOWING AN INCIDENT-EDUCATORS WILL ENSURE:

- in the event that a high-risk scenario where a child suffers from a reaction, incident, situation, or event related to a medical condition the OSHC Service and staff will follow the child's emergency medical management plan as per Reg. 90(1)(c)(ii)
- the first aid responder will commence first aid measures immediately as per the child's medical management plan, Incident, Injury, Trauma and Illness policy and Administration of First Aid Policy
- urgent medical attention from a registered medical practitioner is contacted if required
- an ambulance is called by dialling 000 if the child does not respond to initial treatment
- the Responsible Person will contact the child's parent/guardian or emergency contact when practicable, but as soon as possible
- the Responsible Person will ensure the Incident, Injury, Trauma and Illness Record is completed in its entirety
- the Responsible Person will notify the regulatory authority (within 24 hours) in the event of a serious incident (Reg. 12)

- the Responsible Person will conduct a review of practices following a medical emergency at the OSHC Service, including an assessment of areas for improvement.

MANAGEMENT OF ASTHMA, ANAPHYLAXIS AND DIABETES

For the management of Asthma, Anaphylaxis and Diabetes see individual Service policies and procedures which include procedures to follow on the administration medication following an anaphylaxis or asthma emergency.

FOOD HANDLERS:

As per the services Nutrition and Food Safety Policy food handlers will ensure:

- to keep up to date with professional training to help manage food allergies
- practices and procedures are in place, and adhered to, in relation to safe food handling, preparation and consumption of food
- any changes to children's medical management plans or risk minimisation plans are implemented immediately.

FAMILIES WILL ENSURE:

- the OSHC Service enrolment form is completed in its entirety providing specific details about the child's medical condition during the enrolment process
- they provide management with information about their child's health needs, allergies, medical conditions, and medication requirements on the enrolment form and through verbal communication/meetings
- they provide the OSHC Service with a Medication Agreement for Education and Care Form (HSP151) prior to enrolment of their child, and
    * an individual Asthma or Anaphylaxis Action Plan
    * an individual Diabetes Management Plan
- they consult with management to develop a risk minimisation plan
- they communicate with the Responsible person of any changes to medications and medical conditions. Changes will be noted on the Medical Communication Plan within the individual's medical folder. Risk Minimisation Plans will be updated as required to reflect any changes.
- they provide adequate supplies of the required medication and are aware that children are not able to be on site if medication has expired and families have not provided replacement medications within the timeframe requested.
- Controlled medications must be signed in and out by families and must only kept on premises for the required times of administration. If medications are required for Vacation care they are to be delivered to the service and signed in the week prior to Vacation Care.
- notify the OSHC Service, verbally when children are taking any short-term medications AND whether or not these medications may be self-administered (only applicable for a child over preschool age)

SELF-ADMINISTRATION OF MEDICATION

A child over preschool age may self-administer medication under the following circumstances:

* a parent or guardian provides written authorisation with consent on the child's enrolment form - administration of medication
* medication is stored safely by an educator, who will provide it to the child when required
* supervision is provided by an educator whilst the child is self-administering medication
* an accurate record is made in the medication record for the child that the medication has been self-administered.

MEDICATION AGREEMENT FOR EDUCATION AND CARE (HSP151) AND ADDITIONAL INFORMATION REQUIRED

- The Medication Agreement for Education and Care Form must be completed and reviewed on an annual basis.
- Any medical management plan for anaphylaxis, diabetes and asthma provided by a registered medical practitioner should include the following:
    * specific details of the diagnosed health relevant medication condition
    * supporting documentation (if required)
    * if relevant, state what triggers the allergy or medical condition
    * first aid/emergency response that may be required
    * any medication that may be required to be administered in case of an emergency
    * further treatment or response if the child does not respond to the initial treatment
    * when to contact an ambulance for assistance
    * contact details of the medical practitioner who signed the plan
    * the date of when the plan should be reviewed
- the OSHC Service must ensure the Medication Agreement and Medical Management Plan remains current all times
- educators and staff are updated immediately about any changes to a child's medical management via the Individual Medical Communication Plans.

RISK MINIMISATION PLAN

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation plan in place. (Reg. 90(1)(c)). The Responsible Person will arrange a meeting with the parents/guardian as soon as the OSHC Service has been advised of the diagnosed health care need, allergy or medical condition. During this meeting a risk minimisation plan will be developed in consultation with the parent/guardian to ensure:

- that the risks relating to the child's specific health care need, allergy, or medical condition are assessed and minimised
- that practices and procedures in relation to the safe handling, preparation, serving, and consumption of food are developed and implemented
- that the parents/families are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented
- practices are developed and implemented to ensure that all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication
- that the child does not attend the Service without medication prescribed by the child's medical practitioner in relation to the child's specific health need, allergy or medical condition
- risk minimisation plan(s) are reviewed and/or revised with each change in the medical management plan in conjunction with parents/guardians
- all relevant information pertaining to the child's health and medical condition is communicated to parents at the end of each day by educators
- parents are notified by educators in advance of any special activities taking place such as celebrations, sporting events or excursions so plans of safe inclusion can be developed
- appropriate hygiene practices are followed by educators when managing medical conditions In accordance with the *Dealing with Infectious Diseases Policy*.

COMMUNICATION PLAN

The communication plan explains how relevant staff members and volunteers are informed about the medical management and risk management plans and how the parent of the child can communicate any changes to the diagnosed health care need, allergy or medical condition.

A communication plan will be created after the meeting with the parents/guardian to ensure:

- all relevant staff members, students and volunteers are informed about the Medical Conditions Policy, the medical management plan and risk minimisation plan for the child; and
- they communicate with the Responsible person of any changes to medications and medical conditions. Changes will be noted on the Medical Communication Plan within the individual's medical folder. Risk Minimisation Plans will be updated as required to reflect any changes. At all times, families who have a child attending the OSHC Service who have a diagnosed healthcare need, allergy or medical condition will be provided with a copy of this policy and other relevant policies specific to their child's health management and communication plans.

AUDIT

A medication audit is to be conducted at the end of the week to ensure that all medications are accounted for, not expired and all relevant medical documents are within date.

SOURCES

Australian Children's Education & Care Quality Authority. (2025). https://www.acecqa.gov.au/sites/default/files/2025-01/Guide-to-the-NQF-250101.pdf
Australian Children's Education & Care Quality Authority (ACECQA). 2021. Policy and Procedure Guidelines. https://www.acecqa.gov.au/sites/default/files/2021-08/DealingMedicalConditionsChildrenGuidelines.pdf
Australian society of clinical immunology and allergy. ASCIA. https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis
Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care Services National Regulations Education and Care Services National Regulations. (Amended 2023).
Federal Register of Legislation Privacy Act 1988.
Australian Children's Education & Care Quality Authority. (2025). https://www.acecqa.gov.au/sites/default/files/2025-01/Guide-to-the-NQF-250101.pdf
Australian Children's Education & Care Quality Authority (ACECQA). 2021. Policy and Procedure Guidelines. Dealing with Medicals in Children Policy
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Early Childhood Australia Code of Ethics. (2016).
Education and Care Services National Law Act 2010. (Amended 2023).
Education and Care National Regulations
Federal Register of Legislation Privacy Act 1988.
National Health and Medical Research Council. (2024). Staying Healthy: preventing infectious diseases in early childhood education and care services (6th Ed) NHMRC. Canberra. Occupational Health and Safety Act 2004.
Work Health and Safety Act 2012 (SA)

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
Section 2A	Paramount Consideration – Safety, Rights and best interests of children
Section 165	Offence to inadequately supervise children
Section 167	Offence relating to protection of children from harm and hazards
Section 172	Failure to display prescribed information
Section 174	Offence to fail to notify certain circumstances to Regulatory Authority
Regulation 12	Meaning of a serious incident
Regulation 85	Incident, injury, trauma and illness policies and procedures
Regulation 86	Notification to parents of incident, injury, trauma or illness
Regulation 87	Incident, injury, trauma and illness record
Regulation 89	First aid kits
Regulation 90	Medical Conditions Policy
Regulation 90(1)(iv)	Medical Conditions Communication Plan
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 162C and D	Health Information to be kept in enrolment record (c) Details of any – (i) specific healthcare needs of the child, including any medical condition; and (ii) allergies, including whether the child has been diagnosed as at risk of anaphylaxis (d) any medical management plan, anaphylaxis medical management plan or risk minimisation plan to be followed with respect to a specific healthcare need, medical condition or allergy referred to in paragraph (c).
Regulation 168	Education and care service must have policies and procedures
Regulation 170	Policies and procedures are to be followed
Regulation 171	Policies and Procedures are to be kept available
Regulation 172	Notification of change to policies and procedures
Regulation 173(2)(f)	Prescribed information to be displayed For the purpose of section 172 (f) of the Law, the following matter and information are prescribed – (f) if applicable (i) in the case of a centre-based service, a notice stating that a child who has been diagnosed as at the risk of anaphylaxis is enrolled at the service
Regulation 175	Prescribed information to be notified to Regulatory Authority

REVIEW

POLICY REVIEWED BY	Jason Sheehy	Position	Principal
POLICY REVIEW DATE	01/10/2026	NEXT REVIEW DATE	01/10/2027
VERSION	V2026.10		
MODIFICATIONS		POLICY CREATED	01/10/2026
	• Created replacing Managing Medical Conditions Policy		