

## the Y Ballarat – Medical Conditions Policy

Policy Number	Date Approved	Date Last Amended	Status
CP015	01/07/2020		FINAL

### 1. PURPOSE

The Y Ballarat Children's Services must ensure that each child's health needs are actively supported, including when diagnosed with a medical condition. This may include but is not limited to allergies, anaphylaxis, diabetes, or asthma. This policy ensures compliance with under the Education and Care Services National Regulations and actively supports a child and their family through vigilant collaboration when a medical condition must be positively catered for to support a child's safe experience within any Y Ballarat service

### 2. SCOPE

The scope of this Policy applies to all Board members, Sub Committee members, staff and volunteers. This policy applies to The Young Men's Christian Association of Ballarat Inc and related entities and the Ballarat YMCA Youth Services. For the purposes of this document we refer to these as the YMCA. All Procedures must conform to this Policy.

### 3. POLICY

Upon enrolment, it is the responsibility of the child's parents or nominated guardian to ensure children who attend the service with a medical condition fully disclose this information on the enrolment form and throughout the enrolment process.

When a diagnosed medical condition is disclosed, it is the responsibility of the nominated supervisor to ensure the following.

- All staff (including relief staff and volunteers) are familiar with all children diagnosed with medical conditions.
- A medical management plan is provided by the parent or guardian upon enrolment or before first attending the service for all children with a specific health care need, allergy or relevant medical condition that requires a medical management plan.
- Children who require a medical management plan will not be able to stay at the service if the plan is not available or is out of date (more than 12 months old).
- Color photo identification of the child is provided with the medical management plan to assist staff in identifying the child.
- A minimum of three copies of the plan for each medical condition; one located with the child's enrolment form information, one with any medication required and one to be displayed for Educators, considering the child's privacy.
- 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.

- Where relevant, develop and implement local safe work practices to ensure 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 care need or medical condition
- Develop a communication plan to ensure that relevant staff members and volunteers are informed about the medical conditions policy and the medical management plan and risk minimisation plan for the child
- Food that has been prepared for individual children due to dietary restrictions is prepared under current food health and safety regulations. This food will be cooked and served individually and where necessary, clearly labelled with the child's name (most often in the case of Early Learning)

### **Risk Minimisation Plans**

In the case of Risk Minimisation Plans for any medical condition, it is the responsibility of the nominated supervisor to ensure they;

- include communication plans developed by the service in consultation with the parent or guardian for those children diagnosed;
- assess and minimise any risks relating to the child's specific health care need or medical condition;
- where relevant, ensure practices and procedures in relation to the safe handling, preparation, consumption and service of food are developed and implemented;
- identify and develop in consultation with the family, any safe work practices, procedures or strategies that can be implemented to minimise any risk of an incident occurring;
- ensure all staff members and volunteers can identify the child, the child's medical management plan, risk minimisation plan and the location of the child's medication;
- facilitate communication with the parents or guardian, so they can communicate any changes to the medical management plan and risk minimisation plan for the child, setting out how that communication can occur;
- in the case of Anaphylaxis, the risk minimisation plan must include safe practices for food handling, preparation, food consumption, food sharing practices, hand washing and equipment cleaning, communication to parents regarding known allergies that pose a risk to the child, and strategies for minimisation and management of known risk;
- ensure all precautions are taken to ensure that children are safe. This involves effective communication between families and staff on which foods the child can have or has been exposed to (if applicable); and
- parents and guardians are required to inform staff of any changes to their child's restrictions and provide an updated anaphylaxis or other management medical plan from their doctor when applicable.

### **Medical Conditions Policy to be provided to parents**

The Y Ballarat must ensure that a copy of the medical conditions policy document is provided to the parent or guardian of a child enrolled at an education and care service if the provider is aware that the child has a specific health care need, allergy or other relevant medical condition, within a timely manner.

### **Asthma**

It is the Nominated Supervisors responsibility to ensure all families with children who have been diagnosed with asthma.

- Provide the service with a current Asthma Care Plan as authorised (signed) by their general practitioner, annually.
- All asthma medication must be clearly labelled with the child's name including the child's spacer equipment (if applicable).
- Oversee the safe self-administration of their medication if over pre-school age and the required authorisations and practices are followed, in strict accordance with the Administration of Medication Policy.
- Keep a copy of the child's asthma care plan with the medication at all times. In an emergency evacuation, it will be taken by the staff to the evacuation point.
- If at any time a child does not respond to their asthma medication as per the child's individual asthma plan instructions, the emergency asthma procedure will be implemented immediately, and parents will be notified.
- In the event of the emergency asthma procedure having no immediate effect an ambulance will be called.
- All asthma and other medication are kept in a clearly labelled medication container out of children's reach.
- Medication that needs refrigeration is kept in an appropriate fridge in a clearly labelled container
- Meet all other requirements as outlined in the Y Ballarat Procedure Asthma

### **Allergy Management**

It is the responsibility of the nominated supervisor to ensure all families with children who have been diagnosed with an allergy.

- disclose on enrolment if there are any environmental or food intolerances and any allergic reaction signs and symptoms that they are aware of;
- provide the service with a current medical plan from their doctor outlining the nature of the allergy, any subsequent reaction identification information and first aid details required for an allergic reaction; and
- to inform all staff (including relief staff) of individual children's requirements, copies of individual management plans are kept with the medication, on display in an appropriate staff area, and with the child's enrolment form for staff information.

- If a child has an allergic reaction whilst at the service, staff will follow the child's individual allergy action plan and will call an ambulance if symptoms accelerate or become life threatening.

### **Anaphylaxis Management**

Anaphylaxis is the most serious form of allergic reaction and can be fatal. The nominated supervisor will ensure.

- All educators and staff have undertaken anaphylaxis management training approved by the Australian Children's Education and Care Quality Authority.
- All educators and staff (including relief staff) are informed of any children at risk from anaphylaxis. Photographic identification may be provided to enable clear identification of children at risk of anaphylaxis.
- The anaphylaxis management plans are kept on display in an appropriate staff area, with the child's medication and with the child's enrolment form for staff information.
- Each child's individual Epipen or other auto-injection device kit and anaphylaxis management plan is located within the program area and is taken with the first aid kit on excursions and during emergency evacuation practices.
- Parents supply a current Epipen or other auto-injection device for each session. Where possible it remains at the service at all times the child is at the service. Parents are required to monitor the expiry date of the child's Epipen or another auto-injection device and replace it prior to expiry.
- Children diagnosed at risk of anaphylaxis will not be able to stay at the service if the Epipen or other auto-injection device is not available or is out of date.
- Meet all other requirements as outlined in the Y Ballarat Procedure Anaphylaxis

### **Diabetes**

It is the responsibility of the nominated supervisor to ensure all families with children who have been diagnosed with diabetes.

- Provide the service with a current (created no more than 12 months ago) medical plan, signed and authorised by the child's doctor. This must include any subsequent reaction, identification information and first aid details.
- When specific written authority has been provided by the parent or guardian or authorised nominee, the child may administer medication themselves. The child must do so under the requirements of the Y Ballarat Administration of Medication Policy.
- All sharps will be disposed of in a sharps container by the user of the needle or sharp and in accordance with the Y Ballarat Biohazards, Contaminants and Waste Policy.
- In an emergency, the child's diabetes management plan will be followed and if symptoms accelerate an ambulance will be called.
- Educators will undertake education and training on management, sharps disposal and any handling of medication as deemed appropriate by relevant service manager in collaboration with the child's family.

- o The education and training may be provided by the parent or guardian of the child, if deemed appropriate. Any training will be documented and signed by all attending staff members and/or management.
- o In the event no staff member is able to be present to confidently administer the insulin or other medication, arrangement will be made between the child's parents to ensure they are, or other nominated person permitted in writing, able to visit the service at an agreed time to administer the medication. This may be a community nurse or other authorised person as per the enrolment form. The administration of medication form is required to still be completed in its entirety.
- • Meet all other requirements as outlined in the Y Ballarat Procedure Diabetes

### **Epilepsy**

It is the responsibility of the nominated supervisor to ensure all families with children who have been diagnosed with epilepsy.

- Provide the service with a current (created no more than 12 months ago) medical plan, signed and authorised by the child's doctor.
- In an emergency, the child's epilepsy management plan will be followed and if symptoms accelerate an ambulance will be called.
- All epilepsy medication must be clearly labelled with the child's name including the child's spacer equipment (if applicable).
- Keep a copy of the child's epilepsy management plan with the medication at all times. In an emergency evacuation, it will be taken by the staff to the evacuation point.
- If at any time a child does not respond to their epilepsy medication as per the child's individual epilepsy plan instructions, the Emergency Medical management plan will be implemented immediately, and parents will be notified.
- In the event of the emergency epilepsy procedure having no immediate effect an ambulance will be called.
- All epilepsy and other medication are kept in a clearly labelled medication container out of children's reach.
- Educators will undertake education and training on management of epilepsy and, where appropriate, emergency management of seizures using emergency epileptic medication, as deemed appropriate by relevant service manager in collaboration with the child's family.
- The education and training may be provided by the parent or guardian of the child, if deemed appropriate. Any training will be documented and signed by all attending staff members and/or management.
- Only staff who have received child-specific training in the administration of emergency medications are permitted to administer that medication
- A list of children with epilepsy will be placed in a secure, but readily accessible, location known to all staff. This should include the Epilepsy Management Plan, seizure record and Emergency Medical Management Plan for each child with epilepsy
- Meet all other requirements as outlined in the Y Ballarat Procedure Epilepsy

All Children's Services -Administering medications as required in accordance with the procedures outlined in the Administration of Medication Policy.

Outside School Hours Care Services - Self-administration by a child over preschool age  
Providing education and care to a child over preschool age (as defined in the Education and Care Services National Regulations 2011) allows a child over preschool age to self-administer medication.

The Approved Provider must consider their duty of care when determining under what circumstances such permission would be granted:

- Written permission must be provided by the child's parent/guardian.
- Parents/guardians will provide written details of the medical information and administration protocols from the child's medical/specialist medical practitioner(s).
- The self-administration of medication or medical procedures by children over preschool age will be undertaken only under the supervision of a staff member with current approved first aid qualification.
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#### 4. ROLES AND RESPONSIBILITIES

Department/Role	Responsibility
Children's Services Manager	<p>The Children's Services Manager is responsible for the development, monitoring and review of the procedure and related systems, ensuring content meets all legislated requirements.</p> <p>Facilitate annual procedure training to Children's Services educators on the appropriate implementation and use of policy.</p>
Children's Services Team	<p>The Y Ballarat nominated supervisors and/or service management will oversee the implementation and service adherence to this policy (ie procedure compliance).</p> <p>Nominated supervisor and/or person with management and control will seek individual community feedback and facilitate an active consultation process with service users as appropriate.</p> <p>All educators will be provided with this policy annually and are responsible for the daily implementation of the procedure when directly supervising children.</p>
Managers and Directors	<p>Responsible for addressing any instance of non-compliance with this policy and implementing strategies to help prevent noncompliance with this policy.</p> <p>Responsible for implementing the processes outlined in this</p>

	<p>procedure, in accordance with this policy, as required.</p> <p>Is responsible for ensuring suitable resources and support systems to enable compliance with this policy</p> <p>Drive the consultation process and provide leadership and advice on the continuous improvement of the policy</p>
All employees, volunteers & students.	<p>Responsible for meeting the requirements outlined in this policy.</p> <p>Responsible for raising concerns or complaints in accordance with this policy</p>

## 5. DEFINITIONS

Term	Definition
Health Care Need	A health condition that includes asthma, allergy, anaphylaxis, diabetes, or other relevant medical condition, that typically requires an action plan to effectively manage the condition.
Anaphylaxis	Anaphylaxis is a rapidly progressing, life-threatening allergic reaction to a contagion, typically nuts or tree nuts.
AV How to Call Card	A card that the service has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from: <a href="http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html">http://www.ambulance.vic.gov.au/Education/Calling-Triple-0.html</a>
Diabetes	A disease in which there is usually too much sugar in the blood which needs to be regulated by the administration of insulin or other glucose regulator
Allergy	a hypersensitive state acquired through exposure to an allergen, re exposure bringing to light an altered capacity to react.
Asthma	A chronic inflammatory disease of the airways. In those susceptible to asthma, this inflammation causes the airways to spasm and swells periodically so that the airways narrow. Obstruction to air flow either resolves spontaneously or responds to a wide range of treatments.
Epilepsy	Recurrent seizures (abnormal burst of electrical activity in the brain that scrambles messages) that are unprovoked.

## 6. LEGISLATIVE AND INDUSTRY REQUIREMENTS

### Related Legislation -

- *Administration of First Aid in Children's Services Policy*
- *Administration of Medication in Children's Services Policy*
- *Enrolment and Orientation in Children's Services Policy* Relevant legislation and standards include but are not limited to:
- *Education and Care Services National Law Act 2010: Section 173, 167, 169, 174*
- *Education and Care Services National Regulations 2011: Regulations 79, 85-87, 90-96, 101, 102, 136, 137, 146, 147, 160-162, 168(2)(d), 173, 174, 177, 181, 183, 184, 246*
- *Health Act 1958*
- *Health Records Act 2001*
- *Information Privacy Act 2000 (Vic)*
- *Privacy and Data Protection Act 2014 (Vic)*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
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*Standard 2.1: Health, Standard 2.2: Safety*  
*Element 2.1.2 Health practices and procedures*
- *National Quality Standard, Quality Area 7: Governance and Leadership*  
*Standard 7.2: Effective leadership builds and promotes a positive organisational culture and builds a professional learning community*  
*Element 7.1.3: Roles and responsibilities are clearly defined, and understood, and support effective decision making and operation of the service.*
- *Occupational Health and Safety Act 2004 as amended 2007*
- *Public Health and Wellbeing Act 2008 (Vic)*
- *Public Health and Wellbeing Regulations 2009 (Vic)*

## 7. SUPPORTING DOCUMENTS

- Victorian Early Years Learning and Development Framework (VEYLDF)
  - National Early Years Learning Framework (EYLF)
  - My Time our Place- Outside School hours Care Framework
  - Children's Service Regulation and Act
  - Occupational Health and Safety Regulations and Act
  - Anaphylaxis Australia Inc and telephone support line 1300 728 000.
  - Epilepsy Foundation of Victoria
  - Diabetes Australia
  - National Asthma Council Australia
  - Royal Children's Hospital, Department of Allergy
- Other Resources
- Australian Society of Clinical Immunology and Allergy (ASCIA)
  - Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th edition, 2013) National Health and Medical Research Council:  
<http://www.nhmrc.gov.au/guidelines/publications/ch55>

- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011, p 62: [www.acecqa.gov.au](http://www.acecqa.gov.au)

## 8. Approval and Review

**Approved By:** Executive Management Group  
**Meeting Name:** Executive Management Meeting  
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**Review Date:** July 2021  
**Procedure Owner:** Alicia Pratt OSHC Manager  
 Carina O’Neil Early Years Manager  
**Contact Details:** [alicia.pratt@ymca.org.au](mailto:alicia.pratt@ymca.org.au)  
[carina.oneill@ymca.org.au](mailto:carina.oneill@ymca.org.au)

### Amendments

Version	Date	Author	Change Description
V1	July 2020	Alicia Pratt	Minor Updates