

## YMCA Victoria Medical Conditions in Children's Services Policy



OFFICE USE ONLY

Policy Number	Date Approved	Date Last Amended	Status
YG 159-O	04/04/2014	July 2011	APPROVED

### 1. MEDICAL CONDITIONS IN CHILDREN'S SERVICES POLICY

### 2. INTRODUCTION

YMCA 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 at the YMCA service.

### 3. POLICY

Upon enrolment, it is the child's parents or nominated guardian's responsibility to ensure that 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 Nominated Supervisor's responsibility to ensure the following;

- All staff (including relief staff and volunteers) are familiar with all children diagnosed with medical conditions.
- Children with a specific health care need, allergy or relevant medical condition that requires a medical management plan, are provided the medical management plan by the parent or guardian upon enrolment or before first attending the service.
- 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who require a medical management plan will not be able to stay at the service if the plan is not available or is out of date (more than 12 months old).
- Colour 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, taking into account 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)

### **3.1 Risk Minimisation Plans**

In the case of Risk Minimisation Plans for any medical condition, it is the Nominated Supervisors responsibility 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 that 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).
- 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.

### 3.2 Medical conditions policy to be provided to parents

The YMCA 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.

### 3.3 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 Action 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 action 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 is 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.

### 3.3 Allergy Management

It is the Nominated Supervisors responsibility 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.
- All staff (including relief staff) are informed 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.

### **3.4 Anaphylaxis Management**

Anaphylaxis is the most serious form of allergic reaction and can be fatal. The Nominated Supervisor or Person with Management or Control 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 other 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 Anaphylaxis in Children's Services policy

### **3.5 Diabetes**

It is the Nominated Supervisors responsibility 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 YMCA 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 YMCA 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 service Management 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.
  - In the event that 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

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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.

#### 4. DEFINITIONS

**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.

**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 a particular allergen, reexposure 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.

#### 5. SCOPE

The scope of this policy applies to all approved Children’s Services that operate under the Education and Care Services National Regulations, 2011. This includes Before and After School Care Services and Vacation Care conducted by YMCA Geelong.

#### 6. ROLES AND RESPONSIBILITIES

Department/Area	Role/Responsibility
Operations	YMCA Nominated Supervisor and/or service Management will oversee the implementation and service adherence to this policy (ie policy compliance). 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.  All Educators are responsible for the daily implementation of the policy when directly supervising children.
Community Programs Co-ordinator	Is responsible for ensuring suitable resources and support systems to enable compliance with this policy. Drive the consultation process and provide leadership and advice

	on the continuous improvement of the policy.
Community Programs Co-ordinator	Responsible for the development, monitoring and review of the Policy and related systems, ensuring all content meets all legislated requirements. Facilitate annual policy training to Children’s Services Educators on the appropriate implementation and use of policy.
CEO	Approve the Policy Provide official sign off on the Policy

## 7. MONITORING, EVALUATION AND REVIEW

The Medical Conditions and Notifications Policy will be reviewed three years from the date of initial approval.

The ongoing monitoring and compliance to this policy will be overseen by Community Programs Co-ordinator in accordance with the requirements of the audit and compliance framework, including external and internal audit, peer review and self-assessment.

The evaluation of the policy will be facilitated by the policy owner, using stakeholder feedback to drive continuous improvement and reflect service users’ comments where practical.

## 8. SUPPORTING DOCUMENTS (LINKS TO PROCEDURES, LEGISLATION, FORMS, WORK PRACTICES)

1. [Victorian Early Years Learning and Development Framework \(VEYLDF\)](#)
2. [National Early Years Learning Framework \(EYLF\)](#)
3. [My Time, Our Place: Framework for School Age Care in Australia](#)
4. [Education and Care Services National Law Act](#)
5. [Education and Care Services National Regulations 2011](#)
6. **YMCA Policy and Procedures**
  - a. [YMCA Occupational Health and Safety Policy](#)
  - b. [YMCA First Aid Management Procedure](#)
  - c. [Hazard Management Procedure](#)
  - d. [YMCA Incident Reporting and Investigation Procedure](#)
  - e. [YMCA Biohazards, Contaminants and Waste Policy](#)
7. [YNET Policy Library](#) including;
  - i. Administration of First Aid in Children’s Services Policy
  - ii. Administration of Medication in Children’s Services Policy
  - iii. Enrolment and Orientation in Children’s Services Policy
  - iv. Anaphylaxis in Children’s Services Policy

### 8. YMCA Forms and Resources

- a. [YMCA Forms for Incident Reporting](#)

- b. [Medication Record](#)
- c. [Accident Incident Illness Injury Trauma Record Form \(First Aid Form\)](#)
- d. [General Hazard Identification Report Form](#)
- e. [Enrolment Form](#)

**9. Other Resources**

- a. [Australian Society of Clinical Immunology and Allergy \(ASCIA\)](#)
- b. [Diabetes Australia](#)
- c. [National Asthma Council Australia](#)

Approved by: Chief Executive Officer

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Amendment history:

V1	July 2011	Kimberley Maher	Document created
V2	July 2012	Kimberley Maher	Reviewed
V3	04/04/2014	Shona Eland	Uploaded to YMCA Geelong Policy Template included scope, monitoring and evaluation clauses.

As Adopted and reviewed by the YMCA of Geelong Inc on 04/04/2014



Acting Chief Executive Officer YMCA Geelong Inc.