

CEEC CH POL DEALING WITH MEDICAL CONDITIONS IN CHILDREN POLICY

Policy Sponsor	GOVERNANCE
Document type	POLICY
Applicable to	CATHOLIC EARLY EDCARE
Approved by	DIRECTOR, CATHOLIC EARLY EDCARE

POLICY STATEMENT

We are committed to ensuring robust processes are in place to support children to feel physically and emotionally well, and have their individual care needs met when they have a medical condition or are unwell.

BACKGROUND

The Education and Care Services National Regulations require policies and procedures in place for Dealing with medical conditions in children.

LEGISLATIVE REQUIREMENTS

<u>Education and Care Services National Regulations</u>	
Section 167	Offence relating to protection of children from harm and hazards
Reg 85	Incident, injury, trauma and illness policy and procedures
Reg 86	Notification to parent of incident, injury, trauma and illness
Reg 87	Incident, injury, trauma and illness record
Reg 89	First aid kits
Reg 90	Medical conditions policy
Reg 91	Medical conditions policy to be provided to parents
Reg 92	Medication record
Reg 93	Administration of medication
Reg 94	Exception to authorisation requirement – anaphylaxis or asthma emergency
Reg 95	Procedure for administration of medication
Reg 96	Self-administration of medication
Reg 136	First aid qualifications
Reg 162(c) 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).
Reg 168	Education and care services must have policies and procedures
Reg 170	Policies and procedures to be followed

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Reg 171	Policies and procedures to be kept available
Reg 172	Notification of change to policies or procedures
Reg 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 risk of anaphylaxis is enrolled at the service;

National Quality Standard		
Quality Area 2	Children’s Health & Safety	
Standard 2.1	Health	Each child’s health and physical activity is supported and promoted.
Element 2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
Element 2.1.3	Healthy lifestyle	Healthy eating and physical activity are promoted and appropriate for each child.
Quality Area 7	Governance and Leadership	
Standard 7.1	Governance	Governance supports the operation of a quality service.
Element 7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service.

Guiding Principles

The following are the guiding principles and minimum requirements that inform CEEC’s approach to medical conditions and best practice medication management. The CEEC policy and procedure is informed by the guiding principles of Centacare’s Medication Management Policy.

Principle 1 – Child-Centred Approach

We work closely with families regarding children’s health requirements, seek detailed information, set goals, and outline expectations and legislative requirements with respect to medication management during our enrolment process.

Principle 2 – Decision Making

We partner with, and provide support to, families of children with medical conditions to develop Risk Minimisation Plans for children prior to commencement. We ensure communication with families is regular, respectful, culturally sensitive and all educators and staff are informed of any changes to a child’s medical condition and our compliance with legislation. We will undertake reasonable adjustments for a child with a disability to enable them to access and participate in the program.

Principle 3 – Support for Self-Management

We support school aged children to self-administer medication or be assisted in self-administration.

Principle 4 – Consent

We ensure written authorisation is provided prior to the administration of medication, with the exception of the administration of emergency medications ([Reg 94](#)). We understand families benefit from time to prepare; therefore we provide the Dealing with Medical Conditions in Children Policy to all families during the enrolment process as well as having the current policy and procedure on the CEEC website.

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Principle 5 – Safe and Effective Medication Administration

We are committed to ensuring the health and safety of children by keeping emergency medication on site for asthma and anaphylaxis. We expect all staff involved in the administration of medication must follow the 7 Rights for Safe Medication Administration, the CEEC CH PRO Dealing with Medical Conditions in Children Procedure and adhere to the appropriate Authorisation to Administer Medication according to the child’s file to reduce the risk of medication errors.

Principle 6 – Record Keeping and Documentation

We will ensure medication documentation includes legible, accurate and specific details of each medication including dose and frequency, and relevant administration information. Medication records must be retained for the period of time specified in the relevant Regulations. All medication-related documentation must be kept in a private and confidential file for each child. Pause Care Arrangements may be put in place if required documentation or medication is not available or provided.

Principle 7 – Minimising Harm and Optimising Benefits of Medication

We will ensure all medication that is to be administered to children in the care of our services is authorised and labelled by a pharmacist in the original packaging and all staff are informed of any children diagnosed with a medical condition or specific health care need and the risk minimisation procedures in place. Staff are not permitted to cut or crush tablets, nor administer medication that does not arrive as dispensed by a pharmacist.

Principle 8 – Staff Training

We will ensure staff involved with the administration of medication are appropriately trained, follow the Dealing with Medical Conditions in Children policies and procedures, complete induction and, if required by their position, maintain a current ACECQA approved certification in first aid and cardiopulmonary resuscitation from an accredited training provider.

Principle 9 – Safe Storage and Disposal

We ensure all medications, including self-administered medications, are safely stored in a manner that maintains the quality of the medicine and safeguards children and others. We will return medication that is out of date or no longer taken, to the family, or to a pharmacy if it belongs to the service as emergency medication. All staff are informed where medication is stored and/or any specific dietary restrictions relating to their health care need or medical condition.

Principle 10 – Monitoring and Reporting

We will submit all medication incidents (including ‘near misses’) into the relevant incident reporting system. We will monitor and assess trends in medication related incidents, ensuring processes are in place to minimise the risk of continued or future medication errors. We will ensure families are notified of all medication related incidents, and staff will discuss near misses with their managers.

Principle 11 – Legislation, Regulations and Standards Compliance

We ensure we meet all legislative requirements and obligations under the Education and Care Services National Law and National Regulations, and ensure our practices are guided by national authorities such as [The National Asthma Council Australia](#), [Allergy and Anaphylaxis Australia](#), and [Diabetes Australia](#). We prioritise good governance and quality management by supporting Service Leaders and staff with policies, procedures, and guidelines which clearly outline their roles and responsibilities, focusing on quality outcomes for children, compliance with relevant legislation, standards and regulations.

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KEY TERMS

Term	Meaning	Source
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.	Guide to the NQF
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.	
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 auto-immune adrenalin device.	National Regulations (Regulation 136)
Approved Provider	Approved Provider is a person who holds a provider approval. A provider approval authorises a person to apply for one or more service approvals and is valid in all jurisdictions.	Childcare provider handbook
Communication Plan	A plan that outlines how relevant educators, staff members and volunteers are informed about the Dealing with Medical Conditions in Children policy and the medical management plan and risk minimisation plan for the child. It also sets out how families can communicate any changes to the medical management plan and risk minimisation plan for the child.	National Regulations (Regulation 90)
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 (www.tga.gov.au).	National Regulations (Definitions)
Medical condition	This may be described as a condition that has been diagnosed by a registered medical practitioner.	
Medical Management Plan	A document that has been prepared and signed by a doctor that describes symptoms, causes, clear instructions on action and treatment for the child's specific medical condition and includes the child's name and a photograph of the child.	Guide to the NQF
Risk minimisation 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 and a photograph of the child.	

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LINKS TO OTHER POLICIES / DOCUMENTS

- CEEC CH PRO Dealing with Medical Conditions in Children Procedure
- [CEEC CH FORM Medication Record](#)
- [CEEC CH FORM Risk Minimisation Plan](#)
- [CEEC HS POL Emergency Management Policy](#)
- [CEEC HS PRO Emergency Management Procedure](#)
- [CEEC HS PRO Crisis Management Procedure](#)
- [CEEC HS POL Administering First Aid to Children Policy](#)
- CEEC HS PRO Administering First Aid to Children Procedure
- [CEEC GOV POL Enrolment, Orientation, and Booking Policy](#)
- CEEC GOV PRO Enrolment, Orientation, and Booking Procedure
- CEEC Reasonable Adjustments for Inclusion
- CEEC CH FORM Blood Glucose Levels Testing Record
- CEEC CH FORM Ketone Testing Record
- CEEC CH FORM Medical Conditions Management Plan – Diabetes
- CEEC CH FORM Medical Conditions Management Plan - Epilepsy

INDUCTION AND ONGOING TRAINING

This policy will be available on the Archdiocesan Intranet (AI) and the Catholic Early EdCare website. Service Leaders and Managers are responsible for ensuring staff are able to access policies and supporting documents. All staff are responsible for understanding and complying with this policy. Educators and families are able to access this policy on the Catholic Early EdCare website.

- Educators and families will be invited to participate in the review of this policy.
- Families will be able to access a copy of this policy during the enrolment process.
- Summary information will be included in the CEEC information handbooks
- Changes to this document will be shared with families and educators.
- Ongoing training opportunities for educators will be provided using a range of learning platforms.

Please contact the Policy Sponsor for further interpretation of this policy.

MONITORING, EVALUATION AND REVIEW

Monitoring of compliance with this policy and the related procedure will be completed by the Governance and Performance team.

The review process for this policy will begin at least 8 (eight) weeks prior to the stated review date and include a consultation period with families, educators, Catholic Early EdCare team and any other relevant stakeholders and will be facilitated by the Research and Policy Officer.

Communication about any changes in or review of the policy, procedure or related supporting documents will be provided to Catholic Early EdCare team, Service Leaders, educators and families once finalised.

Breaches of this policy will be dealt with under Centacare’s misconduct provisions, as stated in the Employment Guidelines Code of Conduct.

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