



St Michael's Collegiate

Set for life

Subject: ELC MEDICAL CONDITIONS POLICY	Policy No: ELC 05 – Version 1
Covers: COLLEGIATE ELC	Effective: June 2016
	Revised: N/A
	Review Date: June 2017

Medical Conditions

Policy

The medical conditions policy and procedure of Collegiate Early Learning Centre (ELC) sets out the service's practices in relation to:

- informing the nominated supervisor, staff members and volunteers of the required practices to manage a medical condition of a child attending the service;
- the management of medical conditions, including asthma, diabetes or a diagnosis that a child is at risk of anaphylaxis; including:
 - the provision of a medical management plan and the development of a risk-minimisation plan by the parent; and
 - the implementation of the medical management plan in the event of an incident relating to the child's specific health care need, allergy or relevant medical condition.

Procedure

Where the approved provider is aware a child enrolled at the service has a specific health care need, allergy or other relevant medical condition, a copy of the *Medical Conditions Policy* and associated procedures will be provided to the parent(s). This will be referenced within each child's enrolment information.

On enrolment, the parent of a child with a known medical condition must provide the service with a current copy of the child's medical management plan developed by the child's registered medical practitioner.

In addition to this, the service, in conjunction with the parent(s), will develop a risk-minimisation plan to ensure any risks relating to the child's specific health care need, allergy or relevant medical condition are assessed and minimised. This plan must include the practices and procedures in relation to:

- the safe handling, preparation, consumption and serving of food are developed and implemented; and
- notifying the parents of any known allergens and the intended strategies for minimising the risk.

Each child's medical management plan and risk minimisation plan must be current and up to date. Where a plan is updated, the service must be notified of the update in writing (i.e. a verbal discussion with an educator of the update is not sufficient; an updated medical action plan from a medical practitioner is required).

All staff (including the nominated supervisor) and volunteers must be made aware of a child attending the service with a known allergy or medical condition. Each staff member (including the nominated supervisor) and volunteers will be made aware of the location of the child's medical management plan and risk minimisation plan; the location of the child's medication (see *Storage of Medication* section) and how to implement the medical management plan or risk minimisation plan. These strategies will be supported by all staff members (including the nominated supervisor) and volunteers being aware of the medical conditions policy and procedures.

Administration of Medication

Where medication is administered to a child attending the service (including medication in relation to asthma, diabetes or anaphylaxis), the medication will only be administered by an appropriately trained educator, who is authorised by the nominated supervisor to do so¹ (unless the medication is to be self-administered).

In addition to this, the medication must:

- Have the written authorisation of the parent;
- Be within the expiry or use by date;
- Be in the original container, bearing the complete, original label;
- Only be administered in accordance with instructions;
- Where the medication has been prescribed by a registered medical practitioner, the medication must also display name of the child to whom the medication is to be administered;
- Be recorded; including:
 - the name of the child;
 - the authorisation to administer medication, signed by the parent;
 - the name of the medication to be administered;
 - the time and date the medication was last administered;
 - the time and date, or the circumstances under which, the medication should be next administered;
 - the dosage of the medication to be administered;
 - the manner in which the medication is to be administered;
 - the name and signature of the person who checked the dosage and administration.

Where the medication is self-administered:

- the dosage that was administered; and
- the manner in which the medication was administered; and
- the name and signature of the person who administered the medication; and
- the name and signature of the person who checked the dosage and administration.

Where medication is required to be administered in an emergency situation, verbal authorisation may be granted for the administration of the medication by:

- a parent or a person named in the child's enrolment record as authorised to consent to administration of medication; or
- where the parent or person named in the enrolment record cannot reasonably be contacted, a registered medical practitioner or emergency service personnel.

Written notice of the incident will be forwarded to the parent as soon as practicable.

In the case of an anaphylaxis or asthma emergency, medication may be administered without the required authorisation. The service will ensure that the parent and emergency services are notified of the incident soon as practicable.

Self-administration of Medication

Where a child over preschool age is to self-administer medication, written authorisation must be given by the parent and include clear, written instructions in relation to the administration of the medication by a medical practitioner, including the required level of supervision.

The medication must be stored in line with the requirements of the *Tasmanian Poisons Regulations*.

Where a child self-administers medication, the child will:

- Be able to effectively administer the medication;

- Notify the educator of the administration of the medication to ensure the administration is recorded in line with the requirements of regulation 92.

Storage

Medication must be accessible to staff, while remaining out of the reach of children (excluding medication for self-administration).

Medication is to be stored in line with the manufactures instructions (i.e. not in direct sun light; refrigerated).

Adrenaline auto-injecting devices are to clearly named and stored with the relevant medical action plan. Adrenaline auto-injecting devices are to be stored in an unlocked, accessible space, out of direct sunlight. Adrenaline auto-injecting devices are to be signed in and out from the service, including arrival and departure at the service and on excursions.

Narcotics must be stored separately from other medications, in a secure, locked area. The key must be retained by a person authorised to administer the medication.

Disposal

The correct method in relation to the disposal of medication, including narcotics, must be sought from a pharmacist.

Relevant Policies and Procedures

- Administration of First Aid Policy and Procedure
- Enrolment and Orientation Policy and Procedure

Sources

- *Education and Care Services National Law*
- *Education and Care Services National Regulations*
- National Quality Standard 2
- *Tasmanian Poisons Regulations*

Review due June 2017

¹ The nominated supervisor of Collegiate ELC authorises an educator to administer medication where that educator holds the required qualification as outlined in the *Education and Care Services National Regulations* (regulation 93) and listed on the ACECQA website and the medication is administered in line with the *Tasmanian Poisons Regulations*.

An appropriately trained educator is taken to mean a person who holds the required qualification as stated in the *Education and Care Services National Regulations* and published on ACECQA website and is in accordance with the requirements of the *Tasmanian Poisons Regulations*.