

DEALING WITH MEDICAL CONDITIONS POLICY

PURPOSE

This policy will provide guidelines for Melbourne Montessori School to ensure that:

- clear procedures exist to support the health, wellbeing and inclusion of all students enrolled at the School,
- the School practices support for the enrolment of children and families with specific health care requirements.

POLICY STATEMENT

VALUES

Melbourne Montessori School is committed to recognising the importance of providing a safe environment for students with specific medical and health care requirements through implementing and maintaining effective hygiene practices. This will be achieved through:

- fulfilling the service's duty of care requirement under the *Occupational Health and Safety Act 2004*, the *Education and Care Services National Law Act 2010* and the *Education and Care Services National Regulations 2011* to ensure that those involved in the programs and activities of Melbourne Montessori School are protected from harm
- informing educators, staff, volunteers, students and families on the importance of adhering to the *Dealing with Medical Conditions Policy* to maintain a safe environment for all users, and communicating the shared responsibility between all involved in the operation of the service
- ensuring that educators have the skills and expertise necessary to support the inclusion of students with additional health needs.

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, students and others attending the programs and activities of Melbourne Montessori School, including during offsite excursions and activities.

1. Business Manager
2. Nominated Supervisor
3. Teachers
4. Parents/Guardians

BACKGROUND AND LEGISLATION

Background

An approved service must have a policy for managing medical conditions that includes the practices to be followed:

- in the management of medical conditions,
- when parents are required to provide a medical management plan if an enrolled student has a specific health care need, allergy or relevant medical condition,
- when developing a risk minimisation plan in consultation with the student's parents/guardians,
- when developing a communication plan for staff members and parents/guardians.

Staff members and volunteers must be informed about the practices to be followed. If a student enrolled at the School has a specific health care need, allergy or other relevant medical condition, parents/guardians must be provided with a copy of this and other relevant policies. Medication and medical procedures can only be administered to a student:

- with written authorisation from the parent/guardian or a person named in the student's enrolment record as authorised to consent to administration of medication (Regulation 92(3)(b)),

- with two adults in attendance, one of whom must be an educator. One adult will be responsible for the administration and the other adult will witness the procedure,
- if the medication is in its original container bearing the student's name, dose and frequency of administration.

Refer to the *Administration of Medication Policy* for more information.

Staff may need additional information from a medical practitioner where the student requires:

- multiple medications simultaneously
- a specific medical procedure to be followed.

If a student with a chronic illness or medical condition that requires invasive clinical procedures or support is accepted by the School, it is vital that prior arrangements are negotiated with the parent/guardian, authorised nominees or appropriate health care workers to prepare for the event that the student will require a procedure while in attendance at the School. Parents/guardians and the School should liaise with either the student's medical practitioner or other appropriate service providers to establish such an arrangement. Arrangements must be formalised following enrolment and prior to the student commencing at the School.

Self-administration by a child over preschool age

Services who provide education and care to a child over preschool age (as defined in the *Education and Care Services National Regulations 2011*) may allow 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.

- Where a child over preschool age can self-administer medication/medical procedures, 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 qualifications.

Legislation and standards

Relevant legislation and standards include but are not limited to:

- Education and Care Services National Law Act 2010: Section 173
- Education and Care Services National Regulations 2011: Regulations 90, 91, 96
- Health Records Act 2001
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
 - Standard 2.1: Each child's health is promoted
 - Element 2.1.1: Each child's health needs are supported
 - Element 2.3.2: Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury
- *National Quality Standard*, Quality Area 7: Leadership and Service Management
 - Standard 7.1: Effective leadership promotes a positive organisational culture and builds a professional learning community
 - Element 7.1.2: The induction of educators, co-ordinators and staff members is comprehensive
- Occupational Health and Safety Act 2004
- Public Health and Wellbeing Act 2008
- Public Health and Wellbeing Regulations 2009

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

AV How to Call Card: A card that the School has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from www.ambulance.vic.gov.au/Education/Calling-000-Triple-Zero.html

Communication plan: A plan that forms part of the policy and outlines how the School will communicate with parents/guardians and staff in relation to the policy. The communication plan also describes how parents/guardians and staff will be informed about risk minimisation plans and emergency procedures to be followed when a student diagnosed as at risk of any medical condition such as anaphylaxis is enrolled at the service.

Hygiene: The principle of maintaining health and the practices put in place to achieve this.

Medical condition: In accordance with the *Education and Care Services National Regulations 2011*, the term medical condition includes asthma, diabetes or a diagnosis that a student is at risk of anaphylaxis, and the management of such conditions.

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 student's specific medical condition, and includes the student's name and a photograph of the student. An example of this is the Australasian Society of Clinical Immunology and Allergy (ASCIA) Action Plan.

Risk minimisation: The implementation of a range of strategies to reduce the risk of an adverse affect from the mismanagement of a specific medical condition at the service.

Risk minimisation plan: A School-specific plan that details each student's medical condition, and identifies the risks of the medical condition and practical strategies to minimise those risks, and who is responsible for implementing the strategies. The risk minimisation plan should be developed by families of students with specific medical conditions that require medical management plans, in consultation with staff at the service upon enrolment or diagnosis of the condition.

SOURCES AND RELATED POLICIES

Sources

- 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

PROCEDURES

1. THE BUSINESS MANAGER is responsible for:

- 1.1 ensuring that all staff and volunteers are provided with a copy of this policy and have a clear understanding of the procedures and practices outlined within;
- 1.2 developing and implementing a communication plan and encouraging ongoing communication between parents/guardians and staff regarding the current status of the student's specific health care need, allergy or other relevant medical condition, this policy and its implementation
- 1.3 ensuring relevant educators/staff receive regular training in managing specific health care; needs such as asthma management, anaphylaxis management and any other specific procedures that are required to be carried out as part of the care and education of a student with specific health needs;
- 1.4 ensuring at least one educator/staff member who has current accredited training in emergency management requirements for specific medical conditions is in attendance and immediately available at all times that children are being educated and cared for by the school;

- 1.5 establishing robust induction procedures that include the provision of information regarding the implementation of the practices outlined in this policy;
- 1.6 ensuring families and educators/staff understand and acknowledge each other's responsibilities under these guidelines;
- 1.7 ensuring families provide information on their child's health, medications, allergies, their medical practitioner's name, address and phone number, emergency contact names and phone numbers, and a medical management plan signed by their medical practitioner, following enrolment and prior to the student commencing at the service;
- 1.8 ensuring that a risk minimisation plan is developed for each student with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually;
- 1.9 ensuring that parents/guardians who are enrolling a student with specific health care needs are provided with a copy of this and other relevant service policies.

2. THE NOMINATED SUPERVISOR is responsible for:

- 2.1 implementing this policy at the service and ensuring that all educators/staff follow the policy and procedures set out within;
- 2.2 informing the Approved Provider of any issues that impact on the implementation of this policy
- 2.3 ensuring that the *AV How to Call Card* is displayed near all telephones;
- 2.4 identifying specific training needs of educators/staff who work with students diagnosed with a medical condition, and ensuring, in consultation with the Approved Provider, that educators/staff access appropriate training;
- 2.5 ensuring students do not swap or share food, food utensils or food containers;
- 2.6 ensuring food preparation, food service and relief staff are informed of students and staff who have specific medical conditions or food allergies, the type of condition or allergies they have, and the service's procedures for dealing with emergencies involving allergies and anaphylaxis;
- 2.7 ensuring a copy of the student's medical management plan is visible and known to staff in the service. Prior to displaying the medical management plan, the Nominated Supervisor must explain to parents/guardians the need to display the plan for the purpose of the student's safety and obtain their consent (refer to *Privacy and Confidentiality Policy*);
- 2.8 ensuring educators and other staff follow each student's risk minimisation plan and medical management plan;
- 2.9 ensuring opportunities for a student to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan;
- 2.10 providing information to the community about resources and support for managing specific medical conditions while respecting the privacy of families enrolled at the service;
- 2.11 administering medications as required, in accordance with the procedures outlined in the *Administration of Medication Policy*;
- 2.12 maintaining ongoing communication between educators/staff and parents/guardians in accordance with the strategies identified in the communication plan, to ensure current information is shared about specific medical conditions within the service.

3. TEACHERS and other educators are responsible for:

- 3.1 ensuring that students do not swap or share food, food utensils or food containers;
- 3.2 communicating any relevant information provided by parents/guardians regarding their child's medical condition to the Nominated Supervisor to ensure all information held by the School is current;
- 3.3 being aware of individual requirements of students with specific medical conditions and following their risk minimisation plan and medical management plan;
- 3.4 monitoring signs and symptoms of specific medical conditions and communicating any concerns to the Nominated Supervisor;
- 3.5 adequately supervising all students, including those with specific medical conditions;
- 3.6 informing the Nominated Supervisor of any issues that impact on the implementation of this policy.

4. PARENTS/GUARDIANS are responsible for:

- 4.1 informing the School of their student's medical conditions, if any, and informing the service of any specific requirements that their child may have in relation to their medical condition;
- 4.2 developing a risk minimisation plan with the Nominated Supervisor and/or other relevant staff members at the service;

- 4.3 providing a medical management plan signed by a medical practitioner, either on enrolment or immediately upon diagnosis of an ongoing medical condition. This medical management plan must include a current photo of the student and must clearly outline procedures to be followed by educators/staff in the event of an incident relating to the student's specific health care needs;
- 4.4 meeting the cost of training staff to perform specific medical procedures as relevant to their child, as required;
- 4.5 notifying the Nominated Supervisor of any changes to the status of their child's medical condition and providing a new medical management plan in accordance with these changes;
- 4.6 informing the Nominated Supervisor of any issues that impact on the implementation of this policy by the service.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

REVIEWED: 2017

Linked with:

Administration of First Aid Policy
Administration of Medication Policy
Anaphylaxis Management Policy
Asthma Management Policy
Dealing with Infectious Diseases Policy
Health and Wellbeing Policy
Privacy and Confidentiality Policy
Supervision of Children Policy

MEDICAL CONDITION RISK MINIMISATION AND COMMUNICATION PLAN

To be attached to child's Medical Action Plan

1. Name: _____

Teacher: _____

2. What medical condition does your child have? _____

Medical Condition	SOURCES OF RISK	RISK MINIMISATION PLAN
My child reacts in the following ways:		Consider: <ul style="list-style-type: none"> removal of/limiting access to allergens food preparation, storage, handling, consumption and the serving of food food being brought into the service access to medication
Additional steps to be taken for my child when observing any of the following:		1. Administer _____ _____ 2. Ring parent telephone no: _____ <p style="text-align: center;"><i>DO NOT LEAVE MESSAGE SPEAK TO A PERSON</i></p>

3. Does everyone recognise the 'at risk' child by sight?

STRATEGIES TO INFORM ALL STAFF / RELIEF STAFF / VOLUNTEERS / STUDENTS	
Ensure all staff, relief staff, volunteers and students are familiar with: <ul style="list-style-type: none"> the child with the specific health need, allergy or medical condition child's Medical Management and Risk Assessment Plan location of Child's medication – if necessary Location of Children's Medication is next to the Pink Folder and also in the Sick Bay/Staff Room	Staff are made aware of the medical conditions through the Pink Folder, Staff Meetings, Cycle Meetings and inductions. Date of first meeting:

STRATEGIES TO INFORM FAMILIES

<p>Do families know how Melbourne Montessori School manages medical conditions?</p>	<p>Upon enrolment, all families are provided the details of where the policies can be accessed and encouraged to read them.</p> <p>What date was the 'at risk' child's parents provided a copy of the following policies (tick as appropriate):</p> <ul style="list-style-type: none"> • Anaphylaxis Policy • Asthma Policy • Dealing with Medical Conditions Policy • Administration of Medication Policy <p>Date: _____</p>
<p>Do all parents need to be notified of any known allergens that pose a risk to the child?</p> <p style="text-align: center;">Yes No</p> <p>(please circle)</p> <p>If no, no action required.</p>	<p>If yes:</p> <p>Notify all parents through the Allergy Awareness Form.</p> <p>Date when and how all families were notified of strategies to minimise and manage these (attach document):</p> <p>Date:</p> <p>Process:</p>

MEDICATION (EPIPEN/VENTOLIN INHALER/OTHER MEDICATION)			
Type of Medication:	Expiry Date:	Quarterly Expiry checks (done at start of each term):	
		Date:	Sign:
		Date:	Sign:
		Date:	Sign:
		Date:	Sign:
		Date:	Sign:
		Date:	Sign:
		Date:	Sign:
		Date:	Sign:

Educator
Name: _____

Educator
Signature: _____ Date: _____

Parent
Name: _____

Parent
Signature: _____ Date: _____