

DEALING WITH MEDICAL CONDITIONS

OVERVIEW

This policy outlines the responsibilities of all parties when a child with a medical condition attends care. The primary text for guiding this document is ''Health Support Planning in Education and Children's Services' (2006). This document lists information about common medical conditions and the roles and responsibilities of educators and families as well as suggesting potential medical direction.

INSTRUCTIONS

Leadership will:

- Oversee implementation of this policy in the rooms.
- Ask families when offering a placement whether their child has any medical conditions.
- Email families paperwork relevant to the child's condition when sending confirmation of offer. Also ask for a current picture of the child to display with the child's medical information.
- Ensure medical tags for conditions and allergies are created by the enrolment officer/assistant director before the child starts visits.
- Liaise with staff and chef to ensure they have sighted the allergy paperwork and displayed tags prior to the child starting visits.
- Audit all medication and associated forms every six months
- Ensure policies are up to date and implemented throughout the Centre
- Consult with the Access Assistant Program/ RN Delegation of Care program where child has complex and invasive health needs to be overseen at the site.
- Ensure all children at the site who require individual planning or support for a health, medical or dietary need have the correct paperwork completed and present at the site.
- Ensure all families with medical conditions receive a copy of this policy.

Team Leaders will:

• Communicate this policy to the educators in their room and oversee the implementation.

Families will:

- Ensure they provide documents to support their child's medical condition.
- Ensure they provide documents to support Complete Medication agreement for all medications.
 Medication agreements are not required for unmedicated items such as nappy creams, sunscreens, lip
 balms etc. For some medications, relevant paperwork will need to be completed with a medical
 practitioner and returned. A cream/ointment checklist will need to completed for all other items. (See
 attached chart)
- Be aware that their child may not be able to begin visits until paperwork is completed.
- Supply <u>medication that is labelled with a prescription label</u> which lists the child's name, date
 dispensed, name of medication, strength of medication, dose required, when the dose should be
 given, other administration instructions and expiry date.
- Inform their child's primary carer and administration staff if their condition changes in any way so changes can be documented.
- Sign the closure of the medication log once the health condition ceases or the action log is full.
- Not require the first dose of a new medication to be given for the first time to their child while at care. Exceptions apply to emergency medication such as Ventolin or adrenaline auto-injectors but families should inform staff when completing paperwork that the medication has never been administered.
- Specify the times medication should be given on the medication agreement. Staff cannot administer
 medication that is labelled 'to be taken as required' or 'taken as needed' (or similar wording) as they
 are not authorised to make clinical decisions around administering medication. An exception is when
 their health support plan for anaphylaxis/allergies or asthma states the symptoms that indicate
 medication needs to be administered.

Educators will:

• Read and sign all Medical plans and discuss medical conditions with person in charge of medication/allergies in the room.





- Store all medication in Allergy Buddies located in each room's storeroom out of reach of children.
- Ensure allergy tag has an up-to-date photo of the child
- Implement medical plans as per medication forms.
- Check medication once per month to ensure it is still in date.
- Inform families when a child's medication is due to expire/out of date. Once medication expires, it should be passed back to the family to dispose of.
- Ensure the child's medical requirements are displayed on the allergy chart.
- Ensure when administering medication they follow the child's medication agreement and the pharmacist label on the medication. Checks must be completed to ensure medication is given to the right child, the right medication, the right dose, the right strength, delivered by the right route (swallowed, applied topically), right method (e.g. after eating, crushed tablet, any other instructions), at the right time with the right documentation completed.
- Complete medication log every time medication is administered and note any application of unmedicated topical creams (nappy cream, sunscreen etc.) on the day sheet. Educators must ensure families sight these at the end of every session.
- Sign the closure of the medication log once the health condition ceases or the action log is full.
- Contact families after an event where emergency medication has had to be used (either the child's personal medication or site general use epi-pen or Ventolin.)
- Inform the family if a child refuses to take medication or is unable to receive medication when required.

Admin will:

Prepare and print medical tags for new families prior to visits

Transition leaders will:

- Pass medication forms, medication and any other relevant information onto the child's new primary caregiver before they begin transitions.
- Organise meeting between family and primary carer prior to transition if complex medical needs exist.

FORMS

- ASCIA Action Plans: For management of Anaphylaxis and allergies (including those without prescribed medication)
- **Non-specific Health Care Plan:** Where a child has multiple conditions being managed by a single health care plan (arranged by a general practitioner or other health professional).
- Individual First Aid Plan: Where recommended first aid for a child's condition differs from conventional first aid procedures. If standard first aid is sufficient to treat a child's medical condition, an individual first aid plan does not need to be completed.
- **Medication Agreement:** For when regular medication must be administered to manage a child's condition. This does not include emergency medication such as inhalers or epi-pens.
- **Health Support Agreement**: A plan completed by educators, families and a medical professional to support a child's health needs through planned risk minimisation. This form is used for all health needs.
- Safety and Risk Management Plan: Must be completed for all health needs, alongside Health Support Agreements to support and document decision making for children requiring health support in the context of the individual site.
- **Cream/Ointment Checklist:** Must be completed by the parent to sign permission to apply unmedicated creams/ointments to the child. This must be checked by staff for relevant allergen information.

ASSOCIATED POLICIES

Administration of First Aid Anaphylaxis

Asthma

Created: July 2013 Reviewed: September 2023

Chart of Medications and required forms: (continues next page)



Forbes Children's Centre

Unscheduled	Medications that are sold in other retail outlets (ie supermarkets) in addition to pharmacies i.e. antacids (e.g. Mylanta®, Gaviscon®), paracetamol, aspirin, ibuprofen.
	Medication Agreement can be completed by parent/guardian only.
	If pain relief medications are required to be administered more than 3x in a week the 'Agreement'
	section must be completed by health professional.
Schedule 2	Medications that are sold over the counter in a pharmacy without a prescription.
Examples: Chlorsig eyedrops,	Medication Agreement can be completed by parent/guardian only.
antihistamines, laxatives	If pain relief medications are required to be administered more than 3x in a week the 'Agreement'
	section must be completed by health professional.
Schedule 3	Pharmacist Only Medicines that do not require a prescription and are substantially safe in use but
Examples: Dermaid, cold + flu	require professional advice or counselling by a pharmacist to purchase
medication, worming tablets	Medication Agreement can be completed by parent/guardian only.
	If pain relief medications are required to be administered more than 3x in a week the 'Agreement'
	section must be completed by health professional.
Schedule 4	Medications that legally require a prescription from a Doctor or Dentist to be dispensed.
	Medication Agreement can be completed by parent/guardian only.
	If pain relief medications are required to be administered more than 3x in a week the 'Agreement'
	section must be completed by health professional.
 Controlled drugs (potential for 	Consult Access Assistant Program and let family know we will need information from a health
abuse/ addiction)	professional.
 High Risk Medicines 	
 5 or more medications 	
 Feeding Tubes 	
 Oxygen 	
 Medication administered by 	
injection	