



## DEALING WITH MEDICAL CONDITIONS POLICY 2018

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Mandatory – Quality Area 2 and 7

### AUTHORISATION

This policy was adopted by the Approved Provider of Holy Trinity Kindergarten on **17 June 2018**.

**Review date: 17 June 2020**

### PURPOSE

This policy provides guidelines for Holy Trinity Kindergarten (HTK) to ensure that:

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

### POLICY STATEMENT

#### 1. VALUES

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

- fulfilling HTK'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 HTK are protected from harm
- informing educators, staff, volunteers, children 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 HTK
- ensuring that educators have the skills and expertise necessary to support the inclusion of children with additional health needs.

#### 2. SCOPE

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

This policy should be read in conjunction with:

- *Anaphylaxis Policy*
- *Asthma Policy*
- *Diabetes Policy*
- *Epilepsy Policy*



### 3. 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 child has a specific health care need, allergy or relevant medical condition
- when developing a risk minimisation plan in consultation with the child'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 child enrolled at the service 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 child:

- with written authorisation from the parent/guardian or a person named in the child'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 child'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 child requires:

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

If a child with a chronic illness or medical condition that requires invasive clinical procedures or support is accepted by the service, 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 child will require a procedure while in attendance at the service. Parents/guardians and the service should liaise with either the child's medical practitioner or other appropriate service providers to establish such an arrangement. Arrangements must be formalised following enrolment and prior to the child commencing at the service.

#### 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
- *National Quality Standard*, Quality Area 7: Leadership and Service Management
- *Occupational Health and Safety Act 2004* (Vic)
- *Public Health and Wellbeing Act 2008* (Vic)
- *Public Health and Wellbeing Regulations 2009* (Vic)

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation – ComLaw: <http://www.comlaw.gov.au/>



#### 4. 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 service has completed containing all the information that Ambulance Victoria will request when phoned. A sample card can be downloaded from <https://www.ambulance.vic.gov.au/>

**Communication plan:** A plan that forms part of the policy and outlines how the service 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 child 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 child 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 child's specific medical condition, and includes the child's name and a photograph of the child. 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 effect from the mismanagement of a specific medical condition at the service.

**Risk minimisation plan:** A service-specific plan that details each child'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 children with specific medical conditions that require medical management plans, in consultation with staff at the service upon enrolment or diagnosis of the condition.

#### 5. SOURCES AND RELATED POLICIES

##### Sources

- *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5<sup>th</sup> 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](http://www.acecqa.gov.au)

##### Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Anaphylaxis Policy*
- *Asthma Policy*
- *Dealing with Infectious Diseases Policy*
- *Diabetes Policy*
- *Epilepsy Policy*
- *Incident, Injury, Trauma and Illness Policy*



- *Privacy and Confidentiality Policy*
- *Supervision of Children Policy*

## **PROCEDURES**

### **The Approved Provider is responsible for:**

- ensuring that all staff and volunteers are provided with access to this policy via hard copies in the foyer, dropbox, for staff, and via the website, so they can have a clear understanding of the procedures and practices outlined within
- developing and implementing a communication plan and encouraging ongoing communication between parents/guardians and staff regarding the current status of the child's specific health care need, allergy or other relevant medical condition, this policy and its implementation
- ensuring educators/staff receive regular training in managing the specific health care needs of children at HTK including asthma, anaphylaxis, diabetes, epilepsy and other medical conditions. This includes training in the management of specific procedures that are required to be carried out for the child's wellbeing
- 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 HTK. In line with best practice, HTK strongly encourages all educators to have current approved first aid qualifications. If an educator does not have current approved first aid qualifications a plan to achieve this qualification will be put in place
- establishing robust induction procedures that include the provision of information regarding the implementation of the practices outlined in this policy
- ensuring families and educators/staff understand and acknowledge each other's responsibilities under these guidelines
- 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 child commencing at HTK
- ensuring that a risk minimisation plan is developed for each child with specific medical conditions on enrolment or upon diagnosis, and that the plan is reviewed at least annually
- ensuring that parents/guardians who are enrolling a child with specific health care needs are provided with access to a copy of this and other relevant HTK policies
- following appropriate reporting procedures set out in the *Incident, Injury, Trauma and Illness Policy* in the event that a child is ill or is involved in a medical emergency or an incident at HTK that results in injury or trauma.

### **The Nominated Supervisor is responsible for:**

- implementing this policy at HTK and ensuring that all educators/staff follow the policy and procedures set out within
- informing the Approved Provider of any issues that impact on the implementation of this policy
- ensuring that the *AV How to Call Card* (refer to *Definitions*) is displayed near all telephones
- identifying specific training needs of educators/staff who work with children diagnosed with a medical condition, and ensuring, in consultation with the Approved Provider, that educators/staff access appropriate training
- ensuring children do not swap or share food, food utensils or food containers



- ensuring food preparation, food service and relief staff are informed of children and staff who have specific medical conditions or food allergies, the type of condition or allergies they have, and HTK's procedures for dealing with emergencies involving allergies and anaphylaxis
- ensuring a copy of the child's medical management plan is visible and known to staff at HTK. 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 child's safety and obtain their consent (refer to *Privacy and Confidentiality Policy*)
- ensuring educators and other staff follow each child's risk minimisation plan and medical management plan
- ensuring opportunities for a child to participate in any activity, exercise or excursion that is appropriate and in accordance with their risk minimisation plan
- providing information to the community about resources and support for managing specific medical conditions while respecting the privacy of families enrolled at HTK
- administering medications as required, in accordance with the procedures outlined in the *Administration of Medication Policy*
- 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 HTK.

**Certified Supervisors and other educators are responsible for:**

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

**Parents/guardians are responsible for:**

- informing HTK of their child's medical conditions, if any, and informing HTK of any specific requirements that their child may have in relation to their medical condition
- developing a risk minimisation plan with the Nominated Supervisor and/or other relevant staff members at HTK
- 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 child and must clearly outline procedures to be followed by educators/staff in the event of an incident relating to the child's specific health care needs
- meeting the cost of training staff to perform specific medical procedures as relevant to their child, as required
- 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
- informing the Nominated Supervisor of any issues that impact on the implementation of this policy by HTK.



**Volunteers and students, while at HTK, are responsible for following this policy and its procedures.**

## **EVALUATION**

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- ensure that all information on display and supplied to parents/guardians regarding the management of medical conditions is current
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of HTK's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

## **ATTACHMENTS**

- Attachment 1: Risk minimisation procedures
- Attachment 2: Enrolment checklist for children diagnosed with allergies
- Attachment 3: Risk minimisation plan
- Attachment 4: Allergy Action Plan
- Attachment 5: Medical Communication Plan



## **ATTACHMENT 1**

### **Risk minimisation procedures**

The following procedures should be developed in consultation with the parents/guardians of children at HTK who have been diagnosed with allergies and implemented to protect those children from accidental exposure to allergens. These procedures should be regularly reviewed to identify any new potential for accidental exposure to allergens.

#### **In relation to the child diagnosed as at risk:**

- The child should only eat food that has been specifically prepared for him/her. Some parents/guardians may choose to provide all food for their child.
- Ensure there is no food sharing or sharing of food utensils or containers at HTK.
- Where HTK is preparing food for the child:
  - ensure that it has been prepared according to the instructions of parents/guardians
  - parents/guardians are to check and approve the instructions in accordance with the risk minimisation plan.
- Bottles, other drinks, lunch boxes and all food provided by parents/guardians should be clearly labelled with the child's name.
- Consider placing a severely allergic child away from a table with food allergens. However, be mindful that children with allergies should not be discriminated against in any way and should be included in all activities.
- Ensure appropriate supervision of the child diagnosed with allergens on special occasions such as excursions and other service events.
- Children who are allergic to insect/sting bites should wear shoes and long-sleeved, light-coloured clothing while at HTK.

#### **In relation to other practices at HTK:**

- Ensure tables, chairs and bench tops are thoroughly cleaned after every use.
- Supervise all children at meal and snack times and ensure that food is consumed in specified areas. To minimise risk, children should not move around HTK with food.
- Ensure that children's risk minimisation plans inform HTK's food purchases and menu planning.
- Ensure that staff and volunteers who are involved in food preparation and service undertake measures to prevent cross-contamination of food during the storage, handling, preparation and serving of food, including careful cleaning of food preparation areas and utensils (refer to *Food Safety Policy*).
- Request that all parents/guardians avoid bringing food to HTK that contains specified allergens or ingredients as outlined in the risk minimisation plans of children diagnosed with allergies.
- Restrict the use of food and food containers, boxes and packaging in crafts, cooking and science experiments, according to the allergies of children at HTK.
- Ensure staff discuss the use of foods in children's activities with parents/guardians of at-risk children. Any food used at HTK should be consistent with the risk management plans of children diagnosed with allergens.



## **ATTACHMENT 2**

### **Enrolment checklist for children diagnosed with allergens**

- A risk minimisation plan (refer to attachment 3) is completed in consultation with parents/guardians prior to the attendance of the child at HTK and is implemented, including following procedures to address the particular needs of each child diagnosed with allergens, as required.
- Parents/guardians of a child diagnosed with allergens have been provided with a copy of HTK's *Dealing with Medical Conditions Policy*.
- All parents/guardians are made aware of HTK's *Dealing with Medical Conditions Policy*.
- An Allergy Action Plan (refer to attachment 4) for the child is completed as required.
- A copy of the child's medical management action plan is included with the child's medicine in the allergy buddy.
- Contact details of all parents/guardians and authorised nominees are current and accessible.
- If food is prepared at HTK, measures are in place to prevent cross-contamination of the food given to the child diagnosed with allergens.



### ATTACHMENT 3 Risk minimisation plan

The following information is not a comprehensive list but contains some suggestions to consider when developing/reviewing HTK's risk minimisation plan in consultation with parents/guardians.

<b>How well has HTK planned for meeting the needs of children with allergies?</b>	
Who are the children?	<input type="checkbox"/> List names of each child diagnosed as at risk.
What are they allergic to?	<input type="checkbox"/> List all known allergens for each child at risk. <input type="checkbox"/> List potential sources of exposure to each known allergen and strategies to minimise the risk of exposure. This will include requesting certain foods/items not be brought to HTK.
Do staff (including casual and relief staff), volunteers and visiting staff recognise the children at risk?	<input type="checkbox"/> List the strategies for ensuring that all staff, including casual and relief staff, recognise each at-risk child, are aware of the child's specific allergies and symptoms and the location of their anaphylaxis medical management action plan. <input type="checkbox"/> Confirm the location of each child's medical management action plan and ensure it contains a photo of the child.
Do families and staff know how HTK manages the risk of allergens?	<input type="checkbox"/> Record the date on which each family of a child diagnosed as at risk of anaphylaxis is provided a copy of HTK's <i>Dealing with Medical Conditions Policy</i> . <input type="checkbox"/> Record the date that parents/guardians provide any medicine required to be kept on premises. <input type="checkbox"/> Test that all staff, including casual and relief staff, know the location of the medicine and medical management action plan for each at-risk child. <input type="checkbox"/> Ensure that there is a procedure in place to regularly check the expiry date of the medication. <input type="checkbox"/> Ensure a written request is sent to all families at HTK to follow specific procedures to minimise the risk of exposure to a known allergen. This may include strategies such as requesting specific items not be sent to HTK, for example: <ul style="list-style-type: none"> <li>• food containing known allergens or foods where transfer from one child to another is likely e.g. peanut/nut products, whole egg, sesame or chocolate</li> <li>• food packaging where that food is a known allergen e.g. cereal boxes, egg cartons.</li> </ul>



	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ensure a new written request is sent to all families if food allergens change.</li> <li><input type="checkbox"/> Ensure all families are aware of HTK's policy that no child who has been prescribed medication is permitted to attend HTK without that medicine.</li> <li><input type="checkbox"/> Ensure a completed Ambulance Victoria <i>AV How to Call Card</i> is next to all telephone/s.</li> <li><input type="checkbox"/> The medicine and medical management action plan, is carried by an educator when a child diagnosed as at risk is taken outside HTK premises e.g. for excursions.</li> </ul>
<p>Has a communication plan been developed which includes procedures to ensure that:</p> <ul style="list-style-type: none"> <li>• all staff, volunteers, students and parents/guardians are informed about the policy and procedures for the management of allergens at HTK</li> <li>• parents/guardians of a child diagnosed as at risk are able to communicate with HTK staff about any changes to the child's diagnosis or medical management action plan</li> <li>• all staff, including casual, relief and visiting staff, volunteers and students are informed about, and are familiar with, all medical management action plans and the HTK risk management plan.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> All parents/guardians are provided with access to the <i>Dealing with Medical Conditions Policy</i> prior to commencing at HTK.</li> <li><input type="checkbox"/> A copy of this policy is displayed in a prominent location at HTK.</li> <li><input type="checkbox"/> Staff will meet with parents/guardians of a child diagnosed with allergens prior to the child's commencement at HTK and will develop an individual communication plan for that family.</li> <li><input type="checkbox"/> An induction process for all staff and volunteers includes information regarding the management of allergens at HTK including the location of medicine and medical management action plans, risk minimisation plans and procedures, and identification of children at risk.</li> </ul>
<p><b>Do all staff know how HTK aims to minimise the risk of a child being exposed to an allergen?</b></p>	
<p>Think about times when the child could potentially be exposed to allergens and develop appropriate strategies including identifying the person responsible for implementing them (refer to the following section for possible scenarios and strategies).</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Menus are planned in conjunction with parents/guardians of children diagnosed as at risk of anaphylaxis. <ul style="list-style-type: none"> <li>• Food for the at-risk child is prepared according to the instructions of parents/guardians to avoid the inclusion of food allergens.</li> <li>• As far as is practical, HTK's menu for all children should not contain food with ingredients such as milk, egg, peanut/nut or sesame, or other products to which children are at risk.</li> <li>• Where the label indicates that the food may contain traces of a known allergen this needs to be discussed with the parents/guardians to determine if this child can have these foods or not.</li> </ul> </li> </ul>	



- Hygiene procedures and practices are followed to minimise the risk of cross-contamination of surfaces, food utensils or containers by food allergens (refer to *Hygiene Policy* and *Food Safety Policy*).
- Consider the safest place for the at-risk child to be served and to consume food, while ensuring they are not discriminated against or socially excluded from activities.
- Develop procedures for ensuring that each at-risk child only consumes food prepared specifically for him/her.
- Do not introduce food to a child if the parents/guardians have not previously given this food to the child.
- Ensure each child enrolled at HTK washes his/her hands before eating.
- Employ teaching strategies to raise the awareness of all children about allergens and the importance of *no food sharing* at HTK.
- Bottles, other drinks, lunch boxes and all food provided by the family of the at-risk child should be clearly labelled with the child's name.

**Do relevant people know what action to take if a child has an anaphylactic episode?**

- Know what each child's medical management action plan contains and implement the procedures.
- Know:
  - who will administer the medicine and stay with the child
  - who will telephone the ambulance and the parents/guardians of the child
  - who will ensure the supervision of other children at HTK
  - who will let the ambulance officers into HTK and take them to the child.
- Ensure a completed Ambulance Victoria *AV How to Call Card* is located next to all telephone/s.



## Potential exposure scenarios and strategies

<p><b>How effective is HTK's risk minimisation plan?</b></p> <p><input type="checkbox"/> Review the risk minimisation plan of each child diagnosed as at risk of allergens with parents/guardians at least annually, but always on enrolment and after any incident or accidental exposure to allergens.</p>
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Scenario	Strategy	Who is responsible?
Food is provided by HTK and a food allergen is unable to be removed from HTK's menu (e.g. milk).	Menus are planned in conjunction with parents/guardians of children diagnosed as at risk, and food is prepared according to the instructions of parents/guardians.  Alternatively, the parents/guardians provide all food for the at-risk child.	Cook, Nominated Supervisor and parents/guardians
	Ensure separate storage of foods containing the allergen.	Approved Provider and Cook
	Cook and staff observe food handling, preparation and serving practices to minimise the risk of cross-contamination. This includes implementing good hygiene practices and effective cleaning of surfaces in the kitchen and children's eating area, food utensils and containers.	Cook, staff and volunteers
	There is a system in place to ensure the child diagnosed as at risk of allergens is served only food prepared for him/her.	Cook and staff
	A child diagnosed as at risk of allergens is served and consumes their food in a location considered to be at low risk of cross-contamination by allergens from another child's food. Ensure this location is not separate from all children and allows social inclusion at meal times.	Staff
	Children are regularly reminded of the importance of not sharing food.	Staff
	Children are closely supervised during eating.	Staff



Party or celebration	Give parents/guardians adequate notice of the event.	Approved Provider, Nominated Supervisor and educators
	Ensure safe food is provided for the child diagnosed as at risk of allergens.	Parents/guardians and staff
	Ensure the child diagnosed as at risk of allergens only eats food approved by his/her parents/guardians.	Staff
	Specify a range of foods that all parents/guardians may send for the party and note particular foods and ingredients that should not be sent.	Approved Provider and Nominated Supervisor
Protection from insect bite allergies	Specify play areas that are lowest risk to the child diagnosed as at risk and encourage him/her and peers to play in that area.	Educators
	Decrease the number of plants that attract bees or other biting insects.	Approved Provider
	Respond promptly to any instance of insect infestation. It may be appropriate to request exclusion of the child diagnosed as at risk during the period required to eradicate the insects.	Approved Provider/Nominated Supervisor
Latex allergies	Avoid the use of party balloons or latex gloves.	Staff
Cooking with children	Ensure parents/guardians of the child diagnosed as at risk of allergens are advised well in advance and included in the planning process. Parents/guardians may prefer to provide the ingredients themselves.	Approved Provider, Nominated Supervisor and educators
	Ensure activities and ingredients used are consistent with risk minimisation plans.	



**ATTACHMENT 4  
Allergy Action Plan**

**Type of Allergy** \_\_\_\_\_

*Please tick the appropriate boxes for your responses in the blank spaces where indicated.*

**Suspected trigger/s (specify if known):**

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Food _____   | <input type="checkbox"/> Insect _____                         |
| <input type="checkbox"/> Drug _____   | <input type="checkbox"/> Garden _____                         |
| <input type="checkbox"/> Grass _____  | <input type="checkbox"/> Chemicals e.g.: Plastics/Latex _____ |
| <input type="checkbox"/> Paints _____ | <input type="checkbox"/> Unknown _____                        |

**Signs/symptoms:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Hives              | <input type="checkbox"/> Tightness in throat             | <input type="checkbox"/> Persistent dizziness |
| <input type="checkbox"/> Tingling mouth     | <input type="checkbox"/> Difficult/noisy breathing       | <input type="checkbox"/> Collapse             |
| <input type="checkbox"/> Swelling of lips   | <input type="checkbox"/> Difficulty talking/hoarse voice | <input type="checkbox"/> Pale and floppy      |
| <input type="checkbox"/> Swelling of tongue | <input type="checkbox"/> Wheeze                          | <input type="checkbox"/> Vomiting             |
| <input type="checkbox"/> Swelling in throat | <input type="checkbox"/> Persistent cough                | <input type="checkbox"/> Abdominal pain       |
| <input type="checkbox"/> Others _____       |  |   |

**Actions for Risk Minimisation:**

**Event/Contact**

- Food       Celebrations \_\_\_\_\_       Other \_\_\_\_\_

**Strategy/s**

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**Medication requirements:**

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Adrenaline auto injector | <input type="checkbox"/> Antihistamine  | <input type="checkbox"/> Steroids     |
| <input type="checkbox"/> Adrenaline ampoule       | <input type="checkbox"/> Bronchodilator | <input type="checkbox"/> Other: _____ |

ASCIA Action Plan Completed

(ASCIA Action Plans have been developed as medical documents and must be completed, signed and dated by the patient's medical doctor and yearly updated).

**Additional information:**

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**ATTACHMENT 5  
Medical Communication Plan**

*\*\*\*To be kept with child's medical plans and updated as necessary\*\*\**

A communications plan must be prepared as per regulation 90(1)(iii) to ensure communication between staff, volunteers and parents is completed and updated as necessary to ensure the health, wellbeing and safety of the child.

- Relevant staff members and volunteers are informed about HTK's *Dealing with Medical Conditions Policy* and the medical management and risk minimisation plans for the child; and
- A parent of the child can communicate any changes to the medical management plan and risk minimisation plan for the child.

**Child's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Child's Group/s:** \_\_\_\_\_

STRATEGIES TO INFORM ALL STAFF / RELIEF STAFF / VOLUNTEERS / STUDENTS	
<p><b>Ensure all staff, relief staff, volunteers and students are familiar with:</b></p> <ul style="list-style-type: none"> <li>• the child with the specific health need, allergy or medical conditions</li> <li>• child's Medical and Risk Assessment Plans</li> <li>• location of Child's medication - with the Action Plan located within the Allergy Buddy Kits in the Kitchen.</li> </ul>	<p><b>How are staff notified:</b></p> <ul style="list-style-type: none"> <li>• Staff are shown and discuss the medical and risk minimisation plans.</li> </ul> <p><b>When did this occur:</b></p> <ul style="list-style-type: none"> <li>• _____ _____ _____</li> </ul> <p><b>How will relief staff/volunteers/students be notified:</b></p> <ul style="list-style-type: none"> <li>• Relief staff are notified through the Staff Communications book and also during their orientation prior to start of work. Additional time is allocated for this and a checklist is in place to ensure this is done.</li> <li>• Students/volunteers will be informed during their orientation to HTK via the Induction checklist for volunteers/students as per the Participation of Volunteers and Students Policy.</li> </ul>



STRATEGIES TO INFORM FAMILIES	
Question	Answer/Strategy
<p><b>Do families know how HTK manages medical conditions?</b></p>	<p>Upon enrolment, all families are provided details of where HTK's policies can be accessed and are encouraged to read them.</p> <p>Relevant hard copies are distributed as required.</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"> <li><input type="checkbox"/> Anaphylaxis Policy</li> <li><input type="checkbox"/> Asthma Policy</li> <li><input type="checkbox"/> Dealing with Medical Conditions Policy</li> <li><input type="checkbox"/> Administration of Medication Policy</li> </ul> <p>Date: _____</p>
<p><b>Do all parents need to be notified of any known allergens that pose a risk to the child?</b></p> <p style="text-align: center;"><b>Yes</b>                      <b>No</b></p> <p>(please circle)</p> <p>If no, no action required.</p>	<p>If yes: How will you notify all parents?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Note when and how all families were notified of strategies to minimise and manage these below:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Educator Name: \_\_\_\_\_ Educator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

HTK Staff sighted and discussed			
	Name	Position	Signature
1			
2			
3			
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