

### **Procedure - internal**

Family Day Care Medical conditions and health care needs

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#### Introduction

#### **Purpose**

Lake Macquarie Family Day Care promotes the health and well-being of all children in care.

Parents with children who have ongoing medical conditions or health care requirements need education and care services that provide for the child's ongoing special care needs and include the child in the day-to-day activities of the service.

The service needs to be aware of the child's medical needs, to ensure it has appropriately skilled and experienced staff and educators available, to safeguard the child's interests.

Educators need to be aware of each child's specific medical needs, the signs, and symptoms of impending emergency and the strategies recommended by the child's health professional to adequately manage and maintain the child's wellbeing.

#### Scope

This procedure intends to manage ongoing specific health care needs, allergy, or diagnosed medical conditions that require long-term monitoring, medication, treatment, ongoing medical review, or present a possible medical emergency.

This procedure outlines responsibilities of the service, parents and Educators to become aware of a child's medical or health care needs, developing practices to minimise risk, preparing for potential emergencies, and communicating changes.

#### **Procedures**

Step	Summary	Resources
Identify medical conditions and health care	<ul> <li>The Service will:</li> <li>1. publish the Medical Conditions procedure (service policy) on the service webpage to be readily available to families (Regulation 91)</li> </ul>	Lake Macquarie FDC Procedures
needs	maintain supplied records of child medical conditions/health care needs in the child's electronic documents folder and their software enrolment	
	Parents will: 3. inform the service of the details of any specific health care need, allergy or diagnosed medical condition their child has (Regulation 90.1, 162)	Lake Macquarie FDC Forms – Medical Condition /Health Care Management, Risk Minimisation
	<ul> <li>4. provide a management plan, including instructions to follow in the event of an incident or emergency if relevant to their child's specific health care needs (Regulation 90.1, 162.1d)</li> <li>prior to commencing care, or</li> <li>as soon as practicable after diagnosis of an ongoing medical condition, and</li> <li>when the child has a review with their medical practitioner / healthcare professional</li> </ul>	and Communication Plan



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	<ol> <li>have the child's medical plan prepared or endorsed by the child's medical practitioner or relevant health professional when possible, or when requested by the service</li> </ol>	
Plan to	The Service will:	
minimise risk	6. review the child's medical plans and discuss the child's needs with educators, to ensure educators are aware of the child's needs, agree to the placement, and have suitable skills, training and experience to adequately care for the child and respond to any relevant emergency	
	7. make a copy of the child's management plans available to staff and the educator selected by the parent (Regulation 90).	
	<ul> <li>Educators will:</li> <li>8. discuss the management plan with the parent and document a Risk Minimisation and Communication Plan;</li> <li>- prior to the child commencing care, or</li> <li>- as soon as practicable after diagnosis of an ongoing medical condition, and</li> <li>- at least annually</li> </ul>	Lake Macquarie FDC Forms – Medical Condition/Health Care Management, Risk Minimisation and
	<ol> <li>ensure management and relevant emergency action plans are readily accessible, while maintaining confidentiality of the child</li> </ol>	Communication Plan
	10. advise authorised relief or alternate educators about a child's medical management plans, medication requirements, and any emergency action plans (Regulation 90.1)	
	11. rehearse identified potential medical emergencies every 3 months in accordance with requirements for emergency rehearsals (Regulation 97.3)	Lake Macquarie FDC Forms – Emergency Rehearsal Record
	12. only allow a child to attend care if any necessary medication has been supplied by the parent (Regulation 90.1)	
	13. follow a child's action plan in the event of an incident or emergency (Regulation 90.1)	
	Parents will:	
	14. develop a risk minimisation and communication plan with the child's educator to support the child's safe inclusion (regulation 90.1.ciii)	
	15. ensure the names and contact information for the persons nominated as emergency contacts are current at all times, and that emergency contacts are familiar with the child's needs and condition.	
	16. supply necessary medication to the educator so it is	

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	available at all times (Regulation 90.1)	
Ongoing	Service will:	
communication	17. discuss the child's participation in the program, and review the currency of children's management plans and risk minimisation and communication plans, from time to time during regular coordinator visits, to support educators	
	Educators will:  18. record ongoing communications with the child's parent regarding the child's needs and any emergency action strategies recommended by the child's health professional (Regulation 90)	
	<ul> <li>19. update the risk minimisation plan at least annually, and as necessary</li> <li>following review with child's medical practitioner if treatment, medication, management requirements change</li> <li>if changes or additional strategies are identified following review of an incident or emergency</li> </ul>	
	Parents will:  20. inform their educator any time the child's needs, treatment or medication plan alters. (Regulation 90.1)	
Inclusion and support	Service will: 21. provide information about resources and support for managing specific medical conditions while respecting the privacy of families and children	
	22. refer educator to inclusion support agency support, with parent consent, if appropriate	NSW/ACT Inclusion Agency
	23. offer support and debrief to educators if there is an incident requiring emergency medical treatment	
	Educators will:  24. include information and conversations about various or relevant medical conditions in educational programs, to help children understand about the needs of others and encourage caring, acceptance and inclusion	Eg, Schooling and children's education and care - Allergyfacts.org.au

#### **Review and evaluation**

This procedure will be reviewed at least every 3 years, or as prompted by changes to applicable legislative requirements or quality recommendations by recognised authorities.

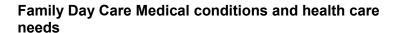
Implementation of procedures is reviewed during regular contact visits staff have with registered Educators.



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Families, educators and staff are essential stakeholders in reviewing procedures. Feedback, input and situations are considered to inform revision and amendments to processes. The NSW/ACT Inclusion Agency, KU Children's Services, has been consulted in formulating this procedure. Practice guidelines from ACECQA and Community Early Learning Australia have also been considered.

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## WHS Management System Information

#### **Record Keeping Requirements**

Records	associated	with, a	nd c	generated in	compliance	with	this	document	include:-

- •
- •

All records will be managed in accordance with **WHS Module 10 - Records**.

#### **Training Requirements**

Specific training required to carry out the requirements of this document includes:-

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Training requirements will be managed in accordance with WHS Module 12 - Training.

#### **Auditing Requirements**

Auditing of this process will be managed in accordance with **WHS Module 11 – Auditing**.

#### **Corrective Actions**

Corrective actions are to be managed in accordance with *WHS Module 09 – Corrective Actions* whenever it is identified that the requirements of this document and its references are not being met.

#### **Review**

This document will be reviewed in accordance with *WHS Module 04 – Document Control* and whenever there is a relevant change to applicable legislation, industry standards, Codes of Practice, the WHS Management System, or the process.

#### Responsibilities, Authorities & Accountabilities

Responsibility, authority, and accountabilities for all positions within Council are outlined in *WHS Module 01 – WHS Responsibilities* and in the WHS Responsibilities, Authorities and Accountabilities (RAA) Table associated with *WHS Module 01*. The RAA table includes responsibility, authority, and accountabilities for employees, managers, supervisors, contractors, visitors, and persons with specialist roles within the organisation.

In addition to **WHS Module 01 – WHS Responsibilities**, the following positions have responsibilities, authorities and accountabilities associated with this document:

Position	Responsibilities, Authorities & Accountabilities

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## **Controlled Document Information**

#### **Authorisation Details**

Folder No:	F2004/12276	TRIM Record No:	D10674057		
Audience:	Departmental - Family Day Care Staff Educators and Stakeholders				
Department:	Community Partnerships	mmunity Partnerships Officer: Service Manager Family Day Care Kim Hartmann			
Key focus area(s):					
Review Timeframe: Max < 4 years	4 years Next Scheduled Review Date: 17 May 2026				
Authorisation:	Manager Community Partnerships - Andrew Bryant - 17 May 2022				
Authorisation Date:	17 May 2022				

#### Related Document Information, Standards & References

Related Legislation:	The National Quality Framework	(Relationship/Context)
Related Policies:	Child Registration Procedure	(Relationship/Context)
Related Procedures, Guidelines, Forms, WHS Modules/PCD's, Risk Assessments, Work Method Statements:	Medical Management Plan Risk Minimisation and Communication Plan	(Relationship/Context)
Standards, COP's & Other References	(Standard, COP or Other References)	(Relationship/Context)

#### **Definitions**

Term / Abbreviation	Definition
Nominated Supervisor	Nominated Supervisor – responsible (along with the Approved Provider) for ensuring the service is following the Law and the Regulations, Certified Supervisor – a person with a supervisor certificate placed in day to day charge of an education and care service.
Educator	<ul> <li>(a) a person actually involved in educating, minding or caring for children at his or her residence or venue and whose name appears on a current Lake Macquarie Family Day Care Register of Educators (a primary educator); and</li> <li>(b) a person whose name appears on a current Lake Macquarie Family Day Care Register of Educators and who is engaged as a relief educator to educate, mind or care for children in the residence or venue of a primary educator</li> <li>(c) a person whose name appears on a current Lake Macquarie Family Day Care Register of Educators and who is engaged as an educator assistant to educate, mind or care for children in the residence or venue of a primary educator for no more than4 hours</li> </ul>
Chronic Illness	any condition requiring long-term medical treatment, administration of regular long-term medication or regular medical review (eg. asthma, anaphylaxis, epilepsy, diabetes, severe allergy, Attention Deficit Hyperactivity Disorder, etc)
Long-term	where a single course of treatment or medication extends, or a single medical condition exists, for a period in excess of two (2) months
Medical condition	A 'medical condition' is a condition that has been diagnosed by a registered medical practitioner (a person registered under the Health Practitioner Regulation National

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	Law to practise in the medical profession, other than as a student). The Australian Health Practitioner Regulation Agency keeps national registers of practitioners on its website at <a href="https://www.ahpra.gov.au">www.ahpra.gov.au</a> . (ACECQA Guide to the National quality Standards).		
Medication	any substance or preparation prescribed by a medical practitioner, homeopath, naturopath, herbalist, or obtained from a pharmacy or other outlet to prevent or manage a child's illness or treat an allergy or other condition. Medication includes substances and preparations used externally, internally and invasive medication or procedures, (eg: suppositories, pessaries, injections, catheter or intravenous drip medication)		
Parent	The parent of a child registered for care with Lake Macquarie Family Day Care and includes:		
	(a) guardian of the child, and/or		
	(b) a person who has the legal custody of the child.		
Regulatory requirement	State and Federal government regulations that are relevant to the provision of Family Day Care services in NSW		
Service	an education and care service operated by an educator whose name appears on a current register of educators for Lake Macquarie Family Day Care		
Service	Lake Macquarie Family Day Care		
Staff	an employee or employees of Lake Macquarie City Council for service within Lake Macquarie Family Day Care		
The National Quality Framework	Includes:		
	a National Legislative Framework that consists of the Education and Care Services National Law Act 2010 and Education and Care Services National Regulations 2011		
	a National Quality Standard		
	an assessment and rating system		
	a Regulatory Authority in each State and Territory who will have primary responsibility for the approval, monitoring and quality assessment of services in their jurisdiction in accordance with the national legislative framework and in relation to the National Quality Standard.		
	The Australian Children's Education and Care Quality Authority (ACECQA)		

#### Consultation (update for each version created)

	Family Day Care staff, Educators and Stakeholders
Positions, Meetings:	KU Children's Services – NSW/ACT Inclusion Agency

### **Version History**

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Version No	Date Changed	Modified By	Details and Comments
2	08/1/2009	J. Wade	Updated references
3	05/10/2010	J. Morgan	Carer title changed to educator to reflect the Early Years Learning Framework terminology
5	09/12/2011	S. Vickers	Update reference of Children's Services Regulations 2004 & NCAC to The National Quality Framework, home to residence or venue, childcare to education and care, added definition of The National Quality Framework, update definition of Authorised Supervisor
6	02/08/2013	J Morgan	Include reference to Child Registration Procedure and reviewed timeframe

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#### from 18 months to 24 months, updated scheme to service 24/06/2015 J Morgan Added 1 (b) to include reference to children already enrolled in the service who develop a medical condition 8 14/08/2018 J Morgan Included reference to Risk Minimisation and Communication plan 13/01/2022 Reformatted to specify notification, planning to minimise risk, ongoing K Hartmann communication and inclusion support. Added specific responsibilities of the education and care service regulation. Providing policy to parents (if child has medical condition) Communicating child's needs to all involved in their care (relief/alternate educators) Rehearsing identified potential medical emergencies Only providing care if necessary medication is supplied and available Having to follow a child's action plan in the event of an emergency Added practices to support inclusion and support the educator. Added definition of 'medical condition' (ACECQA Guide to the NQF) 10 17/05/2022 K Hartmann added new point 2. to indicate where records of medical conditions are kept (Department of Education 'Roadshow' advice 16/5/22).

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