

Montessori Works

Background

Childcare legislation recognises that children with existing medical conditions attend early education and care services. In order to uphold the safety and wellbeing of these children at all times, it requires educators to be trained to respond appropriately to conditions such as asthma, anaphylaxis and diabetes. Legislation also requires that educators must know the precise response expected of them for each individual child as detailed in a current Medical Management Plan for that child provided by the child's parent(s).

Policy statement

This Policy details how the Service ensures its educators are trained to respond appropriately to conditions such as asthma, anaphylaxis and diabetes. It also details how educators know the precise response expected of them for each individual child as detailed by the child's doctor.

Strategies and practices

- The Service makes every endeavour to maintain inclusive enrolment practices. However, no child will be enrolled in the Service until the educators have completed appropriate training from a credible organisation so that they have been provided with the knowledge and skills required to meet that child's specific, identified medical needs.
- At enrolment, parents are required to complete an enrolment form for their child. The form includes provision for parents to detail any medical conditions or specific health care need their child experiences (e.g. asthma, diagnosed risk of anaphylaxis, diabetes, epilepsy). In addition, the Nominated Supervisor purposefully directs parents' attention to this section of the enrolment form, and emphasises the need for accurate and complete information for the Service to effectively meet the child's medical needs. Refer to the Service's *Enrolment and Orientation Policy*.
- Whenever a child who has been diagnosed at risk of anaphylaxis is enrolled in the Service, a notice to this effect will be prominently displayed in the entrance.
- Parents are asked to provide the Service with any Medical Management Plan (e.g. <u>ASCIA Action Plan for Anaphylaxis (Personal)</u>, <u>Asthma Care Plan for Education and Care Services</u>) from the child's doctor. The Plan should include a photograph of the child, details of the actions to take in the event of an attack (including administering medication), written permission for the Service to implement the Plan as required, and the contact details of the doctor who signed the Plan.
- The Service uses the Medical Management Plan provided to develop, in collaboration with the parents, a <u>Medical Conditions Risk Minimisation and Communications Plan</u> for their child. The <u>Medical Conditions Risk Minimisation and Communications Plan</u> identifies the possible risks to

the child's specific condition or health care need while at the Service (e.g. exposure to known allergens) so that those risks can be minimised. Further it ensures communication processes are in place so that, at all times, Service educators have the complete, correct and up-to-date information necessary to meet the child's health needs. The Service is guided by templates from recognised authorities such as Anaphylaxis Australia, Asthma Australia, and the Australian Society for Clinical Immunology and Allergy when developing the Medical Conditions Risk Minimisation and Communications Plan.

- The Service requires parents to provide any updates to their child's Medical Management Plan (e.g. at any time the child has been reassessed by the doctor, the child's medication has been altered or discontinued, new photograph), and at other times when the Nominated Supervisor requests updates as agreed in the Medical Conditions Risk Minimisation and Communications Plan.
- A copy of the Medical Management Plan and the <u>Medical Conditions Risk Minimisation and Communications Plan</u> is filed with the child's enrolment form. A copy of the Medical Management Plan is also kept where the child's medication is stored.
- With parental consent, copies of each child's Medical Management Plan are displayed in strategic places throughout the Service, including food preparation and eating areas. With the child's right to privacy in mind, the plans are not accessible to visitors or other families. A copy of the Medical Management Plan is taken on any excursion the child attends.
- All parents are handed a copy of this Policy when they enrol their child. In addition, if the parents have advised that their child has a specific health care need, the Nominated Supervisor discusses the Policy in detail with them, and gives them the opportunity to ask any questions necessary to ensure they understand the Policy.
- All medical details held by the Service are kept confidential. Refer to the Service's Privacy and Confidentiality Policy.
- The Service takes every precaution to ensure that no child who has been prescribed medication in relation to a specific health care need, allergy or relevant medical condition attends the Service without that medication.
- As stated on the Administration of Medication Policy, medication may be administered to a child without authorisation in the case of anaphylaxis or asthma emergency. When medication has been administered, the Nominated Supervisor ensures that the child's parent(s) and emergency services are notified as soon as practicable. If the child is under a Medical Management Plan, the parent will also be advised to consult their doctor with a view to updating that Plan.
- Whenever a child diagnosed as at risk of anaphylaxis is enrolled in the Service, a notice is displayed prominently in the main entrance of the Service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service.

The Nominated Supervisor provides all staff, educators, students and volunteers commencing at the Service with a copy of this Policy and discusses it in detail with them. They are then given the opportunity to clarify their understanding of the Policy. The Nominated Supervisor also discusses medical conditions such as asthma, diabetes, and anaphylaxis with them, and gives them written information on each topic – Asthma Basic Facts 2020; Understanding Diabetes Type 1 Factsheet; Understanding Diabetes Type 2 Factsheet.

- The Nominated Supervisor communicates the specific health needs of each child to all staff/educators and shows them where copies of the Medical Management Plan and any medication for the child are kept. They are given the opportunity to ask questions to clarify that they fully understand the child's medical needs and their responsibilities attending to those needs, particularly the importance of strictly adhering to the Medical Management Plan. The Nominated Supervisor ensures that any updates are promptly conveyed to all staff/educators.
- The Nominated Supervisor provides all students and volunteers with an orientation before they commence at the Service. The orientation includes information about specific health care needs, where Medical Management Plans are displayed, and where the children's medication is kept. The Nominated Supervisor stresses the importance of students and volunteers alerting Service educators immediately if they have any concerns regarding the health and wellbeing of any child.
- The Australasian Society of Clinical Immunology and Allergy (ASCIA) has made available information posters. Copies of these posters are displayed in strategic positions throughout the Service including the indoor and outdoor play spaces to remind educators of the procedures taught in their first aid training.
- The Asthma Foundation of Australia has made available an information poster <u>Kids' First Aid for Asthma Chart</u>. Copies of this Chart are displayed in strategic positions throughout the Service, including the indoor and outdoor play spaces, to remind educators of the procedures taught in their first aid training.
- Before a child with diabetes is enrolled in the Service, the Nominated Supervisor will contact Diabetes New South Wales to seek advice, arrange specialised training for educators, and obtain detailed material and posters. At that time, copies of any poster will be displayed in strategic positions throughout the Service including the indoor and outdoor play spaces to remind educators of the procedures taught to them in this training.
- The Nominated Supervisor will ensure that any Medical Management Plan provided for a child diagnosed with diabetes specifies whether the child has Type 1 or Type 2 diabetes, and provides explicit directions on how to meet the child's medical needs such as variations in glucose levels (e.g. fast acting sugar foods followed by food with complex carbohydrates, fat, and protein). A Plan similar and equal to the Diabetes Action Plan Injection is expected. Parents will be required to provide all hypo treatment foods packaged in serve size bags or containers.
- The contact numbers of emergency Service are displayed beside all telephone outlets in the Service.

- All EpiPens and asthma medication are stored readily accessible to all staff (including relief staff), but inaccessible to children. Refer to the Service's Administration of Medication Policy.
- First Aid kits are located where educators can readily access them in an emergency. Refer to the Service's *Incident, Injury, Trauma and Illness Policy*.
- The Service's six-week rotating menu is prominently displayed outside the kitchen and can also be accessed by parents digitally. This menu lists every food item contained in the meals served and is cognisant of both the disclosed and undisclosed sources of food allergens on food labels.
- The Service is a nut free zone, and the <u>Nut Free Zone Poster</u> is prominently displayed in the entrance. The Nominated Supervisor, staff and educators take all reasonable steps to ensure parents do not bring food into the Service other than the hypo treatment foods packaged in serve size bags or containers for children diagnosed with diabetes.
- When each child arrives at the Service, an educator accompanies that child to the bathroom to assist them to wash their hands in accordance with the <u>Hand Washing Poster</u> displayed above each hand basin. Educators also ensure all children wash their hands before and after eating.
- Educators ensure that tables and bench tops are cleaned effectively before and after the children eat. When the food is delivered to the rooms, educators ensure the child at risk of anaphylaxis only eats food that has been prepared according to the parents' instructions which have been detailed on an <u>Individual Child's Medical Conditions Placement</u>.
- Educators intentionally teach children about food allergies, and especially encourage them to understand, accept and include children with allergies. They also explain why it is important not to share food.
- The Service accesses information and resources on medical conditions and their management from recognised authorities, and provides this information to parents, educators, students and volunteers.
- Health and safety are regular items on team meeting agendas. The topics of common allergies
 and medical conditions experienced by young children and how to identify and respond to them
 are regularly discussed during these meetings.
- The Service reviews its health and safety practices regularly as part of its Quality Improvement Plan. Refer to the Service's Educator Professionalism and Ethics Policy.
- The Service maintains an up-to-date record of the First Aid and CPR status of all educators, together with their anaphylaxis and asthma management training, in its <u>Staff Summary Sheet</u>. The required number of educators with these qualifications and positioned near children meet regulatory requirements at all times, including on excursions.
- Educators intentionally teach young children about health and safety. This includes making children aware that they and/or their friends may need to take special care about some matters (e.g. the type of food they eat, the brand of sunscreen they use).

- In the event of an incident relating to a child under a Medical Management Plan, that Plan must be followed explicitly. An Incident, Injury and Trauma Record is to be completed.
- At this time, the Service has no children who administer their own medication. However, should a specific need arise the Service's practices will be adjusted to meet that need.

Additional safe practices for babies

No additional practices are required beyond those specified in this policy for all children.

Responsibilities of parents

- To inform the Service of any updates to their child's Medical Management Plan or if the child develops a Medical condition while enrolled at the service the parents provide written information from a doctor outlining the medical condition so that Nominated Supervisor can develop communication and risk minimisation plans for the child and family.
- To ensure the child's medication is brought to the Service every time the child attends the Service.
- To ensure that their child's specific requirements, such as all hypo treatment foods packaged in serve size bags or containers, are brought to the Service whenever their child attends.

Procedure and forms

- Anaphylaxis Parent Factsheet 2018
- ASCIA Action Plan for Anaphylaxis (RED) 2021 EpiPen®
- ASCIA Action Plan for Anaphylaxis (RED) 2021 Generic
- ASCIA Action Plan for Allergic Reactions (GREEN) 2021
- ASCIA First Aid Plan for Anaphylaxis (ORANGE) 2021 EpiPen®
- ASCIA First Aid Plan for Anaphylaxis (ORANGE) 2021 Generic.
- Asthma Basic Facts 2020
- Asthma First Aid Asthma Australia*
- Asthma Care Plan for Education and Care Services*
- Diabetes Action Plan Injection Food Safety Program
- Incident, Injury and Trauma Record
- Individual Child's Medical Conditions Placemat
- Nut Free Zone Poster
- Staff Summary Sheet
- Understanding Diabetes Type 1 Factsheet
- Understanding Diabetes Type 2 Factsheet
- Diabetes Action Plan Injection

Links to other policies

- Administration of Medication Policy
- Educator Professionalism and Ethics Policy
- Enrolment and Orientation Policy
- Food Preparation, Storage and Handling Policy

- Incident, Injury, Trauma and Illness Policy
- Nutrition, Food and Beverage Policy
- Students, Volunteers and Visitors Policy

Links Education and Care Service National Regulations 2011, National Quality Standard 2011

Regulation	85	Incident, injury, trauma and illness policies and procedures			
Regulation	86	Notification to parents of incident, injury, trauma and illness			
Regulation	87	Incident, injury, trauma and illness record			
Regulation	89	First aid kits			
Regulation	90	Medical conditions policy			
Regulation	91	Medical conditions policy provided to parents			
Regulation	92	Medication record			
Regulation	93	Administration of medication			
Regulation	94	Exception to authorisation requirement—anaphylaxis or asthma emergency			
Regulation	95	Procedure for administration of medication			
Regulation	96	Self-administration of medication			
Regulation	136	First aid qualifications			
Regulation	168	Education and care services must have policies and procedures			
Regulation	173	Prescribed information to be displayed			
Regulation	176	Time to notify certain information to Regulatory Authority			
Regulation	246	Anaphylaxis training			
Regulation	247	Asthma management training			

NQS	QA2.1.1	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest and relaxation
NQS	QA2.1.2	Effective illness and injury management and hygiene practices are promoted and implemented
NQS	QA2.1.3	Healthy eating and physical activity are promoted and appropriate for each child
NQS	QA2.2.1	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard
NQS	QA2.2.2	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented

Sources

- Asthma Australia. Asthma Basic Facts 2020. https://asthma.org.au/wp-content/uploads/2020/05/AABF2020-Asthma-Basic-Facts-DL v6 digital.pdf
- Asthma Australia. Asthma Care Plan for Education and Care Services. https://asthma.org.au/wp-content/uploads/About Asthma/Schools/AACPED2018-Care-Plan-for-Schools-A4 2019.pdf
- Australian Society of Clinical Immunology and Allergy. Fact Sheet for Parents Anaphylaxis in English and Other Languages. https://www.allergy.org.au/hp/anaphylaxis/fact-sheet-for-parents-anaphylaxis
- Allergy ASCIA Action Plans https://www.allergy.org.au/hp/ascia-plans-action-and-treatment
- Australian Society for Clinical Immunology and Allergy. (n.d.). ASIA Action plan for anaphylaxis.
 http://www.allergy.org.au/health-professionals/anaphylaxis-resources/ascia-action-plan-for-anaphylaxis
- As1diabetes https://as1diabetes.com.au/schools/diabetes-plans/ Education and Care Services
 National Regulations 2011

- Guide to the National Quality Standard 2011
- National Asthma Council Australia. Kids' First Aid for Asthma Chart.
 https://www.nationalasthma.org.au/living-with-asthma/resources/patients-carers/charts/kids-first-aid-for-asthma-chart
- National Diabetes Services Scheme. Understanding Diabetes. Type 1 Factsheet.
 https://www.ndss.com.au/wp-content/uploads/fact-sheets/fact-sheet-understanding-type1-diabetes.pdf
- National Diabetes Services Scheme. Understanding Diabetes Type 2 Factsheet.
 https://www.ndss.com.au/about-diabetes/resources/find-a-resource/understanding-type-1-diabetes-fact-sheet/

Further reading and useful websites (Consistent with the approach of the National Quality Framework, the following references have prioritised efficacy and appropriateness to inform best practice, and legislative compliance over state or territory preferences.)

- Allergy & Anaphylaxis Australia http://www.allergyfacts.org.au/
- Anaphylaxis Australia. What is anaphylaxis? https://www.allergyfacts.org.au/allergy-anaphylaxis/what-is-anaphylaxis
- Asthma Australia https://www.asthmaaustralia.org.au/ accessed
- Asthma Australia. (2019). Asthma Australia Resources.
 https://www.asthmaaustralia.org.au/qld/about-asthma/resources
- Asthma Australia. *Asthma care plan for education and care services*. https://asthma.org.au/wp-content/uploads/About-Asthma/Schools/AACPED2018-Care-Plan-for-Schools-A4 2019.pdf
- Australian Society for Clinical Immunology and Allergy (ASCIA) http://www.allergy.org.au/
- Diabetes NSW & ACT http://diabetesnsw.com.au/

Policy review

The Service encourages staff and parents to be actively involved in the annual review of each of its policies and procedures. In addition, the Service will accommodate any new legislative changes as they occur and any issues identified as part the Service's commitment to quality improvement. The Service consults with relevant recognised authorities as part of the annual review to ensure the policy contents are consistent with current research and contemporary views on best practice.

Version Control

Version	Date Reviewed	Approved By	Comments/Amendments	Next Review Date
1	8 January 2018	Dr Brenda Abbey (Author)	Updated to changed NQF	
			requirements 1 February 2018.	
			Service to modify policies to its specific needs.	
2	14 Ιουμου 2010	Dr. Branda Abbay (Author)	Updated references.	
2	14 January 2019	Dr Brenda Abbey (Author)	opdated references.	
3	25 January 2020	Dr Brenda Abbey (Author)	Updated references.	
4	8 August 2020	Dr Brenda Abbey (Author)	Included Service's intent re	
			enrolling children with identified	
			medical conditions, sign to be	
			displayed Regulation 172(2)(f)(i),	
			additional information about	
			diabetes. Added to and updated	
			references.	
5	14 August 2020	Dr Brenda Abbey (Author)	Included: information about the	
			asthma, diabetes and anaphylaxis;	

			information regarding the signs/symptoms that a child is having a medical emergency related to their medical condition or the first aid management relating to this (for asthma and anaphylaxis); notice that a child who is diagnosed as at risk of anaphylaxis is enrolled at the service	
6	29 November 2020	Dr Brenda Abbey (Author)	Updated references.	
7	30 December 2020	Dr Brenda Abbey (Author)	Updated references.	
8	May 2022	ACA NSW	Updated references Updated action plan dates	
9	August 2022	Susan Chahwan	Included Medical conditions if they arise during enrolment and the procedure parents are to follow.	