

Preschool dealing with medical conditions in children procedure

Associated National Quality Standards	Education and Care Services National Law or Regulation	Associated department policy, procedure or guideline
2.1	Regulation 90	Leading and operating department preschool guidelines
2.2	Regulation 91	
	Regulation 92	Student health in NSW schools: A summary and consolidation of policy
	Regulation 93	
	Regulation 94	Allergy and Anaphylaxis Management within the Curriculum P-12
	Regulation 95	
Pre-reading and reference documents		
Australasian Society of Clinical Immunology and Allergy (ASCIA) ASCIA Guidelines for the prevention of anaphylaxis in schools ASCIA Risk management strategies for schools, preschools and childcare services National Asthma Council Australia Epilepsy Australia Diabetes Australia Individual Healthcare Plan cover sheet		
Staff roles and responsibilities		
School principal	<p>The principal as Nominated Supervisor, Educational Leader and Responsible Person holds primary responsibility for the preschool.</p> <p>The principal is responsible for ensuring:</p> <ul style="list-style-type: none"> the preschool is compliant with legislative standards related to this procedure at all times all staff involved in the preschool are familiar with and implement 	

	<p>this procedure</p> <ul style="list-style-type: none"> all procedures are current and reviewed as part of a continuous cycle of self- assessment.
Preschool supervisor	<p>The preschool supervisor supports the principal in their role and is responsible for leading the review of this procedure through a process of self-assessment and critical reflection. This includes:</p> <ul style="list-style-type: none"> analysing complaints, incidents or issues and what the implications are for the updates to this procedure reflecting on how this procedure is informed by relevant recognised authorities planning and discussing ways to engage with families and communities, including how changes are communicated developing strategies to induct all staff when procedures are updated to ensure practice is embedded.
Preschool educators	<p>The preschool educators are responsible for working with leadership to ensure:</p> <ul style="list-style-type: none"> all staff in the preschool and daily practices comply with this procedure storing this procedure in the preschool, and making it accessible to all staff, families, visitors and volunteers being actively involved in the review of this procedure, as required, or at least annually ensuring the details of this procedure's review are documented.
Procedure	
Individual health care plans	<ul style="list-style-type: none"> The preschool enrolment form requires the parent or carer to document relevant medical information. This information is further discussed with families at their interview prior to starting preschool. Further meetings are arranged as required. Parents are also informed to tell us when information changes, so relevant plans can be updated to provide the best care for their child. These changes will be recorded in the child's medical communication plan. An individual health care plan will be developed for any child with a medical condition diagnosed by a registered medical practitioner. This may include, but is not exclusive to: <ul style="list-style-type: none"> a child diagnosed with asthma, diabetes, epilepsy or a food

	<p>or insect allergy</p> <ul style="list-style-type: none"> ○ a child at risk of anaphylaxis ○ a child who requires the administration of health care procedures. <p>The DOE Individual Health Care Plan template is used. The preschool teacher consults with the family to develop an individual health care plan in consultation with the preschool supervisor and learning support team.</p> <ul style="list-style-type: none"> • In addition, the following documentation will be developed and collated as an attachment to the health care plan: <ul style="list-style-type: none"> ○ The family must provide an emergency medical management or action plan for their child. This must be developed, dated and signed or stamped by a medical practitioner. If the child is at risk of anaphylaxis, this will generally be the <i>ASCIA Action Plan for Anaphylaxis (Red)</i>. ○ A risk minimisation plan for the child must be developed in consultation with their family. This should include information related to potential triggers for the child and how risks will be minimised in the preschool environment. The parent or carer's signature must be included on the plan as verification that they were consulted. ○ A communication plan must be developed to document: <ul style="list-style-type: none"> - how all staff and volunteers will be made aware of the child's needs - that all staff are able to identify the child - that all staff are able to locate the child's management plan and medication - how the family will inform the preschool of any changes in the child's management, medication, or the risks identified on their risk minimisation plan - record any communication between the family and preschool around the child's condition. ○ The family must be given a copy of this procedure and the <i>Student Health in NSW Public Schools: A summary and consolidation of policy</i> • The child cannot commence preschool until the family supplies their emergency medication.
Asthma	<ul style="list-style-type: none"> • Asthma is a medical condition that affects the airways. From time to time, people with asthma find it harder to breathe in and out, because the airways in their lungs become narrower.

	<ul style="list-style-type: none"> • In developing the risk management plan for children with asthma, triggers that will be considered are smoke, colds and flu, exercise and allergens in the air. The plan will note how the child's relevant triggers will be minimised in the preschool environment. • The most common symptoms of asthma are: <ul style="list-style-type: none"> ◦ wheezing – a high-pitched sound coming from the chest while breathing ◦ a feeling of not being able to get enough air or being short of breath ◦ a feeling of tightness in the chest ◦ coughing. • If a child known to suffer asthma has a flare – up, their emergency action plan will be applied. • If a child not known to have asthma has a flare – up, the preschool's general use reliever medication will be administered, following The Asthma Care Plan for Education and Care Services. Parent / carer authorisation is not required for this.
Diabetes	<ul style="list-style-type: none"> • Diabetes is a serious complex condition which can affect the entire body, requiring daily self - care. When someone has diabetes, their body can't maintain healthy levels of glucose in the blood. • The signs and symptoms of low blood sugar include the child presenting pale, hungry, sweating, weak, confused and/or aggressive. • The signs and symptoms of high blood sugar include thirst, need to urinate, hot dry skin, smell of acetone on breath. • How a child's diabetes will be managed and supported at preschool will depend on the type of diabetes they have. An extensive health care plan, including an emergency action plan, will be in place before they commence preschool.
Epilepsy	<ul style="list-style-type: none"> • Epilepsy is a disorder of brain function that takes the form of recurring convulsive or non-convulsive seizures. • Seizures can be subtle, causing momentary lapses of consciousness, or more obvious, causing sudden loss of body control. • If a child known to suffer epilepsy has a seizure, apply their individual emergency management plan. • If a child not known to suffer epilepsy suffers a seizure, follow the instructions on the Epilepsy Australia seizure first aid poster
Anaphylaxis	<ul style="list-style-type: none"> • Anaphylaxis is a severe, life-threatening allergic reaction and is a medical emergency. If a child is considered as suffering from anaphylaxis, an ambulance will be called immediately. • Anaphylaxis occurs after exposure to an allergen (usually to foods, insects or medicines), to which a person is allergic. Not all

	<p>people with allergies are at risk of anaphylaxis.</p> <ul style="list-style-type: none"> • Signs of mild or moderate allergic reaction are swelling of the lips, face, eyes, a tingling mouth, hives or welts, abdominal pain or vomiting. • Signs of a severe allergic reaction (anaphylaxis) are difficult/noisy breathing, swelling of tongue, swelling / tightness in throat, wheeze or persistent cough, difficulty talking and/or hoarse voice, persistent dizziness or collapse, pale and floppy. • If a preschool child known to be at risk of anaphylaxis suffers anaphylaxis, their emergency action plan will be applied and their emergency medication administered. • If a child not known to be at risk of anaphylaxis, is suffering anaphylaxis, the preschool's general - use EpiPen Junior will be administered, following the instructions on the ASCLIA First Aid Plan for Anaphylaxis (ORANGE) EpiPen. Parent / carer authorisation is not required for this. • A risk minimisation plan will be developed for all children with allergies or anaphylaxis.
Administration of medication	<ul style="list-style-type: none"> • Before administering medication to a child, a staff member will have completed the department's <i>Administration of Medication in Schools e-Safety e-Learning course</i>. • On arrival at preschool, the parent or carer hands the child's medication to a staff member for safe storage. • All non-emergency medication is stored in the red locked cupboard above the adult craft sink, or locked container in the refrigerator (if refrigeration is required), out of reach of children. • Medication will only be given to a child if it is in its original packaging or container with a pharmacy label stating the child's name, dosage instructions and a non-expired use-by date. • If families require non-prescription medication (such as nasal spray, creams, etc.) to be administered at preschool, this needs to be accompanied by a letter from the doctor explaining that the child requires this medication. • The parent or carer completes the first section of the medication record, documenting dosage and administration details and authorising the medication to be administered to their child. • When a staff member administers medication to a child, they record the details on the medication record, with another member of staff witnessing that the medication was administered as prescribed. This is to be made available to the family for verification when they collect their child. These records are stored in a folder in

	<p>a locked cabinet in the preschool office.</p> <ul style="list-style-type: none"> • The expiry dates of children's individual medication kept in the preschool will be monitored regularly and families asked to replace them before they expire. Preschool educators will use the Medication Expiration Checklist once a term. They will also check the medication's expiration date whenever they administer it. Families will be alerted if their medication expires that term in advance so they have time to replace it.
Emergency medication	<ul style="list-style-type: none"> • Emergency medications (EpiPen Jnr., Ventolin) are inaccessible to children, but not locked away so they are readily available if needed. These types of medications for individual children are stored in the individual medication backpack. A spare EpiPen Jr and EpiPen is located in the emergency backpack which can be accessed from both the indoor and outdoor environments. Spare asthma puffers are located in each first aid kit as well as in the emergency backpack. • Emergency backpack and individual medication backpack may be relocated temporarily if needed to ensure accessibility at all times. • Individual emergency medication will be stored with a copy of the child's emergency management plan. • In any medical emergency an ambulance will be called immediately. The preschool will call the ambulance and alert the office that this has occurred. • In an anaphylaxis or asthma emergency situation, preschool educators will administer emergency medication (EpiPen Jr or Ventolin) to a child who requires it. Parent / carer authorisation is not required for this. An ambulance will be called if an EpiPen is given, or the child is not responding to the first dose of Ventolin. • The principal and parent will be notified of any emergency medication administered. • If an ambulance is called: <ul style="list-style-type: none"> ○ the principal will be notified ○ the child's parent or carer will be notified ○ a notification will be made to Early Learning (phone 1300 083 698) within 24 hours.

Record of procedure's review
Date of review and who was involved
19/7/23 preschool team, whole school staff team, children, and families
Key changes made and reason/s why
Clarified where individual emergency medication is stored.
Record of communication of significant changes to relevant stakeholders
Permanent school staff will be alerted to changes during next school staff meeting. Casual teachers will be alerted to read local procedures folder on next commencement day of work with staff alerting them to changes.
Date of review and who was involved
20/7/22 preschool team, whole school staff team, children, and families
Key changes made and reason/s why
Clarified that an ambulance needs to be called if an EpiPen is administered.
Clarified the locations of the backpacks is somewhat flexible to ensure accessibility.
Record of communication of significant changes to relevant stakeholders
Permanent school staff will be alerted to changes during next school staff meeting. Casual teachers will be alerted to read local procedures folder on next commencement day of work with staff alerting them to changes.
Date of review and who was involved
7/7/21 preschool team, whole school staff team, children, and families
Key changes made and reason/s why
Transferred to new DOE format. Updating special consideration sheet to include photo of each child and more precise location of medication.
Record of communication of significant changes to relevant stakeholders
All school staff members will be alerted to the updated special consideration sheet at whole school staff meeting, and preschool staff/relief preschool staff and casual staff will be shown where it is located.

Copy and paste a new table to record each occasion the procedure is reviewed.