Wangala
PRIMARY SCHOOL

Outside School Hours Care Policy
Medical Conditions

Purpose

Children's safety, health and wellbeing are of prime importance to all at Wangala Primary School Outside School Hours Care. We have a duty of care to be aware of the needs, health and wellbeing of all children enrolled in our program.

If a child enrolled in the program has a specific health care need, allergy or relevant medical condition, every effort will be made to manage that condition within the scope of the experience, knowledge and abilities that can reasonably be expected of our educators.

In developing plans for the care of individual children, we will consider the program environment as a whole, the knowledge and skills of educators, the needs of all the children at the program and our ability to adequately cater for specific health care needs. In some circumstances, we may be unable to offer a place to a child because we are unable to reasonably and adequately meet their care needs. In this instance, we will communicate with the family as early as practicable to enable them to make alternate arrangements.

This policy aims to:

- Ensure children with specific health care needs, allergies or relevant medical conditions are identified and receive appropriate care.
- Identify, and where practicable, act to minimise risk to children.
- Ensure educators are familiar with the medical conditions policy and briefed on risk minimisation and communication procedures where a specific health care need, allergy or relevant medical condition has been identified.
- A copy of this policy will be provided to all parents/carers who identify their children with a diagnosed medical condition. (R91)
- Ensure that an educator will be rostered on at the service at all times who has current qualifications in first aid, anaphylaxis and asthma (R136)
- Ensure that educators can respond to the needs of any child who has breathing difficulties.
- Raise awareness about medical conditions such as asthma, allergies and anaphylaxis amongst the service community and children in attendance

Strategies for Policy Implementation

The service will:

- Assess the ability of the educators to care for the specific healthcare need, allergy or relevant medical condition
- Ensure that detailed information is gathered regarding the specific health care need, allergy or relevant medical condition of the child.
- Ensure that detailed information is communicated to staff and educators via the enrolment form and other relevant documentation.
- In relation to the risk of anaphylaxis, the service will ensure all relieving and new educators are aware of:
    - The symptoms of an anaphylactic reaction.
    - The child at risk of anaphylaxis.
    - The anaphylactic child's allergies.

    - Where the anaphylaxis action plan is located.
    - Where the auto-injection device kit is located.
- Ensure that a medical management plan is received from the families and a risk minimisation plan is prepared in partnership with the family, with both being maintained in the child's enrolment record and available to educators who can respond to the needs of the child.
- Where possible, provide training and support to educators, so they are confident in their ability to respond to the needs of the child. Specific training may be required for conditions such as diabetes and epilepsy to meet children's individual needs.
- Have anaphylaxis information and awareness posters displayed within the OSHC space.
- When it is not possible to meet the care needs of the child, communicate challenges/difficulties with the family promptly to ensure that the family is able to understand why the service is unable to provide care for the child.
- Wangala Primary School Outside School Hours Care does not permit children to self-administer medication unless supervised. Any medication, including Ventolin, to either be administered by or in the presence of staff. The medication name and the dosage will then be recorded in a medication record.
- Ensure that educators, volunteers, staff members and families are aware of the medical records and the processes of managing these are adhered to.
- Ensure this policy is provided to parents of children with an identified specific health care need, allergy or relevant medical condition. (R91)

EDUCATORS WILL:
Compliance

- Develop a risk minimisation plan relating to the specific need in conjunction with parents. This plan, along with the action plan is designed to: Identify possible risks and enable risk minimisation strategies to be put in place and Identify whether specific safe food/other practices need to be developed.
- Ensure the child does not attend the service without relevant medication that may be required. This must be in date and labelled appropriately.
- Ensure an emergency puffer, e.g. Ventolin is kept in the First Aid Kit and is within its use by date.
- Detail the location of the medication/ action plans and other relevant information.
- Ensure children who need to self-administer know that medication is only to be administered when supervised by a staff member.
- Record any medication and the dosage in a medication log when administered, checking that the medication is within its expiry dates.
- Notify parents of known allergens that may pose a risk to the child and ensure the risk assessment addresses strategies to minimise this risk.

Operation

- In the situation where a child who has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction:
- Call an ambulance immediately by dialling 000.
- Commence first aid measures.
- Contact the parent/carer/emergency contact
    - Ensure all educators, staff and volunteers can identify the child and are aware of their medical condition. Active supervision will be used at all times to monitor the condition of children with medical conditions.
    - If the puffer and/or spacer are used the following cleaning process must be followed:
        1. Remove metal canister.
        2. Wash in warm, soapy water and allow to air dry.

3. Wipe down with an alcohol swab (e.g. medi –swab) when dry.

- Supervise mealtimes to see that all children only eat food that is prepared specifically for him/her. Lunch boxes and drink bottles provided by parents for the child should be clearly labelled with the child's name.
    - Before and After School Care services, children are provided with breakfast and afternoon tea
- Educators will ensure children with known allergies do not consume food/drink they are not able to consume.
- Ensure tables, and bench tops are wiped with warm soapy water and sanitised before and after eating.
- Follow the medical management plan in the event of an incident relating to the specific health care need, allergy or relevant medical condition.

Training

- Ensure that all educators are familiar with risk minimisation procedures relevant to the specified need.
- Discuss participation in any cooking activities with parent/carer if there are any concerns about ingredients used. Carefully consider the selection of ingredients for cooking activities to minimise potential risk to children.
- Read the action plan and relevant action/ risk minimisation plans.
- Follow appropriate procedures as defined in relevant policies if the specific health care need, allergy or relevant medical condition is Asthma, Anaphylaxis, Epilepsy, Diabetes or an allergy.
- Seek further information, training or support if necessary, to manage the specific health care need, allergy or relevant medical condition.

Supervise

- Ensure there is no trading or sharing of food, food utensils or containers for any children.
- Ensure hand washing for all children before and after eating
- Document any changes/concerns/observations regarding the child's needs

FAMILIES WILL:

Compliance

- Identify their child's additional need on their child's enrolment form. Failure to do so may result in the service cancelling the child's booking. The service is unable to meet specific health needs where these are not disclosed and where educators are unable to plan for them within the context of our service.
- Provide the service with a detailed action plan for the specific healthcare need, allergy or relevant medical condition. These will be updated at least annually or more regularly if the child's condition changes.
- Ensure that the child attends the program with all medications and equipment appropriate to respond to the specific health care need, allergy or relevant medical condition as this is documented in the medical management plan.
    - Ensure all necessary medication is handed to staff upon arrival if the child is not self-administering.
    - Agree that the child cannot attend the program without all medication and equipment identified in the medical management plan (action plan).

Communication

- Agree to develop a risk minimisation plan in collaboration with educators before their child attending the program.
- Inform educators of any changes to their child's specific health care need allergy or relevant medical condition in writing.
- Support the program in their efforts to minimise risk and care for their child by:
    - Ensuring all information is accurate and current
    - Providing medications, equipment and relevant health information for your child to the service
    - Communicating openly and honestly with educators in the reflection of the service communication plan.
    - Assisting in the development of risk minimisation plans
    - Respond to the requests of educators where those requests pertain to the care needs of your child.

Communication Plan

The purpose of this communication plan (Reg 90) is to ensure that there is a clearly defined process for:

- Staff members, educators and volunteers to be informed about policy, medical management plans and risk minimisation plans and procedures.
- Parents and families to communicate changes/needs to educators about medical management plans, risk minimisation plans or their child's health and wellbeing in general.
- This communication plan came into effect when a child enrolled in the program is identified as having a specific health care need, allergy or relevant medical condition.

Communication plan for parents:

- All requests for care for significant health care needs must be forwarded to the Wangala Primary School Outside School Hours Care office so that appropriate arrangements and training can be considered.
- Such requests should occur a minimum of four weeks before the commencement of the care. This ensures there is ample time to plan for each child's needs.

- Once your child's specific needs have been discussed the management team will inform you of the next steps to be taken.

Once care for a child has been approved:

- During program periods parents and carers can liaise directly with the service coordinator, via the appropriate program mobile number during before and after school care periods or by contacting the school during school hours
- Concerns or questions specific to the management of the healthcare need, allergy or relevant medical condition at the program site should be discussed with the program coordinator.
- If concerns have not been adequately addressed parents and carers may discuss the matter with the Principal.

Communication plan for the service:

- All medical, health or allergy info and alerts sheets held by the service will be in date and parents/carers will be asked to review these annually.
- When medical management plans, risk minimisation plans and contact forms are due to be updated, the service will communicate this to the parents/carers in person or via email.

- When the enrolment forms indicate changes to a specific healthcare need, allergy or relevant medical condition the parent/carer will be contacted to confirm specific details.
- Educators, staff members and volunteers will be informed during team meetings about policy, medical management plans and risk minimisation plans to be developed.
- The coordinator will be required to inform their educators of specific health care needs, allergies or relevant medical conditions they must be aware of at the service – this can happen during sessions at the team meeting, during program set-up or at the beginning of a staff member's first shift at the program.
- All educators, staff members and volunteers are to liaise with the Coordinator during program periods if they have any concerns regarding these matters.

Medical conditions refer to any condition diagnosed by a medical practitioner, including the risk of anaphylaxis, allergy, diabetes and epilepsy. Further details of each condition are listed below:

Anaphylaxis

- Anaphylaxis is a severe, life-threatening allergic reaction. The most common causes in young children are eggs, peanuts, tree nuts, fish or seafood, cow's milk, bee or other insect stings, and some medications. Some fruits, most notably kiwi fruit, strawberries and figs, can also cause severe allergic reactions.
- Young children may not be able to express the symptoms of anaphylaxis. A reaction can develop within minutes of exposure to the allergen, but with planning and training, a reaction can be treated effectively by using an adrenaline auto-injection device such as an EpiPen®.
- Wangala Primary School Outside School Hours Care recognises the importance of appropriate training for educators responsible for the care of children at risk of severe allergic reactions and/or anaphylaxis.
- Training includes preventative measures to minimising the risk of anaphylaxis, recognition of signs and symptoms of anaphylaxis and administering appropriate emergency treatment, including the effective use of an adrenaline auto-injection device.
- Educators and parents/carers need to be made aware that it is not possible to achieve a completely allergen-free environment in any service that is open to the general community. Educators should not have a false sense of security that an allergen has been eliminated from the environment. Instead, Wangala Primary School Outside School Hours Care recognises the need to adopt a range of procedures and risk minimisation strategies to reduce the risk of a child having an anaphylactic reaction, including strategies to minimise the presence of the allergen in the service.

Asthma

Children with asthma have sensitive airways in their lungs. When exposed to certain triggers, the airways can narrow and make breathing difficult. Symptoms usually include coughing, wheezing, shortness of breath or rapid breathing. Asthma can range from mild to severe – some children rarely need medication, others require it every day, but with proper care, most children can control their asthma. Understanding the nature of a child's asthma is crucial, but it is important to note that the onset of asthma can occur at any time. Families and educators will share the responsibility of managing a child's asthma by working collaboratively to minimise risks to the child, understanding asthma triggers and ensuring ongoing communication regarding the child's health needs. Wangala Primary School Outside School Hours Care is committed to providing, as far as is practical, a safe and healthy environment for children who have asthma so that they can participate equally in the program.

Diabetes

- Diabetes is a serious, complex condition which can affect the entire body. It is caused by having too much sugar – also called glucose - in the bloodstream. Diabetes requires daily self-care and if complications develop, diabetes can have a significant impact on quality of life and can reduce life expectancy. There are different types of diabetes; all types are complex and serious. The three types of diabetes are Type 1, Type 2 and gestational diabetes. Young people with diabetes can participate fully in school life. However, there are aspects of school life that can affect diabetes, for example, sports, break times and camps. Educators will work together with families and the child; to meet their medical needs as required.

Epilepsy

- Epilepsy is a disorder of the brain function that takes the form of recurring convulsive or non-convulsive seizures. Epilepsy is not just one condition; rather it is a diverse family of disorders comprising many seizure types.
- Seizures can be subtle causing momentary lapses of consciousness, or conspicuous causing sudden loss of body control. Seizures are episodic and unpredictable and may occur as frequently as every day, or just occasionally in a lifetime.
- Medication required for children diagnosed with epilepsy will be provided according to their daily medication authorisation record and in the case of a seizure, according to their medical management plan. Educators may require further training specific to their child's needs about epilepsy

DEFINITIONS IN POLICY

Allergen: A substance that can cause an allergic reaction.
Allergy: An immune system response to something that the body has identified as an allergen. People genetically programmed to make an allergic response will make antibodies to particular allergens.
Allergic reaction: A reaction to an allergen. Common signs and symptoms include one or more of the following: hives, tingling feeling around the mouth, abdominal pain, vomiting and/or diarrhoea, facial swelling, cough or wheeze, difficulty swallowing or breathing, loss of consciousness or collapse (child pale or floppy), or cessation of breathing.
Anaphylaxis: A severe, rapid and potentially fatal allergic reaction that involves the major body systems, particularly breathing or circulation systems.
Anaphylaxis Action Plan: a medical management plan prepared and signed by a Registered Medical Practitioner providing the child's name and allergies, a photograph of the child and clear instructions on treating an anaphylactic episode. An example of this is the Australian Society of Clinical Immunology and Allergy (ASCIA) Action Plan. This plan will be updated annually by a registered medical practitioner to ensure that listed information is current to the child's needs.
Auto-injection device kit: An insulated container, for example an insulated lunch pack containing a current adrenaline auto-injection device e.g. (EpiPen® or Anapen®), a copy of the child's anaphylaxis medical management action plan, and telephone contact details for the child's parents/carers, the doctor/medical service and the person to be notified in the event of a reaction if the parent/carer cannot be contacted. If prescribed, an antihistamine may be included in the kit. Auto-injection devices are stored away from direct heat. A texta to write details of any medication administered to child in the event of a reaction is also a useful inclusion in the kit.
EpiPen®: This is one form of an auto-injection device containing a single dose of adrenaline, delivered via a spring-activated needle, which is concealed until administered. Two strengths are available, an EpiPen® and an EpiPen Jr®, and are prescribed according to the child's weight. The

EpiPen Jr® is recommended for a child weighing 10-20kg. An EpiPen® is recommended for use when a child is more than 20kg.

Anapen®: This is another form of an auto-injection device containing a pre-filled needle syringe combination which delivers adrenaline intramuscularly.

Communication plan: A plan that forms part of the policy outlining how the service will communicate with parents and educators about the policy and how parents and educators will be informed about risk minimisation plans and emergency procedures when a child diagnosed at risk of anaphylaxis is enrolled in the service.

Risk minimisation: The implementation of a range of strategies to reduce the risk of an allergic reaction including removing, as far as is practicable, the major sources of the allergen from the service, educating parents and children about food allergies and washing hands after meals.

Risk minimisation plan: A plan specific to the service that specifies each child's allergies, the ways that each child at risk of anaphylaxis could be accidentally exposed to the allergen while in the care of the service, practical strategies to minimise those risks, and who is responsible for implementing the strategies. The Risk Minimisation Plan should be reviewed at least annually.

Special events box: Non-food rewards, for example, stickers, stamps and so on are to be encouraged for all children as one strategy to help reduce the risk of an allergic reaction.

References

- Wangala Primary School Outside School Hours Care medical conditions policy endeavours to adhere to the Asthma Foundation asthma management guidelines.
- Asthma Australia: www.asthmaaustralia.org.au
- Diabetes Australia: https://www.diabetesaustralia.com.au/school
- Epilepsy Australia: http://www.epilepsyaustralia.net/
- ACECQA National Quality Framework Resource Kit (2012)
- Quality Area 2 – Health and Safety
- Quality Area 7 – Leadership and Service Management
- Education and Care Services National Regulations (2011), R 73, 74, 75, 177 & 185
- Education and Care Services National Law Act (2010), S 165

Review Cycle

This policy was last updated in April 2025 and is scheduled for review in April 2026.
The recommended minimum review cycle for this policy is annually.