

NQS2 Children's Health and Safety Procedure Medical Conditions

Background

C&K is committed to supporting the inclusion and participation of all children, including those with medical conditions. Safe management of medical conditions relies on ongoing collaboration and clear communication between the Centre and parents. This procedure explains what parents and Centres must do to ensure each child's medical needs are managed safely and effectively.

IMPORTANT

A child's enrolment cannot commence, or may be paused, until all requirements in this procedure are completed. This includes:

- Upon receipt of an enrolment record, reviewing child's health information. (reg 162)
- Receiving a copy of the child's current Medical Management Plan. (reg. 90 (c) (i))
- Meeting face to face with child's parents.
- Developing and maintaining a *Communication Plan*. (reg. 90 (c) (iv))
- Developing and updating a *Risk Minimisation Plan*. (reg. 90 (c) (iii))
- Completing all required record keeping responsibilities.
- Completing any additional steps for complex medical conditions or specialised health procedures.

This procedure is implemented alongside the definitions outlined in [Appendix Three](#) and the following procedures:

- [Administration of Medication Procedure](#)
- [Asthma Procedure](#)
- [Allergies and Anaphylaxis Procedure](#)
- [Diabetes Procedure](#)
- [Epilepsy and Seizure Procedure](#)

[Appendix One](#) provides a summary of the process for managing medical conditions.

Parent and Guardian Responsibilities

Before your child starts or as soon as possible after diagnosis

- List any diagnosed medical condition(s) in your child's [Enrolment Booklet/Online Form](#).
- Provide the Centre with a current *Medical Management Plan* prepared and authorised by a registered medical practitioner. The plan must be dated within the last 18 months, unless it has an earlier expiry date, and must include the practitioner's name and signature, or practice stamp with their name and provider number. The plan must include:
 - child's full name and recent photo
 - child's date of birth
 - the name of the medical condition
 - required management and care tasks
 - where applicable, signs and symptoms, first aid and/or emergency treatment
 - where applicable, medication details, including name, frequency, dosage and method of administration.
 The Medical Management Plan may be provided in any format, including a letter from a registered medical practitioner or a template from a recognised peak body.
- Nominate at least two emergency contacts (in addition to parents/guardians) in your child's *Enrolment Booklet/Online Form*.
- Meet with Centre Director (or delegate) to discuss your child's medical needs and complete *Part 2 - Parent Acknowledgement and Authorisation of the Medical Condition Record*.
- Understand your child cannot start or continue attending until all requirements of this procedure are met, including any specialised training required for teachers and educators.

During your child's enrolment

- Work with the Centre staff to support your child's participation and inclusion in the program.
- Each day your child's attends, provide all items listed in your child's Medical Management Plan, including medication and specialised equipment. Medication supplied must match what is recorded in the Medical Management Plan.
- When required, complete the parent section of the [Medication Authorisation Record](#).
- Tell the Centre Director immediately if your child's medical needs change and provide an updated Medical Management Plan developed and authorised by a registered medical practitioner.
- Advise Centre in writing if your child no longer has or is being treated for a medical condition.
- Meet with the Centre Director (or delegate) at least every six months, or sooner if your child's medical needs change or if the Centre requests to meet.
- Provide a new Medical Management Plan every 18 months, or sooner if your child's medical needs change.
- Inform Centre immediately in writing if emergency contact details change.

Review Enrolment Health Information

Centre Director/Nominated Supervisor will:

- Upon receipt of an *Enrolment Booklet/Online Form* review child's health information. (Reg 162)
- Confirm whether a diagnosed medical condition is listed and whether the parent has provided a current Medical Management Plan.
- If the child has a complex medical condition, promptly inform your Early Childhood Pedagogy Advisor (ECPA) and follow the requirements outlined in the '*Complex Medical Conditions*' section of this procedure.

IMPORTANT

If any Medical Management Plan, specialist/allied health report or other relevant document says the child requires one-on-one educator support or supervision:

the Centre Director must immediately inform their ECPA and email the Inclusion Team (inclusion@candk.asn.au) for guidance.

Face to Face Meetings with Parents

Before a child commences at Centre OR as soon as possible after an enrolled child's diagnosis

Centre Director/Nominated Supervisor will:

- Schedule and hold a formal face-to-face meeting with child's parent(s). At this meeting:
- Start completing the *Medical Condition Record*.
- Review and discuss child's medical needs and Medical Management Plan and confirm it includes the required information:
 - ☐ child's full name and recent photo
 - ☐ child's date of birth
 - ☐ name of medical condition
 - ☐ required management and care tasks
 - ☐ (when applicable) signs and symptoms, first aid and/or emergency treatment
 - ☐ (when applicable) medication details, including name, frequency, dosage and method of administration.
 - ☐ authorised by registered practitioner i.e. their name and signature OR practice stamp with their name and provider number
 - ☐ current i.e. no more than 18 months old, unless an earlier expiry date is specified
- Request an updated plan if any of above information is missing or management instructions are unclear.
- Provide the parent a copy of this procedure and when applicable, provide a copy of:
 - *Asthma Procedure*
 - *Allergies and Anaphylaxis Procedure*
 - *Diabetes Procedure*
 - *Epilepsy and Seizure Procedure*
- (When applicable) Review and discuss medication. Outline and provide a copy of the *Medication Authorisation Form*.
- Outline each item of *Part Two - Parent Acknowledgment and Authorisation* in the *Medication Condition Record* and request parent to sign and date.
- (When applicable; for complex medical conditions only) Explain their child's enrolment may be delayed or paused until teacher and educator volunteers are identified and complete specialised training.
- Discuss and start documenting child's *Risk Minimisation Plan* in *Medical Condition Record*.

During child's enrolment

Centre Director/Nominated Supervisor will:

- Meet with child's parent(s) every six months, or sooner if child's medical needs change, to review child's medical needs and Medical Management Plan.
- Update *Risk Minimisation and Communication Plans* in *Medical Condition Record*, as required.

Risk Minimisation Plan

Centres must develop and implement a *Risk Minimisation Plan* that identifies risks linked to the child's medical condition and sets out how those risks will be eliminated, minimised, and/or managed. (Reg 90(c)(iii))

Before a child starts at Centre OR as soon as possible after an enrolled child's diagnosis

Centre Director/Nominated Supervisor will:

- In the *Medical Condition Record*, develop and document the *Risk Minimisation Plan*, in consultation with the child's parent, centre staff and, where appropriate and authorised, the child's registered medical practitioner. One Risk Minimisation Plan may cover more than one medical condition.
- Instruct teachers and educators to read and implement the child's *Risk Minimisation Plan* and complete the Acknowledgement Table in child's *Medical Condition Record*.
- Place a copy of the child's Medical Management and *Risk Minimisation Plans* in the casual induction folder.

During child's enrolment

Centre Director/Nominated Supervisor will:

- Review the *Risk Minimisation Plan* every six months with the child's parent, centre staff and, where appropriate and authorised, the child's registered medical practitioner.
- When updates are made to a Risk Management Plan:
 - Instruct teachers and educators to read and implement plan and complete Acknowledgement Table in child's *Medical Condition Record*.
 - Replace with a copy of the updated plan in the casual induction folder

Communication Plan

Centres must develop and implement a *Communication Plan*, so the child's parents and centre staff receive, understand and consistently share information about the child's medical condition and how it is to be managed. (90(c)(iv))

Before a child starts at Centre OR as soon as possible after an enrolled child's diagnosis

Centre Director/Nominated Supervisor will:

- Inform Centre staff in writing of the child's medical condition, individual needs and required management strategies.
- Provide Centre staff with access to the child's *Medical Management Plan* and *Medical Condition Record*, including the *Risk Minimisation Plan*, and where applicable, information about the location of medication and specialised equipment.
- Obtain written parent authorisation through the *Medical Condition Record* before:
 - Displaying the child's *Medical Management Plan* in a prominent location(s).
 - When appropriate, sensitively sharing relevant information about the child's medical condition with other children and families.
 - Completing and displaying the *Centre Health Summary Record* (required where several children with medical conditions are enrolled at centre).
- Display a *Medication Stored Here* sign at nominated medication storage locations.
- Display, where applicable, the *Child with Anaphylaxis Currently Enrolled Poster* in centre foyer/entrance.
- Record initial and completion dates of communication activities in *Part 5 – Communication Plan* of the child's *Medical Condition Record*.

During child's enrolment

Centre Director/Nominated Supervisor will:

- Continue implementing and documenting *Communication Plan* in child's *Medical Condition Record*.
- Use Kidsoft and/or Outlook reminders to monitor due dates and ensure required communication activities and review tasks are completed on time.
- Conduct a medical emergency scenario exercise at least every six months during team meetings.
- Remind parent(s) at least four weeks before medication expiry to provide replacement medication.
- Request an updated *Medical Management Plan* from parent(s) at least every 18 months, or earlier where the plan has an identified expiry date or the child's medical needs change.
- Record initial and completion dates of communication activities in *Part 5 – Communication Plan* of the child's *Medical Condition Record*.

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Record Keeping

Before a child commences at Centre OR as soon as possible after an enrolled child's diagnosis

Centre Director/Nominated Supervisor will:

- Complete all sections of the *Medical Condition Record* and file in the Centre's *Medical Condition Record Folder*.
- Tag child in Kidsoft under the appropriate medical condition type.
- Scan and upload the following documents to the child's Kidsoft record using the specified naming conventions:

Record	Naming Convention
<i>Medical Management Plan</i>	yearmonthdate_MMP_childfirstsurname
<i>Medical Condition Record</i>	yearmonthdate_MCR_childfirstsurname
(For complex medical conditions only) <i>Teacher and educator volunteer training records</i>	yearmonthdate_VTR_educatorsurname

During child's enrolment

Centre Director/Nominated Supervisor will:

- Ensure teachers and educators know the location of the Centre's *Medical Condition Record Folder* and can access when required.
- Monitor documentation to ensure records remain current and archive superseded documentation.
- Promptly remove and replace displayed *Medical Management Plan* when an updated plan is received.

INCLUSION FUNDING: Kindergartens may be eligible to apply for Kindergarten Inclusion Support Subsidy (KISS) if a kindergarten aged child with a complex medical condition requires specialised support to access and participate in the program. Refer to *KISS Funding - Educator User Guide* to assess eligibility. When eligible, complete an online *C&K KISS Inclusion Form*. When a child with a complex medical condition requires additional support to access a Childcare Centre or Extended Kindergarten Program, contact your ECPA for advice and guidance.

Daily Management

Centre Director/Nominated Supervisor will:

- **NEVER** allow a child with a medical condition to commence or continue attending Centre unless a current *Medical Management Plan* has been provided and a *Medical Condition Record* (including *Communication and Risk Minimisation Plans*) are in place.
- Monitor and assess Centre compliance with this procedure and take immediate action to address any identified gaps.
- (Optional) Complete *Managing Medical Conditions Self-Assessment* to support compliance and strengthen practice.

Teachers and educators will:

- **NEVER** perform a specialised health procedure or manage a child's complex medical condition unless they have successfully completed the required specialised training; AND hold current first aid, CPR, and asthma and anaphylaxis qualifications.
- Read, understand and consistently implement *Medical Management and Risk Minimisation Plans*.
- Support and guide colleagues, including casual staff, to understand and consistently implement *Medical Management and Risk Minimisation Plans*.
- Maintain open and regular communication with parents about their child's medical needs.
- Immediately inform the Centre Director when a parent advises their child's medical needs have changed.
- Consider and identify additional risks of associated with individual medical needs when planning curriculum activities, incursions, excursions and emergency drills. When applicable, the Centre Director will update individual *Risk Minimisation Plans*.

ECEM and ECPA (for branch Centres) or Management Committee (for affiliated Centres) will:

- Review records uploaded to Kidsoft.
- Provide ongoing support to Centres that have children enrolled with complex medical conditions.
- Monitor and assess Centre compliance with this procedure. Prioritise non-compliance and ensure immediate remedial action, which may include temporarily pausing a child's enrolment until non-compliance is addressed.
- (Optional) Complete *Managing Medical Conditions Self-Assessment* to support compliance and strengthen practice.

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Additional Responsibilities for Complex Medical Conditions and Specialised Health Procedures

For the purposes of this procedure, a complex medical condition is a condition diagnosed by a registered medical practitioner that requires specialised management because of its severity, multiple related conditions, or the need for a specialised health procedure(s).

Complex Medical Condition	Specialised Health Procedures
- Diabetes - Epilepsy - Any medical condition that requires a specialised health procedure	- Diabetes management and care tasks - Epilepsy management and care tasks - Percutaneous Endoscopic Gastrostomy - Tracheostomy management and care tasks - Stoma management and care tasks - Use of LifeVac device* - Urinary catheter care management tasks*

***Note:**

Catheter care management tasks:	Teachers and educators are not permitted to perform catheter care management tasks due to associated infection risks. In such cases, alternative arrangements must be made between C&K and the child's parent(s) (or authorised delegate), who will attend the Centre to perform catheter care tasks.
LifeVac Devices:	Centres are not permitted to purchase a LifeVac device for first aid treatment for choking. The use of a LifeVac Device is permitted when: - A registered medical practitioner has authorised its use as part of a child's Medical Management Plan for a diagnosed medical condition. - The device has been supplied by the parent. - The device is a genuine LifeVac device. - The device is the correct size for child. - Volunteer teachers and educators have administered standard first aid response for a choking and triple 0 (ambulance) has been telephoned.

Before a child starts at Centre OR as soon as possible after an enrolled child's diagnosis

Centre Director/Nominated Supervisor will:

- Tag child in Kidsoft under the appropriate medical condition type and/or specialised health procedure.
- Identify enough teacher and educator volunteers so that at least one trained volunteer is rostered whenever the child attends.
- Volunteers from the current Centre team must be willing and able to manage the child's complex medical condition and/or perform the specialised health procedure they will be trained to support.
 - Sessional kindergartens - minimum of two volunteers.
 - Childcare and extended kindergarten programs – more than two volunteers.
- If enough volunteers cannot be identified, immediately inform ECEM and ECPA (for branch Centres) or Management Committee (for affiliate Centres) and in consultation with the child's parent(s), consider alternative arrangements where appropriate. This may include the child's parent or emergency contact attending the Centre to manage the child's complex medical needs and/or perform the specialised health procedure.
- Ensure all volunteer teachers and educators complete the required specialised training specified in [Appendix Two](#) before managing the child's complex medical condition and/or performing the specialised health procedure.
- Ensure all volunteer teacher and educator complete Part 3 of child's *Medical Condition Record*.
- Scan and upload volunteer teacher and educator training records/certificates to child's Kidsoft record.

During child's enrolment

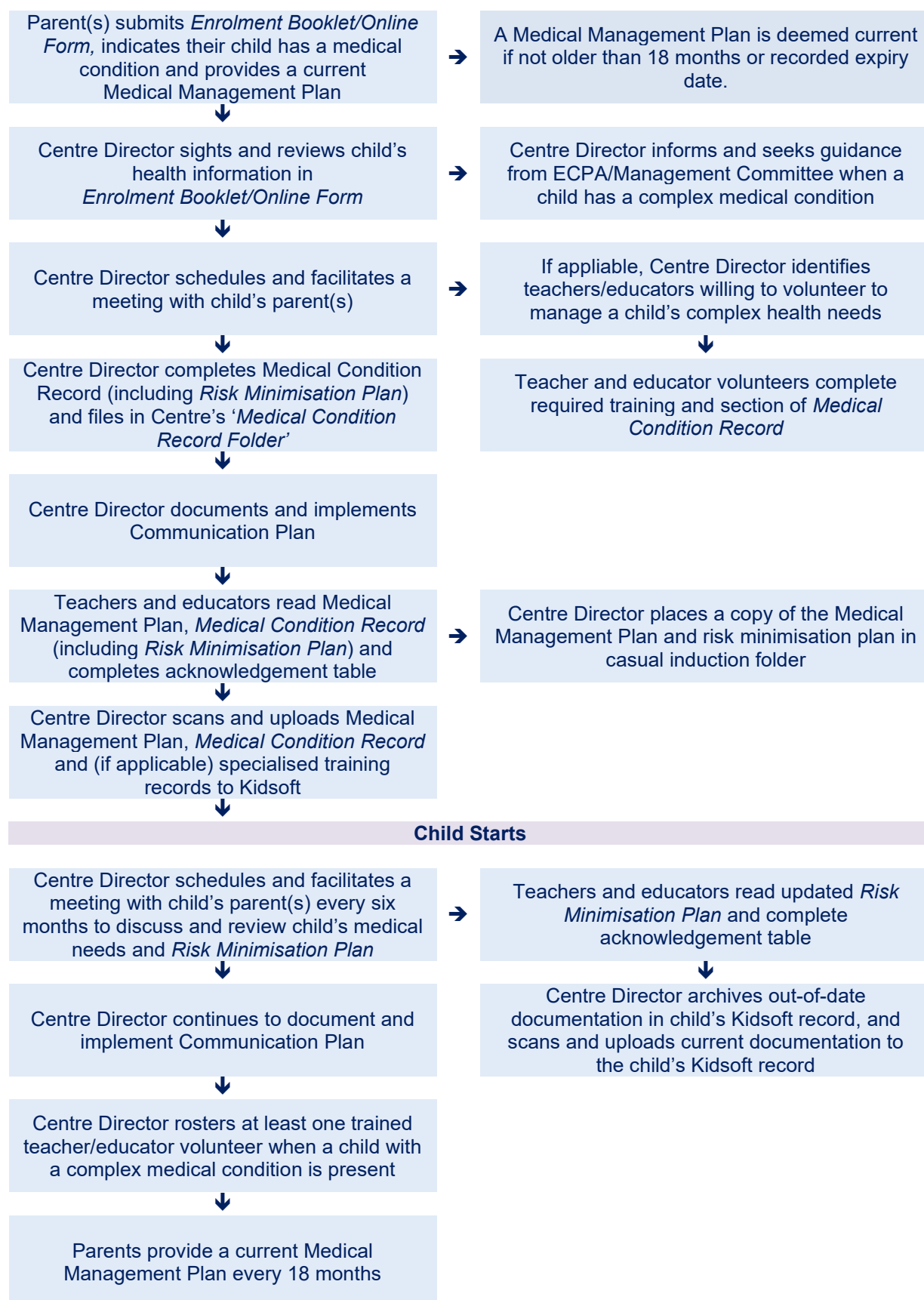
Centre Director/Nominated Supervisor will:

- Roster at least one trained volunteer teacher or educator to manage a child's complex medical needs whenever the child attends the Centre.
- Immediately seek advice from the ECEM (Branch Centres) or Management Committee (Affiliated Centres) if a trained volunteer is unavailable or cannot be rostered when child is due to attend the centre. Where possible, implement an alternative arrangement, which may include the child's parent or emergency contact attending the Centre to manage the child's complex medical needs and/or perform the specialised health procedure.

Volunteer teacher and educator will:

- Provide Centre Director with at least two weeks prior notice when they no longer wish to volunteer to manage a child's complex medical needs or administer a specialised health procedure.
- Hold current first aid training and asthma/anaphylaxis emergency qualifications, and specialised health procedure training as per [Appendix Two](#).

Appendix One – Medical Condition Process Summary



Appendix Two – Training requirements for teacher and educator volunteers

Who?

- Teachers and educators who volunteer to manage a child's complex medical condition or perform a specialised health procedure must complete specialised training as detailed in this appendix.
- Training must be delivered by an appropriately qualified health professional or trainer from a recognised organisation and/or medical condition peak body.
- Branch Centres - Your ECPA will source and arrange training. Cost of training is charged back to Centre budgets or may be covered by KISS inclusion funding.
- Teachers and educators are permitted to volunteer to manage a child's complex health needs or perform a specialised health procedure when they:
 - Hold current First Aid, Asthma and Anaphylaxis and CPR qualifications.
 - Have completed specialised training as detailed in this appendix.
 - Have completed Part 3 – Teacher and Educator Volunteer section of the *Medical Condition Record*.

When?

- Training must be completed prior to a child starting at a Centre/or soon after a new or changed diagnosis of child who is already attending.
- Teacher and educator volunteers must complete theory training **annually** while a child with a complex medical condition is enrolled.
- Teachers and educators are required to complete practical training prior to a child commencing at a Centre/or soon after a diagnosis **AND** when there is significant change to how a specialised health procedure must be performed.

What?

- The following table outlines the 'theory' and 'practical' training requirements for specific complex medical conditions and/or specialised health procedures.

Complex Medical Condition(s) / Specialised Health Procedure(s)	Training Requirements	
	Theory	Practical
Diabetes management and care tasks	YES	YES
Epilepsy management and care tasks (no Midazolam)	YES	Not required
Epilepsy management and care tasks including the administration of Midazolam	YES	YES
Tube feeding management and care tasks	YES	YES
Tracheostomy management and care tasks	YES	YES
Stoma management and care tasks	YES	YES
LifeVac device	Yes	Yes
Urinary catheter management and care tasks	Educators cannot volunteer to perform/no training	

Theory training content must include:

- What is the complex medical condition?
- Everyday management
- What is the specialised health procedure, including all steps and actions required?
- Possible signs, symptoms and/or triggers
- Treatment including medication (administration and storage)
- Emergency actions/first aid

Practical training content must include:

- Practical understanding of and the actions to implement a child's individual medical management plan and specialised health procedure(s).
- Trainer assessing the competency of the teacher and educator volunteer through observing the volunteer performing the specialised health procedure(s).

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Appendix Two – Training requirements for teacher/educator volunteers (continued)

Relevant peak bodies, key contacts and training options

Complex Medical Condition(s) / Specialised Health Procedure(s)	Peak Body/ Key Contacts	Training Options	
		Theory	Practical
Diabetes management and care	Diabetes Queensland Child's nominated Credentialed Diabetes Educator	Diabetes Queensland – “Practical Diabetes for Childcare Educators” online, 2 hours, \$40.00	Credentialed Diabetes Educator (fee for service).
Epilepsy management and care tasks	- Child's Medical Practitioner Epilepsy Queensland	Epilepsy Queensland through Epilepsy Smart Australia deliver “Understanding and Managing Epilepsy for Educators” online.	Not required
Epilepsy management and care tasks including the administration of Midazolam	- Child's Medical Practitioner Epilepsy Queensland	Premium Health offer Epilepsy and Seizure Support Training and Emergency Medication Administration - Premium Health which includes theory and practical training for administration of emergency medication. Epilepsy Action Australia deliver “Epilepsy Essentials and Emergency Medication: Midazolam” which includes <i>Epilepsy essentials and Emergency medication training for administration of emergency medication theory. NOTE: practical training would need to be conducted in addition to this training by a qualified health care professional and evidence of the training supplied.</i>	Premium Health offer Epilepsy and Seizure Support Training and Emergency Medication Administration - Premium Health which includes theory and practical training for administration of emergency medication. - Practical training can be conducted by a qualified health care professional (evidence of Practical training would also be required).
Tube feeding management and care tasks	- Child's Medical Practitioner/Chronic Care Nurse Queensland Children's Hospital	Enteral Nutrition - Assisting with PEG feeding - CQUniversity	Chronic Care Nurse
Tracheostomy management and care tasks	- Child's Medical Practitioner/Chronic Care Nurse Queensland Children's Hospital Tracheostomy Tubes	Theory + Practical - Queensland Children's Hospital Tracheostomy Tubes health practitioner or Chronic Care Nurse	
Stoma management and care tasks	- Child's Medical Practitioner/ Chronic Care Nurse Queensland Stoma Association	CQ University - Stoma Management – Basic Stoma Care PDC20104 (online)	Child's Chronic Care
LifeVac	LifeVac Australia	Online training – LifeVac Australia	Nurse practitioner

Appendix Three – Definitions

Medical Condition:

A current condition diagnosed by a registered medical practitioner that requires a Medical Management Plan. This does not include:

- Physical, developmental or neurodevelopmental diagnosis (e.g. deaf or hard of hearing, Attention Deficit/Hyperactivity Disorder, Autism) supported by an Education Support Plan.
- Previously diagnosed medical condition that a child is no longer experiencing or receiving treatment for.
- Health concerns not diagnosed by a registered medical practitioner.
- Short-term illnesses treated by a registered medical practitioner.

Complex Medical Condition

A condition diagnosed by a registered medical practitioner that requires specialised management because of its severity, multiple related conditions, or the need for a specialised health procedure. Examples are listed earlier in this procedure.

Medical Management Plan

A current plan prepared and authorised by a registered medical practitioner (practitioner's name, signature OR practice stamp with practitioner's name and provider number), that explains how a child's medical condition must be managed. The plan is deemed current if it is dated within the last 18 months, unless it has an earlier expiry date. It must include:

- the child's full name and recent photo
- the child's date of birth
- the name of the medical condition
- management and care tasks
- (if applicable) signs and symptoms, first aid and/or emergency treatment
- (if applicable) medication details e.g. name, frequency, dosage, method.

A plan may be in any format e.g. a letter from registered medical practitioner or a template from a recognised peak body.

Registered Medical Practitioner

A person registered with the Australian Health Practitioner Regulation Agency under the *Health Practitioner Regulation National Law Act 2009 (Qld)*, (excluding students), including general practitioners, specialists and credentialed diabetes educators.

Specialised Health Procedure

A care task required for a complex medical condition e.g. blood glucose/ketone monitoring, injection of medication other than an EpiPen, PEG/tube feeding, tracheostomy or stoma care.

Parent

A parent or guardian with the lawful authority and responsibility to make decisions for a child; in this document, the term "parent" will be used to refer to both parent and guardian.