



## 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 2.2	Regulation <a href="#">90</a> Regulation <a href="#">91</a> Regulation <a href="#">92</a> Regulation <a href="#">93</a> Regulation <a href="#">94</a> Regulation <a href="#">95</a>	<a href="#">Leading and operating department preschool guidelines</a>  <a href="#">Student health in NSW schools: A summary and consolidation of policy</a>  <a href="#">Allergy and Anaphylaxis Management within the Curriculum P-12</a>
<b>Pre-reading and reference documents</b>		
<p><a href="#">Australasian Society of Clinical Immunology and Allergy (ASCIA)</a></p> <p><a href="#">ASCIA Guidelines for the prevention of anaphylaxis in schools</a></p> <p><a href="#">ASCIA Risk management strategies for schools, preschools and childcare services</a></p> <p><a href="#">National Asthma Council Australia</a></p> <p><a href="#">Epilepsy Australia</a></p> <p><a href="#">Diabetes Australia</a></p>		
<b>Staff roles and responsibilities</b>		
<b>School principal</b>	<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"> <li>the preschool is compliant with legislative standards related to this procedure at all times</li> <li>all staff involved in the preschool are familiar with and implement this procedure</li> <li>all procedures are current and reviewed as part of a continuous</li> </ul>	



	<p>cycle of self- assessment.</p> <ul style="list-style-type: none"> <li>• all staff hold current first aid and CPR qualifications</li> <li>• Is aware of care and treatment of all children with medical conditions.</li> </ul>
<b>Preschool Lead Teacher</b>	<p>The preschool lead teacher 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.</p> <ul style="list-style-type: none"> <li>• Meet with families to discuss medical conditions and health care plans provided by the family doctor to create an individualised Health Care Plan including risk minimisation and communication plans.</li> <li>• Determine with families how further communications will be noted and recorded and ensure that all paperwork is signed and updated where necessary.</li> <li>• Collect children’s medication, ensuring it is in date and clearly labelled with the child’s name, medicine dosage and expiry date with a sticker from the pharmacy. Any medication without this label will not be kept on the preschool premise.</li> <li>• Liase with Preschool School Administration Officer to ensure that all plans are stored and located in the appropriate areas and medical plans are displayed in clear view for staff to see whilst still maintaining the privacy of families.</li> </ul>
<b>Preschool educators</b>	<p>The preschool educators are responsible for working with leadership to ensure:</p> <ul style="list-style-type: none"> <li>• all staff in the preschool and daily practices comply with this procedure</li> <li>• this procedure is stored in the preschool, and made accessible to all staff, families, visitors and volunteers</li> <li>• being actively involved in the review of this procedure, as required, or at least annually</li> <li>• details of this procedure are reviewed and documented.</li> <li>• all staff will be aware of the location of health care plans and which children in the service have plans.</li> </ul>
<b>Procedure</b>	
<b>Individual</b>	<ul style="list-style-type: none"> <li>• The preschool enrolment form requires the parent or carer to</li> </ul>



**health care plans**

document relevant medical information.

- The Principal will discuss children’s medical conditions with families during their initial enrolment interview. Further details will be clarified with Preschool teachers during meet and greet interviews or for a diagnosis that occurs during the school year, preschool teachers will meet with families and share information with the Principal and preschool staff at weekly communication meetings or raise at the fortnightly LST meetings.
- 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:
  - a child diagnosed with asthma, diabetes, epilepsy or a food or insect allergy
  - a child at risk of anaphylaxis
  - a child who requires the administration of health care procedures.
- The preschool uses a template guided by the Leading and Operating Department Preschool Guidelines which is tailored to meet the specific needs of Lismore South Public School Ngulliboo Jarjums Preschool.
- Preschool Lead teachers meet with Principal and families to discuss finer details and prepare each plan. All documentation including Health Care Plans and medication is completed and in place before the child commences preschool or returns to preschool with a new condition.
- In addition, the following documentation will be developed and collated as an attachment to the health care plan:
  - 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 *ASCIA Action Plan for Anaphylaxis (Red) 2020*.
  - 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:
    - how all staff and volunteers will be made aware of the child’s needs
    - that all staff are able to identify the child



	<ul style="list-style-type: none"> <li>- that all staff are able to locate the child's management plan and medication</li> <li>- 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</li> <li>- record any communication between the family and preschool around the child's condition.             <ul style="list-style-type: none"> <li>o 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></li> </ul> </li> <li>• The child cannot commence preschool until the family supplies their emergency medication.</li> </ul>
<p><b>Asthma</b></p>	<ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> <li>• The most common symptoms of asthma are:             <ul style="list-style-type: none"> <li>• wheezing – a high-pitched sound coming from the chest while breathing</li> <li>• a feeling of not being able to get enough air or being short of breath</li> <li>• a feeling of tightness in the chest</li> <li>• coughing.</li> </ul> </li> <li>• If a child known to suffer asthma has a flare – up, their emergency action plan will be applied.</li> <li>• If a child not known to have asthma has a flare – up, the preschool's general use reliever medication will be administered, following <a href="#">The Asthma Care Plan for Education and Care Services</a>. Parent / carer authorisation is not required for this.</li> <li>•</li> </ul>
<p><b>Diabetes</b></p>	<ul style="list-style-type: none"> <li>• 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.</li> <li>• The signs and symptoms of low blood sugar include the child presenting pale, hungry, sweating, weak, confused and/or aggressive.</li> <li>• The signs and symptoms of high blood sugar include thirst, need to</li> </ul>



	<p>urinate, hot dry skin, smell of acetone on breath.</p> <ul style="list-style-type: none"> <li>• 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.</li> </ul>
<b>Epilepsy</b>	<ul style="list-style-type: none"> <li>• Epilepsy is a disorder of brain function that takes the form of recurring convulsive or non-convulsive seizures.</li> <li>• Seizures can be subtle, causing momentary lapses of consciousness, or more obvious, causing sudden loss of body control.</li> <li>• If a child known to suffer epilepsy has a seizure, apply their individual emergency management plan.</li> <li>• If a child not known to suffer epilepsy suffers a seizure, follow the instructions on the <a href="#">Epilepsy Australia seizure first aid poster</a></li> </ul>
<b>Anaphylaxis</b>	<ul style="list-style-type: none"> <li>• 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.</li> <li>• Anaphylaxis occurs after exposure to an allergen (usually to foods, insects or medicines), to which a person is allergic. Not all people with allergies are at risk of anaphylaxis.</li> <li>• Signs of mild or moderate allergic reaction are swelling of the lips, face, eyes, a tingling mouth, hives or welts, abdominal pain or vomiting.</li> <li>• 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.</li> <li>• 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.</li> <li>• 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 <a href="#">ASCIA First Aid Plan for Anaphylaxis (ORANGE) 2020 EpiPen.</a> Parent / carer authorisation is not required for this.</li> </ul>
<b>Administration of medication</b>	<ul style="list-style-type: none"> <li>• 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>.</li> </ul>



	<ul style="list-style-type: none"> <li>• On arrival at preschool, the parent or carer hands the child's medication to a staff member for safe storage.</li> <li>• All non-emergency medication is stored in a locked cupboard, or locked container in the refrigerator, out of reach of children.</li> <li>• 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.</li> <li>• 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.</li> <li>• 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.</li> <li>• Medication records are kept in the child's online file on TEAMS, the casual teacher folder, the emergency backpack (with the medication), and the health care plan folder. Copies of the emergency action plan are displayed on the classroom wall where it can be easily viewed.</li> <li>• 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.</li> <li>• When medication is first received, expiry dates are checked by the receiving staff member and the medication is also carefully checked for correct labelling. If the expiry date of the medication falls within the school year it is noted on the Sentral Preschool calendar by the Preschool administration staff member and first aid officer. A reminder will also be entered in the calendar at least 2 weeks in advance to give families time to obtain new medication. Reminders will be provided by staff as required.</li> </ul>
<p><b>Emergency medication</b></p>	<ul style="list-style-type: none"> <li>• Emergency medications (EpiPen Jnr., Ventolin) are inaccessible to children, but not locked away so they are readily available if needed.</li> <li>• These are stored in the emergency backpack which is located on the top of the fridge closest to the storeroom in the preschool classroom or taken on any outdoor play or beyond the fence excursions. An additional set is also kept in the fixed first aid kit located and clearly labelled in the preschool office.</li> <li>• Individual emergency medication will be stored with a copy of the child's emergency management plan and stored in the emergency backpack.</li> <li>• In any medical emergency an ambulance will be called immediately. Preschool staff will communicate clearly to ensure</li> </ul>



	<p>that one person will stay with the child while the other calls an ambulance immediately as required. The principal will be notified, and additional staff will also be called to ensure adequate supervision of all children can be maintained.</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• If emergency medication is administered:             <ul style="list-style-type: none"> <li>○ an ambulance will be called</li> <li>○ the principal will be notified</li> <li>○ the child's parent or carer will be notified</li> <li>○ a notification will be made to Early Learning (phone 1300 083 698) within 24 hours.</li> </ul> </li> </ul>
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Record of procedure's review
<b>Date of review and who was involved</b>
2/3/23 Anna Clemesha, Maree Guy, Larissa Polak
<b>Key changes made and reason/s why</b>
Locations of medical storage of records confirmed.
<b>Record of communication of significant changes to relevant stakeholders</b>
Published on class dojo



Record of procedure's review
<b>Date of review and who was involved</b>
11/10/22 Anna Clemesha, Maree Guy, Larissa Polak
<b>Key changes made and reason/s why</b>
Moving to new Preschool site location due to flooding rebuild
<b>Record of communication of significant changes to relevant stakeholders</b>

Record of procedure's review
<b>Date of review and who was involved</b>
24 <sup>th</sup> May 2022 Anna Clemesha, Maree Guy, Larissa Polak
<b>Key changes made and reason/s why</b>
<b>Record of communication of significant changes to relevant stakeholders</b>



**LISMORE SOUTH PUBLIC SCHOOL  
NGULLIBOO JARJUMS PRESCHOOL**

*Nominated Supervisor / Responsible Person /  
Educational Leader: Larissa Polak*



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