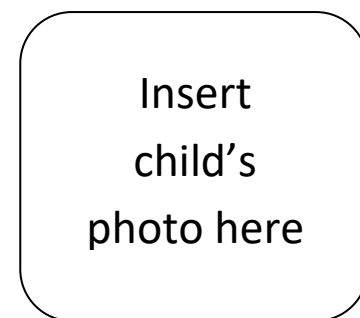


Medical Conditions Risk Minimisation Plan and Communication Plan

Child's Name: _____ Date: _____

Specific health care need, allergy or diagnosed medical condition _____



Medical risks at the service and how these are minimised

Trained First Aid Staff	<ul style="list-style-type: none"> Anaphylaxis, asthma and first aid trained educators are on the premises at all times.
The medical management plan, risk minimisation plan and medication are accessible to all educators.	<ul style="list-style-type: none"> Each child has their own easily identifiable red medication bag with their name clearly labelled on the front. A copy of the child's medication management plan will also be in the medication bag. A copy of the medical management plan and risk minimisation plan will be stored in the child's enrolment record and in the medical management plan folder in all rooms accessed by the child
Storage of Medication	<ul style="list-style-type: none"> Medication is stored in the child's medication bag which is accessible in the environment where educators are supervising the child.
Medication Checks	<ul style="list-style-type: none"> The child's medication will be checked to ensure it is current and has not expired. Medication expiry dates will be recorded on the Medication Register located in the office.
Anaphylaxis Display	<ul style="list-style-type: none"> There is a notification of '<i>child at risk of anaphylaxis</i>' displayed in the front foyer with other prescribed information.
Nominated Supervisor's Role	<ul style="list-style-type: none"> The Nominated Supervisor will identify all children with specific health care needs, allergies or diagnosed medical conditions to all new educators, staff, volunteers and students, and ensure they know the location of the child's medical management plan, risk minimisation plan and medication bag. Will notify the parents of any allergens that pose a risk to the child.
Administration of Medication	<ul style="list-style-type: none"> Parents are required to authorise administration of medication on medication record, and educators will complete administration of medication record whenever medication is provided.



Reducing Triggers

<p>List Potential Symptoms from Exposure</p>	<p> <input type="checkbox"/>Hives <input type="checkbox"/>Swelling of lips <input type="checkbox"/>Blue lips <input type="checkbox"/>Swelling of face <input type="checkbox"/>Swelling of tongue <input type="checkbox"/>Abdominal Pain <input type="checkbox"/>Coughing <input type="checkbox"/>Tingling mouth <input type="checkbox"/>Vomiting <input type="checkbox"/>Difficult breathing <input type="checkbox"/>Swelling of throat <input type="checkbox"/>Wheezing <input type="checkbox"/>Persistent cough <input type="checkbox"/>Difficulty talking <input type="checkbox"/>Persistent dizziness <input type="checkbox"/>Collapsing <input type="checkbox"/>Pale and floppy Other: </p>
<p>The triggers for the child's health care need, allergy or medical condition are:</p>	<p> <input type="checkbox"/> Eating certain foods <input type="checkbox"/> Using products containing certain foods, chemicals or other substances <input type="checkbox"/> Temperature <input type="checkbox"/> Dust <input type="checkbox"/> Physical activity <input type="checkbox"/> Laughing <input type="checkbox"/> Exposure to certain animals or plants <input type="checkbox"/> Mould/pollen <input type="checkbox"/> Missed meals <input type="checkbox"/> Too much insulin (diabetes) Other triggers: </p>
<p>What educators, staff and volunteers will do to minimise effect of triggers:</p>	<p> <ul style="list-style-type: none"> - Centre will be cleaned daily to reduce allergens. - Centre will use damp cloths to dust, leading to reduced dust being spread in the atmosphere. - Child will be supervised to prevent movements from hot or warm environments to cold environments. - Child will not touch animals that visit the centre (if it is indicated as a trigger). Other suggestions: </p>
<p>List the protocol in place to ensure that each Educator and child washes his/her hands before and after eating</p>	<p>Children are guided to the sinks for hand washing prior to meals. Babies are given face washer or wipes to clean hands. After meals children return to sinks to wash hands, babies are cleaned with face washers or wipes.</p>
<p>List the protocol in place for moving child from one program to the next.</p>	<p> Short term – medication is required to move up with the child with documentation also moving with the medication. Verbal instructions are also passed onto the new team. Allergy and dietary requirements are already in the room for the new team to view. Long term - When a child moves from one room to the other the documentation is moved up with the child. During the orientation process of moving child up into the next room, the staff liaise and communicate the child's needs to the new team. Medication (EpiPen's, Ventolin and Puffer etc) move up with the child. Excursions – all medication and documentation stays with the child. </p>

List the location of emergency contact numbers including ambulance, police, fire brigade	Next to all phones in the centre
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Who will be responsible for:

Caring for the child	All staff are first aid trained. Closest staff member to the child will act in an emergency. Educators in the room will know the child's triggers and watch the child carefully for any signs of struggle.
Notifying the director	Any staff member who can phone the office or quickly run to the office
Calling the ambulance	Approved Provider, or any staff member closest to a phone.
Administering the auto injection	A first aid trained staff member
Calling the parents	Approved Provider, Nominated Supervisor or Certified Supervisor.
In the event of death, notifying the police	Approved Provider/ Nominated Supervisor
Investigating the incident and collation of witness statements	Approved Provider/ Nominated Supervisor
Review of incident	Approved Provider/ Nominated Supervisor
Reporting back to staff, parents and others where relevant	Approved Provider/ Nominated Supervisor

Parent Authorisation

I/we agree to these arrangements, including the display of our child's picture, first name, medication held and location, and brief description of allergy/condition on a poster in all children's rooms and prominent places to alert all staff, volunteers and students.

Parent/s signature: _____

Nominated Supervisor: _____

Date:

MEDICAL COMMUNICATION PLAN

This communication plan has been developed to ensure that relevant staff members are informed about the Management of Medical Conditions Policy and to outline avenues of communication between families and the Service.

COMMUNICATION ABOUT THE MANAGEMENT OF DIAGNOSED MEDICAL CONDITIONS	DETAILS	TIMEFRAME	PERSON RESPONSIBLE	Date action was carried out
New Families	Information about diagnosed medical condition is included in the parent handbook. Families are given a copy of the service's Medical Condition's Policy.	On enrolment On enrolment	Nominated Supervisor/ Responsible Person	
Service Employees	Educators are informed about the Service's procedures and policies in relation to managing children with diagnosed medical conditions and these children are identified. All employees are informed about and familiar with Medical Management Action Plans and Risk Minimisation Plans	Orientation process Ongoing as relevant	Nominated Supervisor Nominated Supervisor/ Educators/Families	
Relief Staff, Students, Volunteers, Early Intervention Specialists	All stakeholders are informed about and familiar with any Medical Management Plans and Risk Minimisation Plans	Initial contact with the Service. E.g. orientation process, first visit, induction	Nominated Supervisor/ Responsible Person/ Educators	

COMMUNICATION ABOUT THE MANAGEMENT OF DIAGNOSED MEDICAL CONDITIONS	DETAILS	TIMEFRAME	PERSON RESPONSIBLE	Date action was carried out
Families of children who have been diagnosed with a medical condition	<p>Communicate clearly and in detail any medical condition in the child's enrolment form. Families need to communicate to Nominated Supervisor/ Responsible Person/ Educators regarding their child's medical needs upon enrolment</p> <p>Inform management of any changes to the child's medical management plan or medication as soon as possible.</p> <p>Provide an updated medical management plan annually or prior to one month prior to expiry.</p> <p>Ensure the service has adequate, in date supplies of the child's medication. If a child does not have their medication at the service they will not be permitted to attend.</p>	<p>Upon learning that the child has a diagnosed medical condition</p> <p>Regularly as required</p>	<p>Nominated Supervisor/ Responsible Person/ Educators</p> <p>Families</p>	

ACTION PLAN/ MEDICATION STORAGE

- The child's medication/ action plans are kept on site. Expiration dates are checked termly in the medication log.
 - Parents are emailed/ phoned a month before the expiration date.
- **Children whose medication and plan have expired will not be able to access care at PBH until their expired items are renewed.**