**First aid and management of medical conditions** **procedure**

**Purpose**

This procedure describes how Toowoomba Catholic Kindergarten and Care services (TCKC) will manage medical conditions, including the administration of medication and administer first aid.

**To whom it applies**

This procedure applies to all TCKC staff, parents, volunteers and children.

**Related policies and legislation**

Education and Care National Law Act 2010 (Qld)

Education and Care National Regulation 2011

Work Health and Safety Act 2011

Work Health and Safety Regulation 2011

Public Health Act 2005

Work Health and Safety policy

**Procedure**

1. Medical management plans/action plans
	1. For children with a medical condition requiring a Medical management plan/action plan, these are to be developed and signed by a medical practitioner eg asthma, diabetes or anaphylaxis action plans and provided at the point of enrolment.
	2. Staff requiring further information about Medical conditions including asthma, diabetes or anaphylaxis at the service level, can access their Policy and Procedure folders for hard copy information in National Quality Standard (NQS) 2 section or their online ‘TCKC teams’ in NQS 2 area.
	3. Communication about the First Aid and Management of Medical Conditions procedure and the Risk Minimisation plans or medical management plans are shared amongst relevant TCKC staff and volunteers to ensure implementation and the safety of the child.
	4. Parents are provided with a copy of the First Aid and Medical Conditions procedure before and upon enrolment if their child has a medical condition.
	5. TCKC staff notify parents on enrolment that they can communicate any changes to the plans for their child, setting out how that communication can occur.
	6. A risk minimisation plan will be developed and implemented according to the medical condition, the Medical management plan/action plan and the associated risks for the child. This plan will ensure
2. that the risks relating to a child’s specific health care need, allergy or relevant medication condition are assessed and strategies are developed and implemented to minimise the risk
3. that safe handling, preparation, consumption and service of food are developed and implemented (if relevant)
4. that parents/carers are notified of any known allergens that pose a risk to a child and strategies for minimising the risk are developed and implemented (if relevant)
5. the parents/carers can communicate any changes to the plans for the child, setting out how that communication can occur.
6. all staff members and volunteers can identify the child, the child’s Medical management plan/action plan and the location of the child’s medication
7. the child does not attend the service without medication prescribed by the child’s medical practitioner (if relevant)
8. describe how information will be communicated to families and staff.
	1. Services are to ensure that if a child is enrolled who is at risk of anaphylaxis, that a generic health alert statement is displayed in the foyer of the service as follows.

**A child is enrolled at this service who is at risk of anaphylaxis.**

1. Medication administration
	1. It is preferred that parents/carers administer medication (prescription or non-prescription) to their children before and after the operating hours of TCKC services.
	2. In situations where administration of medication is required whilst at the service, TCKC staff will only be permitted to administer medication to a child if
2. the medication is accompanied by a Medication authorisation form completed by the parent/carer
3. the appropriate training has been provided to staff about the administering of the medication
4. the medication is in its original package with pharmacist’s label which clearly states
* the child’s name
* dosage
* frequency of administration
* date of dispensing
* date last administered and
* expiry date.

**Please note:** Medication may be administered to a child without a medical authorisation form in case of an anaphylaxis or asthma emergency. If medication is administered in these circumstances, the nominated supervisor must ensure that the parent/carer, emergency services and Senior Manager: Kindergartens and Care are notified as soon as practicable.

* 1. The Medication authorisation form must include
1. the name of the child
2. the authorisation to administer medication (self-administering only applicable over preschool age)
3. the name of the medication to be administered
* the time and date the medication was last administered
* the time and date, or the circumstances under which, the medication should be next administered
* the dosage of the medication to be administered
* the manner in which the medication is to be administered
	1. Review of medication authorisation
1. Short term administration of medication is only applicable for the duration of up to 2 weeks and a new Medication administration form must be completed if the duration is extended.
2. Long Term administration of medication can only be authorised for 1 year and must be reviewed term by term to ensure currency of information. After 1 year a new Medication authorisation form must be completed if the duration is extended.
	1. The administration of medication will be recorded on a medication register that includes
3. the dosage that was administered
4. the manner in which the medication was administered
5. the time and date the medication was administered
6. the name and signature of the person who administered the medication
7. the name and signature of the person witnessing the administration.
	1. All medication will be stored appropriately to prevent unsupervised unauthorised access eg locked cupboard, fridge that children cannot access.
	2. All unused medication will be returned to the parents/carers.
8. Self-administering medication
	1. Children over preschool age may be allowed to self-administer medication or be assisted in self-administration.
	2. Authorisation to self-administer must be provided on the Medication authorisation form by a parent/carer or medical practitioner.
	3. The service is to develop a risk minimisation plan in consultation with parents/carers that includes how self-administration of medication will be managed.
	4. Reviews of self-administration of medication should follow 2d.
	5. Self-administration of medication must be recorded in the medication register.
9. First Aid
	1. At least one TCKC staff member with current first aid and CPR qualification, anaphylaxis management and emergency asthma management training will be in attendance at any place children are being cared for, and immediately available in an emergency.
	2. Staff with first aid qualifications must be trained by the organisations listed under the Australian Children’s Education and Care Quality Authority (ACECQA) list of approved qualifications.
	3. The nominated supervisor must
		1. maintain a register of qualified staff and volunteers with first aid qualifications.
		2. display the register in a prominent location and ensure that it includes
* name of first aid person
* location of first aid person
* contact number of first aid person
* qualification of first aid person
* dates of certification
* dates of expiry
	+ 1. provide a current first aid manual for staff and volunteers to view and implement
		2. ensure there is a current emergency contact telephone numbers list accessible to staff
		3. have medical management/action plans for children accessible to staff.
1. First Aid kits
	1. Services will have first aid kits available.
	2. First aid kits should be prominently displayed with a sign of a white cross on a green background.
	3. Services are to have additional portable first aid kits that TCKC staff are to take with them on all excursions and outings.
	4. First aid kits are to be maintained, checked regularly, and expired items replaced immediately.
	5. Services must ensure a cold pack or ice is ready for use.
	6. Services must ensure a store of disposable gloves is available.
2. Application of First Aid
	1. Medical management plans/action plans are to be developed and signed by a medical practitioner eg asthma, diabetes or anaphylaxis action plans and TCKC staff are to be familiar with and implement these plans.
	2. The first aider undertakes the initial treatment of the child or adult and communicates relevant information to the nominated supervisor.
	3. The first aider is required to follow infection control guidelines to minimise transmission of infection including wearing disposable gloves.
	4. The first aider must have access to hand washing facilities at the service.
	5. The first aider must record the incident on the first aid register as soon as possible after administering first aid and treat this information confidentially.

**Version control and change history**

**Effective date**

1/01/2020

**Review date**

1/01/2023