St. Joseph’s Pre School
Hindmarsh

POLICY
DOCUMENT

Medical Conditions
Background
Children who attend St Joseph’s Preschool Hindmarsh with the support of educators are able to self-medicate and manage medical conditions and, where possible, carers should encourage and support this. Effective management of medical conditions is heavily reliant on good communication with families. St Joseph’s Preschool has a responsibility to share information with families in relation to medication. All children that state they have a medical condition must also have a Medical Action Plan in place with St Joseph’s Preschool.

Policy Statement
St Joseph’s Preschool Hindmarsh staff will assist children to manage medical conditions and assist with medication if that medication is prescribed by a doctor and has the original label detailing the child’s name, required dosage, the expiry date and storage requirements and is accompanied by a Medical Action plan.

Implementation
Medical Conditions
Medical conditions include but are not limited to asthma, diabetes and the diagnosis of a child at risk of anaphylaxis. This information should be included on the enrolment form and discussed as part of the enrolment process with the family. St Joseph’s Preschool should receive a Medical Action Plan to ensure that the educators are informed of the required procedures and understand that the plan must be followed by providing regular interventions as detailed (eg blood glucose monitoring) or emergency first aid as described in the event of an incident involving the child.

St Joseph’s Preschool will:
- ensure that all educators are aware of the needs of the individual children and the medical action plan.
- Implement identified strategies and processes to support children with identified health care needs.
- Implement practices to ensure that families are kept fully informed.

Medication
The Coordinator is responsible for all medication on site regardless of whether it is administered by educators or parents or self-administered by the child.

Where medication is required for the treatment of long-term conditions or complaints such as asthma, anaphylaxis, epilepsy or diabetes, St Joseph’s Preschool will require authority from the child’s medical practitioner or specialist detailing the medical condition of the child, the correct dosage and how the condition is to be managed. This can be requested for over-the-counter medication as well as prescription only medication.

If children are receiving medication at home but not at St Joseph’s Preschool, the service should be advised on the nature of the medication, its purpose and of any possible side effects it may have on the child. Medication management strategies need to include plans for excursions for example, who is going to organise and manage the medication.

Storage
- Medications must be stored strictly in accordance with product instructions and in the original container in which dispensed. A thermal carry pack may be used for ease of transport on excursions to maintain safe temperature storage.
- Medication must be within the expiry date.
- Storage should be secure with clear labelling and access limited to the educators responsible for medication storage and supervision.
Supervision of Medication
The first aider supervising medication needs to ensure that:

- the right child
- has the right medication
- and the right dose
- by the right route (eg oral or inhaled)
- at the right time,
- and correct dosage is verified by another staff member, and that they
- record the details on the service's Medication Record.

A child should not take his/her first dose of a new medication while attending St Joseph’s Preschool. The child should be supervised by the family in case of an allergic reaction.

- In South Australia, medication for the treatment of an asthma emergency by a Bronchodilator (eg Ventolin) via a puffer can be administered without written authority. The use of a bronchodilator is considered a standard first aid response. Educators must be trained in asthma emergency first aid before administering a bronchodilator (eg Ventolin) via a puffer.

- In South Australia, the use of an adrenaline auto injector for the treatment of an Anaphylaxis emergency requires an anaphylaxis plan and a prescribed auto injector. Educators must be trained in emergency anaphylaxis first aid before administering adrenaline via an auto injector.

- Where medication has been taken in error; either the wrong amount of medication, or takes medication via the wrong route, the following steps should be followed:
  - Ring the Poisons Information Centre 13 1126 and give details of the incident and child.
  - Act immediately upon the advice given (e.g. if advised to call an ambulance) and notify the child’s emergency contact person.
  - Document your actions.
  - St Joseph’s will require completion of a critical incident report and an accident and injury report form.

Allergies
Where a child has a known allergy, it is to be recorded on the enrolment form and all educators made aware of it. Where an allergy requires specific medication or treatment, a current medical action plan for the child must be in place.

It is the responsibility of St Joseph’s Preschool to minimise the risk of exposure to an allergen. Food-safe practices will address any identified food allergies.
Asthma Policy

Policy Statement
All children at the service who are known to have asthma are supported via Asthma Friendly policies and procedures and all children, educators and visitors can access Asthma First Aid in an emergency.

Policy Commitment
We are committed to being an Asthma Friendly service as outlined by Asthma Australia. This means:

- The majority of educators have current training in Asthma First Aid and routine management, conducted or approved by the local Asthma Foundation. At least one educator on duty at any time holds a current certificate for Emergency Asthma Management.
- An Asthma Emergency kit is accessible to educators and include an in date reliever medication, and single person use spacer with mask for under 5 year olds.
- Asthma first Aid posters are on display and information is available for educators and parents
- Policies are Asthma friendly
- We meet requirements under the National Law and Regulations.

Roles and Responsibilities
With the support of educators children are responsible for:
- The self-management of their asthma in line with their age and stage of development.

Parents are responsible for:
- Providing an asthma care plan signed by the treating doctor
- Providing their child’s medication, clearly dated and in the original labelled container. If required a spacer and mask must also be supplied.
- Alert staff to any changes in their child’s asthma management.

Educators are responsible for:
- Documenting any asthma attack and advise parents immediately
- Review documentation regularly to ensure compliance with procedures
- Minimise exposure to known trigger

Anaphylaxis Policy

Policy Statement
St Joseph’s Preschool Hindmarsh educators believe that the safety and wellbeing of the children who are at risk of anaphylaxis is a whole-of-community responsibility. St Joseph’s Preschool is committed to:

- Providing, as far as practicable a safe and healthy environment in which children at risk of anaphylaxis can participate equally in all aspects of the Preschool programme and experiences.
- Raising the awareness about allergies and anaphylaxis amongst St Joseph’s Preschool Community and children in attendance.
- Actively involving the parents of each child at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for their child.
- Ensuring each staff member and other relevant adults has adequate knowledge of allergies, anaphylaxis and emergency procedures.
- Facilitating communication to ensure the safety and wellbeing of children at risk of anaphylaxis.
Purpose
The aim of this policy is to:
- Minimise the risk of an anaphylactic reaction occurring while the child is in the care of St Joseph’s Preschool
- Ensure that Staff members respond appropriately to an anaphylactic reaction by initiating appropriate treatment, including competently administering an auto injector
- To raise the awareness of the St Joseph’s Preschool Community about anaphylaxis and its management through education and policy implementation.

Scope
This policy applies when a child diagnosed as being at risk of anaphylaxis is enrolled at St Joseph’s Preschool. It applies to children enrolled at St Joseph’s OSHC, their parents / guardians and educators. It also applies to other relevant members of the St Joseph’s Preschool Community, such as volunteers and visiting specialists.

Background and Legislation
Anaphylaxis is a severe, life threatening allergic reaction. The most common causes in young children are eggs, peanuts, tree nuts, cows milk, bee or other insect stings, and some medications. 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-injector.

The school recognises the importance of educators responsible for the child/ren at risk of anaphylaxis undertaking training that includes preventative measures to minimise the risk of an anaphylactic reaction, recognition of the signs and symptoms of anaphylaxis and emergency treatment, including administration of an auto-injector. Educators and families 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 recognize 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.

Roles and Responsibilities
The trained anaphylactic first aider is responsible for:
- Ensuring a copy of the child’s anaphylaxis plan is visible to all staff.
- Following the child’s anaphylaxis action plan in the event of an allergic reaction.
- Where a child has not been diagnosed as allergic, but who appears to be having an anaphylactic reaction:
  - Remove the allergen
  - Call an ambulance immediately
  - Commence first aid measures
  - Call the parent. In the event where parent cannot be contacted emergency contacts will be notified.
- Ensure the parent provides an anaphylaxis action plan signed by the child’s doctor and a complete auto injector kit is on the Preschool premises when the child is in care.
- Ensure that the auto injector kit is stored in a location known to all educators and is easily accessible.
- Ensure that the auto injector kit for each child at risk of anaphylaxis is carried by a trained first aider on excursions that the child attends.
- Regularly check the auto injector expiry date.
- Practise auto injector procedures using a trainer pen twice a year
- Provide information to the Preschool community about resources and support for managing allergies and anaphylaxis.
- Meeting requirements under the National Law and Regulations.
The parent of a child at risk of anaphylaxis is responsible for:

- Informing educators of their child's allergies upon enrolment.
- Provide educators with an anaphylaxis action plan and written consent to use the auto injector in line with the action plan.
- Provide educators with a complete auto injector kit
- Regularly check the auto injector's expiry date.
- Notifying the educators of any changes to their child's allergy status and provide a new anaphylaxis action plan in accordance with these changes.
  Communicate all relevant information and concerns to educators.

Philip Schultz
Principal

Dated: June 2015

Anne Burke
School Board Chairperson