



MEDICAL CONDITIONS POLICY

To support children's wellbeing and manage specific healthcare needs, allergies or relevant medical conditions, our Service will work in accordance with the Education and Care Services National Regulations to ensure health related policies and procedures are implemented. We aim to take every reasonable precaution to protect children's health and safety by explicitly adhering to individual medical management and risk management plans and by responding to any emergency situation which may arise.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.
2.2.3	Child safety and protection	Management, educators and staff are aware of their roles and responsibilities regarding child safety, including the need to identify and respond to every child at risk of abuse or neglect.

QUALITY AREA 7: GOVERNANCE AND LEADERSHIP		
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service that is child safe.
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
S. 2A	Paramount consideration—safety, rights and best interests of children
S. 3A	Paramount consideration [NSW]

S. 165	Offence to inadequately supervise children
S. 166A	Offence to subject child to inappropriate conduct [NSW] Offences relating to inappropriate conduct
S. 167	Offence relating to protection of children from harm and hazards
S.172	Offence to fail to display prescribed information
S. 174	Offence to fail to notify certain information to Regulatory Authority
12	Meaning of serious incident
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma or illness
87	Incident, injury, trauma and illness record
89	First aid kits
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement—anaphylaxis or asthma emergency
95	Procedure for administration of medication
101	Conduct of risk assessment for excursion
136	First aid qualifications
161	Authorisations to be kept in enrolment record
162	Health information to be kept in enrolment record
168	Education and care services must have policies and procedures
170	Policies and procedures are to be followed
173	Prescribed information to be displayed—education and care service other than a family day care service
175	Prescribed information to be notified to Regulatory Authority

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy	Enrolment Policy
Administration of First Aid Policy	Epilepsy Management Policy
Administration of Medication Policy	Excursion/ Community Engagement Policy
Asthma Management Policy	Family Communication Policy
Anaphylaxis Management Policy	Health and Safety Policy
Celebrations Policy	Incident, Injury, Trauma and Illness Policy
Child Protection Policy	Nutrition Food Safety Policy
Child Safe Environment Policy	Privacy and Confidentiality Policy
Dealing with Infectious Diseases Policy	Record Keeping and Retention Policy
Diabetes Management Policy	Supervision Policy
Emergency and Evacuation Policy	Work Health and Safety Policy

PURPOSE

The Education and Care Services National Regulations requires approved providers to ensure services have policies and procedures in place for medical conditions. We aim to efficiently respond to and manage the medical conditions, health care needs or allergies of children and staff, ensuring the safety and wellbeing of all children, staff, families, and visitors at our Service.

SCOPE

This policy applies to children, families, staff, educators, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

DUTY OF CARE

Our Service has a legal responsibility to take reasonable steps to ensure the health needs of children enrolled in the service are met. This includes our responsibility to provide:

- a. a safe environment for children free of foreseeable harm *and*
- b. adequate supervision of children at all times.

IMPLEMENTATION

Our Service is committed to ensuring that children's safety, rights and best interests are the paramount consideration in all decisions, actions and practices. There are a number of aspects that we must consider when a child with a diagnosed health care need, allergy, or medical condition is enrolled at the service. Key procedures and strategies must be in place prior to the child commencing at the service to ensure their individual health, safety and wellbeing. It is imperative that all educators and volunteers at

the Service follow a child's medical management plan in the event of an incident related to a child's specific health care need, allergy, or medical condition.

We will involve all educators, families and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. Our Service is committed to adhering to privacy and confidentiality procedures when dealing with individual health care needs, allergies or relevant medical conditions, including having families provide written permission to display the child's medical management plan in prominent positions within the Service.

THE APPROVED PROVIDER / MANAGEMENT / NOMINATED SUPERVISOR WILL ENSURE:

- obligations under the Education and Care Services National Law and Education and Care Services National Regulations are met
- all staff, educators, students, visitors and volunteers have knowledge of and adhere to this policy and relevant health management policies (e.g. *Asthma Management Policy / Anaphylaxis Management Policy / Diabetes Management Policy*)
- all enrolment forms are reviewed to identify any specific health care needs, allergies or medical conditions
- existing enrolment forms are reviewed annually, and parents/guardians contacted to confirm if the existing diagnosed health care need, allergy or relevant medical condition still applies and whether any new needs have been diagnosed
- parents/guardians are provided with a copy of the Service's *Medical Conditions Policy* and any other relevant policies via email and a copy of the email will be saved in the child's enrolment record
- a child is not enrolled at, nor will attend the Service without a medical management plan and prescribed medication by their medical practitioner. In particular, medication for life-threatening conditions such as asthma, anaphylaxis, epilepsy or diabetes must be provided at the Service each day, e.g. asthma inhalers, adrenaline devices, anti-seizure medications or insulin.
- all medication provided to the Service, including over the counter medication that forms part of the child's medical management plan, must be clearly labelled with the child's name and prescribed dosage
- educators, staff and volunteers have a clear understanding of children's individual health care needs, allergy or relevant medical condition that may be ongoing or acute/short term in nature
- new staff members are provided with induction and ongoing training to assist managers, educators and other staff effectively
- children with medical management plans are clearly identified

- all aspects of the operation of the Service must be considered to ensure inclusion of each child into the program
- a communication plan is developed in collaboration with the nominated supervisor and lead educators to ensure communication between families and educators is ongoing and effective
- communication regarding children's health requirements is delivered to families in a culturally sensitive and respectful manner
- staff complete annual ASCIA anaphylaxis e-training to provide consistent and evidence-based approaches to prevention, recognition and emergency treatment of anaphylaxis
- at least one staff member or nominated supervisor is in attendance at all times, and is available immediately in an emergency, with a current accredited first aid qualification, emergency asthma management and emergency anaphylaxis management training (as approved by ACECQA)
- educators and staff have a clear understanding of their role and responsibilities when caring for children with a diagnosed health care need, allergy or relevant medical condition
- families provide required information on their child's health care needs, allergies or relevant medical conditions, including:
 - medication requirements (if any)
 - day-to-day needs and adjustments
 - details of the healthcare need, e.g. specific allergies and triggers
 - symptoms
 - medical practitioner's contact details
 - medical management plan
- a medical management plan has been developed in consultation with parents/guardians and the child's medical practitioner and provided to the service and/or
 - an individual's Asthma or Anaphylaxis Action Plan is developed in consultation with parents / guardians and the child's medical practitioner, e.g. ASCIA or National Asthma Council of Australia
 - an individual's Epilepsy or Diabetes Management Plan is developed in consultation with parents/guardians and the child's medical practitioner
- a risk minimisation plan and communication plan have been developed in consultation with parents / guardians and management prior to the child commencing at the Service
- educators and staff are informed immediately about any changes to a child's medical management plan and risk minimisation plan

- to record any prescribed health information and retain copies of a medical management plan, anaphylaxis management plan or asthma management plan and risk minimisation plan in the child's enrolment folder
- educators have access to emergency contact information for the child
- casual staff are informed of children and staff members who have specific medical conditions, and understand the Service's procedures for dealing with medical conditions and their roles and responsibilities
- a copy of the child's medical management plan is visibly displayed (in an area not generally available to families and visitors for privacy/confidentiality reasons) but known to all staff and volunteers in the Service with authorisation to display obtained from the parent/guardian
- risk minimisation plans and communication plans for individual children are accessible to all staff
- procedures are adhered to regarding the storage and administration of medication at all times as per the *Administration of Medication Policy and Procedure*
- educators are informed of specific medication requirements for children with medical management plans, including where medication is stored
- procedures are adhered to regarding the administration of medication at all times
- administration of the medication record is accurately completed and signed by the educator and a witness
- copies of children's medical management plans and medication are taken on any excursion or in case of emergency rehearsals or emergency evacuation from the Service
- a notice is displayed prominently at the main entrance of the Service stating that a child diagnosed at risk of anaphylaxis is being cared for or educated at the Service, and providing details of the allergen/s
- to protect confidential, personal and sensitive information regarding the health and wellbeing of a child or staff member, health information will only be shared with authorised persons or for example, in an emergency, if it is necessary to keep an individual safe or prevent a serious threat to their life. See *Privacy and Confidentiality Policy* and *Child Protection Policy* for more information.

FOLLOWING AN INCIDENT:

- in the event of a high-risk scenario where a child suffers from an allergic reaction, incident, situation, or event related to a medical condition, the Service and staff will follow the child's medical management plan, and dial 000 if a child is at immediate risk, or if in any doubt

- the first aid responder will commence first aid measures immediately as per the child's medical management plan, *Incident, Injury, Trauma and Illness Policy and Procedures* and *Administration of First Aid Policy and Procedures*
- educators will contact the child's medical practitioner (if required)
- if unsure of the severity, or if symptoms worsen, an ambulance is called by dialling 000, e.g. if it wasn't called already and if the child does not respond to initial treatment
- the nominated supervisor or responsible person will contact the child's parent/guardian or another emergency contact when practicable, but as soon as possible
- the nominated supervisor will ensure the *Incident, Injury, Trauma and Illness Record* is completed in its entirety
- the approved provider/nominated supervisor will notify the regulatory authority (within 24 hours) in the event of a serious incident
- the approved provider/nominated supervisor will conduct a review of practices following a medical emergency at the Service, including an assessment of areas for improvement.

MANAGEMENT OF ASTHMA, ANAPHYLAXIS, EPILEPSY AND DIABETES

For the management of asthma, anaphylaxis, epilepsy and diabetes see individual Service policies and procedures, which include procedures to follow on the administration of medication following an incident or a medical emergency. (Reg.94)

COOK AND FOOD HANDLERS WILL ENSURE:

- to keep up to date with professional training to help manage food allergies in ECEC services
- practices and procedures are in place, and adhered to, in relation to safe food handling, preparation and consumption of food
- any changes to children's medical management plans or risk minimisation plans are implemented immediately

EDUCATORS WILL:

- follow this policy and the associated medical management policies and procedures
- inform the approved provider/nominated supervisor of communication from families that may impact changes and updates to the individual medical management plan
- notify the approved provider or nominated supervisor of any issues implementing this policy or procedure

- ensure medication is stored and administered in accordance with the *Administration of Medication Policy and Procedure*, including ensuring 2 educators are present during the administration of medication – 1 person administers the medication, and the 2nd person witnesses it
- follow medical management plans at all times, including in the event of a medical emergency
- closely monitor children and ensure any symptoms or signs of illness are responded to immediately, including notifying families as soon as possible
- participate in the review of risk assessments and implement changes as required
- ensure medication and medical management plans are taken on all excursions and during emergency rehearsals and evacuations
- maintain current accredited first aid qualification, emergency asthma management and emergency anaphylaxis management training (as required)
- undertake any other specific training as required for individual medical conditions.

FAMILIES WILL ENSURE:

- the Service enrolment form is completed in its entirety, providing specific details about the child's medical condition
- they acknowledge they have received/or are provided access to the Service's *Medical Conditions Policy* and *Administration of Medication Policy* at the time of enrolment
- they provide management with accurate information about their child's health needs, allergies, medical conditions, and medication requirements on the enrolment form during the enrolment process or as soon as they become aware of their child's health care needs
- they provide the Service with a medical management plan prior to enrolment of their child. In the case of asthma, anaphylaxis or diabetes, this would be:
 - an individual Asthma or Anaphylaxis Action Plan
 - an individual Diabetes Management Plan
- they consult with management to develop a risk minimisation plan and a communication plan
- they notify the Service if any changes are to occur to the medical management plan or risk minimisation plan through StoryPark, email, communication plan and/or meetings with the nominated supervisor
- they provide adequate supplies of the required medication, and medical authorisation on the *Administration of Medication Record*
- their child's name is clearly written on all medication provided to the Service
- they provide any updated information relating to the nature of, or management of their child's diagnosed medical condition and associated health care provided by a medical practitioner

- they provide written authorisation for their child's medical management plan to be displayed in the Service.

MEDICAL MANAGEMENT PLAN

Any medical management plan provided by a child's parents/guardians and/or registered medical practitioner should include the following:

- specific details of the diagnosed health care need, allergy or relevant medical condition
- supporting documentation (if required)
- a recent photo of the child
- current medication and dosage prescribed for the child
- if relevant, what triggers the allergy or medical condition
- first aid/emergency response that may be required from the Service
- any medication and dosage that may be required to be administered in case of an emergency
- further treatment or response if the child does not respond to the initial treatment
- when to contact an ambulance for assistance
- contact details of the medical practitioner who signed the plan
- the date by which the plan should be reviewed
- a copy of the medical management plan will be displayed in areas where educators and staff can easily view it, but it will be harder for the public to view, ensuring the children's privacy
- the Service must ensure the medical management plan remains current at all times
- educators and staff are updated immediately about any changes to a child's medical management plan

RISK MINIMISATION PLAN

All children with a diagnosed health care need, allergy or relevant medical condition must have a risk minimisation plan in place.

The approved provider / nominated supervisor will arrange a meeting with the parents/guardians as soon as the Service has been advised of the diagnosed health care need, allergy or medical condition. During this meeting, a risk minimisation plan will be developed in consultation with the parents/guardians to ensure:

- that the risks relating to the child's specific health care need, allergy, or medical condition are assessed and minimised

- that practices and procedures in relation to the safe handling, preparation, serving and consumption of food are developed and implemented if required
- that the parents/guardians are notified of any known allergens that pose a risk to a child, and strategies for minimising the risk are developed and implemented
- practices are developed and implemented to ensure that all staff members and volunteers can identify the child, the child's medical management plan and the location of the child's medication
- that the child does not attend the Service without medication prescribed by the child's medical practitioner in relation to the child's specific health need, allergy or medical condition
- risk minimisation plans are reviewed at least annually and/or revised with each change in the medical management plan in conjunction with parents/guardians
- all relevant information pertaining to the child's health and medical condition is communicated to parents/guardians at the end of each day by educators
- parents/guardians are notified by educators in advance of any special activities taking place, such as celebrations, sporting events or excursions, so plans for safe inclusion can be developed
- appropriate hygiene practices are followed by educators when managing medical conditions in accordance with the *Hand Hygiene Policy* and *Dealing with Infectious Diseases Policy*.

COMMUNICATION PLAN

Our communication plan explains how relevant staff members, students and volunteers are informed about the medical management and risk management plans and how the parents/guardians of the child can communicate any changes to the diagnosed health care need, allergy or medical condition.

A communication plan will be created after a meeting with the parents/guardian to ensure:

- all relevant staff members, students and volunteers are informed about the *Medical Conditions Policy*, the medical management plan and risk minimisation plan for the child; and
- an individual child communication book/document is created so that parents/guardians can communicate any changes to the medical management plan and risk management plan for the child in writing.

Parents/guardians are required to notify the Service if any changes are to occur to the medical management plan or risk minimisation plan through StoryPark, email, communication plan and/or meetings with the nominated supervisor. At all times, families who have a child attending the Service with a diagnosed healthcare need, allergy or medical condition will be provided with a copy of this policy and other relevant policies specific to their child's health management and communication plans.

RESOURCES

[ASCIA anaphylaxis e-training for schools and children's education/care](#)

[ASCIA Action Plans](#)

[Coeliac Australia](#)

[Cystic Fibrosis Australia](#)

[Diabetes Australia](#)

[Epilepsy Foundation](#)

[National Asthma Australia](#)

[National Allergy Strategy](#)

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Medical Conditions Policy* will be evaluated and reviewed on an annual basis or earlier if there are changes to legislation or ACECQA guidance, or any incident related to our policy. Feedback will be requested from children, families, staff, educators and management, and notification of any change to policies will be made to families within 30 days.

RELATED RESOURCES

Administration of Medication Procedure	Medication Update Letter to Families
Administration of Medication Record	Medical Conditions Register
Authorisation to Display Medical Management Plan	Medical Management Plan
Managing Medical Conditions Procedure	Medical Risk Minimisation Plan
Medical Communication Plan	Notification of Changed Medical Status

SOURCES

Australian Children's Education & Care Quality Authority. (2026). [Guide to the National Quality Framework](#)

Australian Children's Education & Care Quality Authority (ACECQA). 2021. [Dealing with medical conditions in children](#)

Australian society of clinical immunology and allergy. ASCIA. <https://www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis>

Early Childhood Australia (2016). *Code of Ethics*.

[Education and Care Services National Law Act 2010](#)

[Education and Care Services National Regulations 2011](#)

Federal Register of Legislation *Privacy Act 1988*.

National Health and Medical Research Council. (2024). [Staying Healthy: preventing infectious diseases in early childhood education and care services \(6th Ed.\)](#). NHMRC. Canberra.

Occupational Health and Safety Act 2004.

REVIEW

POLICY REVIEWED	JUNE 2026	NEXT REVIEW DATE	JUNE 2027
VERSION NUMBER	V15.06.26		
MODIFICATIONS	• annual policy maintenance • edits for clarity and consistency • additional points re: paramount consideration • sources and hyperlinks checked and updated as required		
PREVIOUS MODIFICATIONS			
JUNE 2025	• annual policy maintenance • added review of practices following any medical emergency at the Service • added section- Educators will • sources checked for currency and updated as required		
JUNE 2024	• annual policy maintenance • added reference to other key policies for managing asthma, anaphylaxis and diabetes within Service • method for families to notify Service of changes to child’s medical management plan added • minor changes within policy as best practice • updated Childcare Centre Desktop Resources to support implementation of this policy		