CYSTIC FIBROSIS MANAGEMENT POLICY

Cystic fibrosis is a genetic disorder that predominantly affects the lungs and digestive system (Cystic Fibrosis Australia, 2026). Cystic fibrosis is usually diagnosed at birth. People with cystic fibrosis produce thick, sticky mucus in their lungs, airways, and digestive system, which physically obstructs the lungs and digestive tract and causes recurring infections and long-term damage. Our Service will make every effort to fully include children with cystic fibrosis in our program and provide a safe and healthy environment for them.

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.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
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, practiced and implemented.

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.167	Offence relating to protection of children from harm and hazard
S.174	Offence to fail to notify certain information to Regulatory Authority

12	Meaning of a serious incident
77	Health, hygiene and safe food practices
85	Incident, injury, trauma and illness policies and procedures
87	Incident, injury, trauma and illness record
88	Infectious diseases
90	Medical conditions policy
91	Medical conditions policy to be provided to parents
92	Medication record
93	Administration of medication
95	Procedure for administration of medication
101	Conduct of risk assessment for excursion
136	First aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
176	Time to notify certain information to Regulatory Authority

RELATED POLICIES

Acceptance and Refusal of Authorisations Policy Administration of First Aid Policy Administration of Medication Policy Dealing with Infectious Diseases Policy Enrolment Policy Hand Hygiene Policy	Immunisation Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Nutrition and Food Safety Policy Privacy and Confidentiality Policy Supervision Policy

PURPOSE

This policy aims to provide a basic understanding and awareness of the possible needs of children with cystic fibrosis. It does not constitute a replacement for medical advice or instructions provided by an individual child's family or health care professionals.

Our Service prioritises children's safety, rights and best interests. We will ensure all staff members know how to support children diagnosed with cystic fibrosis. This includes reducing infection risks through effective hygiene practices, monitoring for symptoms, following each child's medical management plan, and administering medications. We aim to create and maintain a safe and healthy environment for all children enrolled at the Service, where children diagnosed with cystic fibrosis can fully participate.

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 This includes our responsibility to provide:

a. a safe environment free from foreseeable harm, and
b. adequate supervision for all children.

Staff members, including relief staff, must have adequate knowledge of cystic fibrosis and the individual needs of a child/children in attendance with cystic fibrosis.

BACKGROUND

Cystic fibrosis is a genetic disorder present at birth that affects the cells in the body that make mucus, sweat, and digestive fluids, causing the lungs and digestive system to get clogged with mucus. This frequently results in recurrent infections. It is a complex condition and affects each person differently, including how severe their symptoms may be. There is no known cure, but treatment can help manage the condition (Cystic Fibrosis Australia, 2020).

Children with cystic fibrosis are likely to have a team of health professionals, which may include:

- clinical nurse
- gastroenterologist
- dietitian
- physiotherapist
- respiratory physician
- social worker

Symptoms of cystic fibrosis can be different for each child, and include:

- a persistent cough that sometimes produces thick mucus
- difficulty breathing and wheezing
- repeated lung and sinus infections
- salty sweat – in hot weather, salt loss may also create muscle cramps or weakness
- frequent foul-smelling, greasy and/or bulky stools, bloating, diarrhoea or constipation
- constant hunger or loss of appetite
- poor growth and low body weight
- tiredness, lethargy or inability to engage in physical play or exercise.

TREATMENT

The treatment for cystic fibrosis is ongoing and lifelong and varies from child to child. However, it generally involves:

- daily physiotherapy to clear the lungs
- exercise to assist in clearing the airways and building core strength
- the use of a nebuliser to assist in opening the airways
- a nutritious diet high in calories, salt and fat. In some cases, extra calories/salt/fats are required, but not always – the dietitian and families will provide individual information on dietary requirements.
- Medications, including (as required):
    - enzyme capsules taken with food to aid digestion: Children with cystic fibrosis vary in their ability to digest food naturally – some may need these while others will not
    - salt tablets
    - antibiotics as required to treat lung infections
    - anti-inflammatory medication to prevent airway passage inflammation
    - mucus thinners to assist the child in coughing up mucus and decreasing the risk of lung infection
    - bronchodilators to open and relax the muscles around the airways.

DEHYDRATION

Children with cystic fibrosis can lose extra salt in their sweat, which can lead to dehydration. Signs of dehydration include:

- fewer wet nappies than normal
- dark sunken eyes

- dry lips or skin
- crying without tears
- dark yellow urine
- rapid breathing
- being very tired or unusually sleepy
- being drowsy and/or lethargic
- salt crystals on the skin

EARLY WARNING SIGNS OF A LUNG INFECTION

As children with cystic fibrosis are likely to frequently develop lung infections it is important to be aware of the early warning signs, which include:

- coughing more than normal, or a 'different' sounding cough
- coughing up more mucus than normal or a change in the colour of coughed-up mucus
- wheezing or trouble breathing, including while eating / feeding
- reduced appetite
- decreased energy
- fever

INFECTION CONTROL

Minimising the risk of infection for children with cystic fibrosis is imperative for their ongoing health. Precautions to take include:

- frequent and thorough hand and respiratory hygiene
- encouraging the child to wash hands after coughing, and at all other usual times (after toileting, before eating etc.)
- teaching children to cough or sneeze into their inner elbow or use a tissue to cover the nose and mouth, putting tissues into a rubbish bin straight away and clean hands with either soap and water or hand sanitiser
- keeping a child with cystic fibrosis away from other children with a cold or who are otherwise ill
- ensuring children's immunisations are up to date
- cleaning and drying all medical equipment thoroughly
- not allowing the child with cystic fibrosis to share cups or eating utensils
- not leaving containers of water lying around where germs that cause lung infections can breed
- keeping the rooms dry and well ventilated.

IMPLEMENTATION

We will involve all educators, families, and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The Service will adhere to privacy and confidentiality procedures when dealing with individual health needs. All educators and volunteers at the Service must follow a child's medical management plan in the event of an incident related to the child's specific health care need or medical condition. A site-specific risk minimisation plan and communication plan will be developed with parents/guardians to minimise risks and set clear communication strategies for the child's safety.

THE APPROVED PROVIDER/MANAGEMENT/NOMINATED SUPERVISOR WILL ENSURE:

- that obligations under the Education and Care Services National Law and Education and Care Services National Regulations are met
- all decisions and actions prioritise children's safety, rights and best interests
- all staff, educators, students, visitors and volunteers understand and adhere to this policy, the Service's *Medical Condition Policy* and relevant procedures
- upon employment at the Service all staff will read and be aware of all medical condition policies and procedures, including the *Cystic Fibrosis Management Policy*
- any child enrolled at the Service with cystic fibrosis will require a medical management plan completed by the child's medical practitioner/specialists before commencing at the Service
- all staff are aware of the medical management plan and have procedures in place for ensuring the child's safety, health and wellbeing
- a risk minimisation plan has been developed in consultation with the parents/guardians of the child prior to commencing education and care at the Service
- a communication plan is developed in consultation with the parents/guardians of the child to encourage ongoing communication regarding the status of the child's medical condition, this policy, and its implementation
- risk assessments are developed before any excursion or community engagement
- staff primarily responsible for caring for the child participate in specific training about cystic fibrosis and are aware of strategies to support children and manage the condition
- at least one educator, staff member or nominated supervisor is in attendance and immediately available at all times children are being cared for by the Service who:
    - holds a current ACECQA approved first aid qualification
    - has undertaken current ACECQA approved emergency asthma management and
    - current ACECQA approved emergency anaphylaxis management training

- staff preparing food are trained in food preparation and food requirements for the child with cystic fibrosis, e.g. children may need more calories and salt in their diet
- families of all children with cystic fibrosis provide all necessary medications clearly labelled with the child's name
- the immunisations of all children attending the Service are kept up to date (see *Immunisation Policy*)
- rooms and areas occupied by children are kept dry and well ventilated
- all staff adhere to high levels of hygiene at all times
- all staff maintain written records of medications administered to a child with cystic fibrosis (see *Administration of Medication Policy*)
- that medication is received and administered in accordance with the *Administration of Medication Policy*, that staff will follow the child's medical management plan, and that in an emergency, emergency services will be contacted first, and that parents/guardians of the child will be notified as soon as practicable
- communication between management, educators, staff and parents/guardians regarding the Service's *Cystic Fibrosis Policy* and risk minimisation strategies are reviewed and discussed regularly to ensure compliance and best practice reflecting latest research evidence
- all staff members are able to identify the early warning signs of lung infection for children with cystic fibrosis attending the Service
- children with cystic fibrosis are not discriminated against in any way
- children with cystic fibrosis can participate in all activities safely and to their full potential
- to communicate any concerns with parents/guardians regarding the management of children with cystic fibrosis at the Service.

EDUCATORS WILL ENSURE:

- they are aware of the Service's *Cystic Fibrosis Management Policy* and of the medical management plan, risk minimisation plan and communication plan for each individual child with cystic fibrosis
- maintain current ACECQA approved first aid qualifications
- they learn about how cystic fibrosis affects children and the best ways to support them whilst at the Service, e.g. through specific training
- they can identify the early warning signs of a lung infection
- they can identify the signs of dehydration
- children with a cold or other illness are accommodated separately from children with cystic fibrosis while waiting to be collected from the Service by their parent/guardian

- that a copy of the child's medical management plan and any required medication accompany the child on excursions, during transportation, and during evacuations, lockdowns and rehearsals
- to adhere strictly to the child's cystic fibrosis medical management plan and the *Administration of Medication Policy*
- to complete an *Administration of Medication Record following administration of medication*
- to follow the child's medical management plan. In an emergency, they will contact emergency services first and then notify the child's parents/guardians as soon as practicable
- to adhere to the highest levels of hygiene when educating and caring for a child with cystic fibrosis. For example, high levels of hand hygiene, close supervision during meal and snack times to prevent sharing of cups etc.
- easy access to a water bottle or salty drinks (if needed) for children with cystic fibrosis, especially during warmer weather, with reminders to stay hydrated
- extra hygiene precautions are taken when there is an outbreak of an illness, including the common cold, such as additional cleaning of surfaces, door handles, tables, toys, and equipment and wearing of face masks
- to consult with the parents/guardians of children with cystic fibrosis in relation to the health and safety of their child, and the supervised management of the child's condition
- communicate any concerns to parents/guardians if a child's cystic fibrosis is limiting their ability to participate fully in all activities.
- that children with cystic fibrosis are not discriminated against in any way
- that children with cystic fibrosis can participate in all activities safely and to their full potential, ensuring an inclusive program, whilst ensuring a high level of supervision to ensure children with cystic fibrosis do not over-exert themselves
- families are advised of any early warning signs of a lung infection as soon as practicable.

FAMILIES WILL:

- ensure all details on their child's enrolment form are completed prior to commencement at the Service
- read the Service's *Cystic Fibrosis Management Policy* and *Medical Conditions Policy*
- inform staff, either on enrolment or on initial diagnosis, that their child has cystic fibrosis
- provide a copy of their child's medical management plan to the Service, ensuring it has been prepared in consultation with, and signed by, a medical practitioner
- consult with management to develop a risk minimisation plan and communication plan to assist in managing their child's medical condition

- provide an adequate supply of cystic fibrosis medications (as required)
- notify staff in writing of any changes to their child's medical management plan
- communicate regularly with educators/staff in relation to the ongoing health and wellbeing of their child, and the management of their child's cystic fibrosis
- encourage their child to learn about their cystic fibrosis, and to communicate with Service staff if they are experiencing discomfort or difficulty in breathing.

CONTINUOUS IMPROVEMENT/REFLECTION

Our *Cystic Fibrosis Management 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. All families will be notified 14 days before any policy change that may have a significant impact on the provision of education and care to any child enrolled at the Service or the family's ability to utilise the Service.

RESOURCES

Cystic Fibrosis Western Australia. (2019). A guide to cystic fibrosis for early childhood educators

Cystic Fibrosis Western Australia. CF Education at Your School

SOURCES

Australian Children's Education & Care Quality Authority. (2021) *Dealing with medical conditions in children*
Australian Children's Education & Care Quality Authority. (2026). *Guide to the National Quality Framework*
CF Smart: CF Smart: A free resource for teachers and educators to improve understanding of cystic fibrosis care in education settings
Cystic Fibrosis Australia. What is CF?
Cystic Fibrosis Western Australia. (2019). A guide to cystic fibrosis for early childhood educators
Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2011
Healthdirect Australia. Cystic fibrosis (CF)

REVIEW

POLICY REVIEWED	JULY 2026	NEXT REVIEW DATE	JULY 2027
VERSION NUMBER	V8.07.26		
MODIFICATIONS	• annual policy review • edits made to improve clarity and consistency • child safety principles added - paramount consideration • information added in line with Cystic Fibrosis Australia resources		

	• added information related to first aid qualifications, the management of cystic fibrosis, and relevant responsibilities • sources updated
PREVIOUS MODIFICATIONS	
JULY 2025	• policy reviewed (note new date in policy review cycle) • minor additions/edits within policy • sources checked and updated as required
DECEMBER 2024	• annual policy maintenance- no major changes • minor edits in policy • sources updated as required