



WEST END STATE SCHOOL PARENTS & CITIZENS' ASSOCIATION

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4.7 Asthma, Anaphylaxis, Emergency Medication, and Health Management

The service recognizes that occasions may arise where emergency management procedures may need to be implemented to preserve the health and safety of children and staff. Such emergency management applies to situations where a parent/guardian requests the OSCHC service in writing to administer prescribed medication as directed by a medical practitioner, and/or assist with managing a specific health condition as well as where a particular emergency first aid response is needed.

In emergency situations, OSCHC educators may be required to administer medication to preserve the life, safety and health of a student. These emergencies may occur for students with diabetes, epilepsy, anaphylaxis and asthma. The possible medication requirements include administering inhaled medication for asthma, prescribed medications for epilepsy, diabetes and/or anaphylaxis. Medications for diabetes and anaphylaxis are usually injected by a pen device and are not intravenous.

Relevant Laws and other Provisions

The laws and other provisions affecting this policy include:

- *Education and Care Services National Law Act, 2010 and Regulations 2011*
- *Health (Drugs and Poisons) Regulation 1996*
- *Work Health and Safety Act 2011*
- *Commission for Children and Young People and Child Guardian Act 2000*
- *NQS Area: 2.1.1, 2.1.4; 2.3.3; 4.2.1; 6.1.1; 6.2.1; 7.1.2; 7.3.1, 7.3.2; 7.3.5.*
- *Policies: 4.6 – Medication, 4.10 – Anaphylaxis Management, 4.15 – Asthma, 9.2 – Enrolment, 10.8 – Information Handling (Privacy and Confidentiality), 10.9 – Risk Management and Compliance.*

Procedures

Parents will be requested, through the initial enrolment procedures (see Policy 9.2), to ensure that the service is made aware of any allergies or medical conditions that their child may be suffering, that may be exacerbated, triggered, occur, or otherwise impact upon their health and wellbeing, whilst in the care of the Service. This may include but is not limited to the following medical conditions:

- Any severity of asthma;
- Severe/anaphylactic allergies;
- Epilepsy;
- Diabetes.

Parents of children diagnosed with any of the above medical conditions must complete an Individual Health & Welfare Management Plan (IHWMP) for their child, providing the Service with a Personal Action Plan, outlining what to do in an emergency, developed in consultation with families, educators and the child's medical practitioner. Each plan shall be displayed in a clearly accessible area and be approved by the child's family/guardian, and may include the following:

- Guidelines for participation in specific activities if required, such as swimming or high level physical games and activities;
- Contact details and parent consent forms as required;
- Medical practitioner consent forms as required;
- Medication administration documentation.

Each IHWMP must be approved by the child's parent/guardian and medical practitioner as required and should be reviewed annually or as required by governing authorities.

The service shall take appropriate action to minimize, where possible, exposure to known allergens or triggers where children have been professionally diagnosed with moderate to severe asthma, anaphylaxis, diabetes, or epilepsy, and this information has been presented to the service with certification from a medical practitioner. This will include developing and implementing a Medical Risk Minimisation Plan for each affected child, which will include the following:

- Identification/information of possible allergens, triggers, reactions, warning signs and symptoms of possible emergencies, their severity, and how these will be managed and monitored within the service.
- Instructions on first-aid management from medical practitioner or recognised authority;
- Medication requirements, dosage and method of administration.
- Contact numbers for family, medical practitioner and ambulance;

The service will ensure that at least one educator with a current first-aid qualification and CPR qualification, anaphylaxis management and emergency asthma management training as required by the Education and Care Services National Regulations 2011, will be in attendance at any place children are being care for, and immediately available in an emergency, at all times that children are being cared for.

All educators shall have access to information about the children's medical conditions, medication and management procedures required in the following manner:

- All IHWMO will be available in a Medical Folder in the first-aid cupboard;
- All educators will be equipped with a key-ring lanyard, displaying the affected child's photo and brief description of their allergy/medical condition, as well as how to treat it;
- Individual children's health care and management plans shall be discussed on a regular basis with all educators at team meetings, including reviewing and signing the most recent and up-to-date 'Medical List'.

Each child shall have the appropriate medication, including EpiPens, asthma ventilators, and so forth, accessible to educators in a lockable medicine cabinet. Other appropriate medication shall be stored at the service for each child in clearly labelled and marked containers in a lockable medicine cabinet readily accessible by educators. Medication shall be taken as required on excursions and during emergency evacuations and lock-downs, in an appropriately secured/locked container readily accessible to administering educators.

Before accepting any medication required to treat a chronic and identified medical condition (including but not limited to Ventolin for asthma, EpiPens for anaphylaxis, or anti-histamines for allergies), senior-staff must ensure that the medication is in its original package with a pharmacist's label, which clearly states the child's name, dosage, means of dosage, frequency of administration, date of dispensing, and expiry date.

As the Service should already have the child's Medical Action Plan from their General Practitioner, outlining the reason for, and requirements of the medication, these forms of medication do NOT need a Medication Authority form. However, whenever they are administered to the child, staff-members do need to complete a record of Administration of Medication form, as per usual medications, as well as an Injury Report to notify parents.

For children who require regular, self-administered medication, for asthma, diabetes, or similar ongoing medications, parents will be required to advise the Coordinator in writing whether their child will be responsible for administering their own medication or will require supervision and full details of how, when (i.e. at what intervals) and by whom all such treatment is to be administered. Parents may be required to complete an Individual Health & Welfare Management Plan (IHWMP).

The Service reserves the right not to accept into care, any children diagnosed with anaphylaxis or any other medical condition that requires medication, where the parent has not provided the necessary medication, especially an EpiPen. By accepting any child under these circumstances, the Service is unable to fulfil its duty of care to the child and to the family.

In circumstances where medication requires transportation between the child's school/home and the service, the medication shall be signed in and out of the Service in appropriate record books by educators. Families may be requested to provide a spare EpiPen to be kept at the Service, if these arrangements are not suitable

A risk management strategy shall be devised to ensure:

- Medication is transported by a responsible adult person, and
- In circumstances where children arrive at the service without the required medication, appropriate procedures shall be followed to ensure that the medication becomes immediately accessible.

In the case of a child who has not been previously diagnosed with anaphylaxis, asthma, or another severe medical condition, the Service will do its best to assist the child with first-aid measures, including calling emergency services, if needed. Under no circumstances will the Service allow another child's EPIPEN to be used in the event a child suffers an anaphylactic reaction whilst at the Service. However, as asthma-puffers are more than one-use, the Service deems it an acceptable risk to administer one child's asthma-puffer to another child suspected of having an asthma-attack.

In the event of emergency first aid being required, procedures as set out in the Illness and Injury Policy (see Policy 4.5) will be followed.

Written records and reports regarding implementing emergency health and medical procedures shall be completed by the administering educator within 24 hours and lodged with the Coordinator or management. Management shall ensure that written reports are lodged with relevant authorities within the required time frame.

Date Developed: May 2009	Date Ratified: June 2009	Date Reviewed: 15/03/2018
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