



**ACT**  
Government  
Education

# ACT PUBLIC PRESCHOOLS MEDICAL CONDITIONS PROCEDURE

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**Education Directorate**

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## Glossary

Term	Definition
<b>Regulatory authority</b>	Children’s Education and Care Assurance (CECA), who undertake investigation, compliance, enforcement and assessment and rating functions against the <a href="#">National Quality Standard</a> .
<b>Approved provider</b>	Approved providers must operate approved services that meets the obligations in the <a href="#">National Law</a> . Approved providers must exercise effective leadership, governance and management to meet their legal obligations. Providers must also employ suitably qualified and experienced nominated supervisors, educational leaders, coordinators and educators.  In the case of government preschools in the ACT, the approved provider is the ACT Education Directorate.
<b>Setting</b>	An early childhood education and care service (centre-based) under the <a href="#">National Law</a> that provide education and care services. For the purposes of this procedure, these settings are public preschools (managed by ACT Education Directorate as the approved provider and undertaking the government preschool program for four-year-olds).
<b>Nominated supervisor</b>	As part of an application for service approval, approved providers must identify the nominated supervisor for the service. The nominated supervisor must be over 18 years old, have adequate knowledge and understanding of the provision of education and care to children, and have the ability to effectively supervise and manage an education and care service.  In the case of government preschools in the ACT, the nominated supervisor tends to be the principal of the associated school campus.

This document relates to obligations under **Regulation 90** of the [Education and Care Services National Law](#). **00048/17** is the unique identifier of this document. It is the responsibility of the user to verify that this is the current and complete version of the document. Current documents are available on the [Directorate’s website](#).

<b>Person in day-to-day charge</b>	<p>The approved provider and/or nominated supervisor needs to designate a responsible person to be placed in day-to-day charge of a service if the approved provider and/or nominated supervisor is not present. The person in day-to-day charge must be over 18 years old, have adequate knowledge and understanding of the provision of education and care to children, and have the ability to effectively supervise and manage an education and care service.</p> <p>The person nominated to be in day-to-day charge must accept this responsibility in writing. The nominated person must have adequate knowledge and understanding of the provision of education and care to children and be able to effectively manage a service.</p> <p>A record that demonstrates who is the responsible person in day-to-day charge should be in place. Being in day-to-day charge of a service does not place any additional legal responsibilities on the person under the <a href="#">National Law</a>. The responsibilities relevant to educators under the <a href="#">National Law</a> continue to apply.</p> <p>An approved provider does not have to appoint a person in day-to-day charge if a nominated supervisor(s) or an approved provider is to be the responsible person in attendance during service operational hours.</p>
<b>Educators</b>	Qualified staff who work directly with children to meet their developmental and educational needs. It includes staff who are tertiary qualified teachers.
<b>Educational leader</b>	The <a href="#">National Law</a> requires approved providers to designate, in writing, a suitably qualified and experienced educator, coordinator or other individual as educational leader.
<b>Blue Book</b>	Personal Child Health Record used to record a child's health, illnesses, injuries, growth and development.
<b>Centre-based service</b>	An education and care service other than a family day care service.
<b>Obligations to notify</b>	Approved providers and services have an obligation to notify CECA about incidents, complaints and changes to information about the approved provider or approved service. This includes serious incidents, complaints and circumstances where the health, safety or wellbeing of children may have been put at risk.
<b>Quality improvement obligations</b>	<p>Approved provider must ensure a Quality Improvement Plan (QIP) is in place for each service.</p> <p>The QIP is for providers and services to self-assess their performance in delivering quality education and care and to improve that performance. The QIP should reflect the unique context of a service and be communicated in a way that is meaningful.</p>
<b>Compliance obligations</b>	<p>The National Regulations detail the minimum operational requirements for services. Providers, service leaders and educators. There should be embedded processes in place to monitor compliance within each setting.</p> <p>This <a href="#">Self-assessment of Compliance Tool</a> has been developed by CECA to assist providers, service leaders and educators to gain a knowledge and application of the National Regulations.</p>

## Obligations

ACT Public Preschools must meet the obligations of the [National Law](#), including Regulation 168, which states that education and care services must have policies and procedures in relation to the following:

- health and safety, including matters relating to:
  - nutrition, food and beverages, and dietary requirements;
  - sun protection;
  - water safety, including safety during any water-based activities;
  - the administration of first aid; and
  - sleep and rest for children.
- incident, injury, trauma and illness procedures;
- dealing with infectious diseases;
- dealing with medical conditions in children;
- emergency and evacuation;
- delivery of children to, and collection of children from, education and care service premises;
- excursions;
- providing child-safe environments;
- staffing, including:
  - a code of conduct for staff members;
  - determining the responsible person present at the service; and
  - the participation of volunteers and students on practicum placements.
- interactions with children;
- enrolment and orientation;
- governance and management of the service, including confidentiality of records;
- the acceptance and refusal of authorisations;
- payment of fees and provision of a statement of fees charged by the education and care service; and
- dealing with complaints.

## 1. Overview

- 1.1. This procedure outlines strategies for supporting preschool children who have been identified with specific medical conditions.
- 1.2. This procedure relates to obligations under Regulation 90 of the [National Law](#) and should be used to ensure compliance against the Compliance Guide.

## 2. Rationale

- 2.1. It is important that all educators are aware of the health requirements of all children and there are effective processes to support and monitor these health needs.
- 2.2. The following procedures are in place to support and manage students in the preschool environment who may have an ongoing medical condition. Upon enrolment, parents/carers are required to provide a General Medical Information and Consent Form and an Emergency Treatment Plan for identified medical conditions. The Emergency Treatment Plan will detail the child's specific health needs including administration of medication and other actions required to manage the child's condition. Specific training for staff may be required depending on the medical condition.

## 3. Procedures

### 3.1. Health records

Student's health records must be stored securely at the front office. All students are asked to provide evidence of immunisation or a letter from a medical professional stating the child is not immunised. Parents are advised through the preschool handbook of procedures relating to immunisation and exclusion periods. Schools are to identify children with medical conditions on enrolment and complete the required plans before the child commences at the preschool.

### 3.2. Individual Medical Management Plans (MMPs)

Information regarding medical conditions must be located in a prominent area so that all staff members and volunteers have access to the information, particularly in emergency situations. It is the responsibility of all educators to ensure relief staff or volunteers are made aware of the location of this information. These plans are formulated between families, medical professionals and the school.

### 3.3. Information required from parents

Parents and educators need to work together to manage the medical conditions and administration of medication for children during their time at preschool. Any relevant information that can help in the management of such conditions and illnesses should be communicated to educators as soon as practicable. In particular, parents/carers are responsible for:

- completing the General Medical Information and Consent Form during preschool enrolment, including indicating any known medical conditions;

- where applicable, completing the Management and Emergency Treatment Plan in consultation with the child's medical practitioner. This plan must be signed by the child's medical practitioner;
- contributing to the development of a Risk Minimisation (RMP) and Communication Plan (CP);
- advising educators of any changes to the child's medical condition or treatment, for example, information relating to changes to known allergens, medication and side effects; and
- advising educators of the child's general wellbeing or if there are any circumstances that may impact on their medical condition.

3.4. In the unlikely event that parents do not provide a MMP, RMP and/or CP, school personnel are advised to develop the necessary documentation and keep a record of attempts to have parents agree to the plans.

### 3.5. *Self-administration of medication*

Children are NOT permitted to self-administer medication while at preschool.

### 3.6. *Storage of medications*

Medication must be given directly to educators and not left in the child's bag.

All prescribed medications must have the original pharmacist's label, or details provided by the doctor giving the child's name, name of medication, dosage, frequency and way it is to be administered, date of dispensing and expiry date.

All medication must be stored safely out of sight of children, but readily accessible to educators, and in accordance with the medication requirements.

Medication required for Emergency Treatment Plans are kept in a box clearly labelled with the name and a photo of the child with the First Aid Plan and medication dosage easily accessible.

### 3.7. *Risk Minimisation (RMPs) and Communication Plans (CPs)*

Educators must write an RMP, accompanied by a CP for any student enrolled at preschool with a medical condition. These plans must be created in collaboration with the family and other educators at the service. They will also, where possible, be informed by written information and plans from the child's doctor.

The risk minimisation plan must:

- ensure the risks relating to the child's specific health care needs are assessed and minimised;
- include the development and implementation of relevant food handling, preparation and storage procedures;
- identify any known allergens that pose a risk to children and strategies to inform

parents and minimise any risks are developed and implemented;

- include the process to ensure that all staff can identify the child, the child's medical management plan and locate the child's medication; and
- ensure practices and procedures that require the child not to attend without any relevant medication specific to the health need.

Copies of the plans must be kept in the child's files in the front office as well as any individual file located in the preschool office.

### 3.8. *Administering medication*

Parents/guardians are to provide written authorisation on the relevant medication forms. The following procedure will be followed when giving medication to students:

- check written authorisation from parents/caregivers;
- check medication does not exceed its use by date and is supplied in its original package;
- check the medication displays the child's name;
- store the medication in the lockable first aid boxes located in both preschools; and
- use medication record form, to record giving medication to children, ensure that another person checks dosage and witnesses the administration of medication (there must be two signatures).

### 3.9. *Suspected infectious disease*

If there is a child enrolled who is diagnosed with an immune disease or who is susceptible to [infectious diseases](#), staff will contact the family immediately if they are made aware of a suspected diagnosis of an infectious disease. These families will be able to make the decision in relation to their child's participation in the program and may choose to keep the child at home during the time which the infectious disease is occurring in the environment.

### 3.10. *Medical conditions policy to be provided to parents*

A copy of the ACT Public Preschool Medical Conditions procedures is to be provided to the parent of a child enrolled at the preschool if the preschool is aware that the child has a specific health care need, allergy or other relevant medical condition

## 4. **Contact**

- 4.1. The Director, School Improvement is responsible for this procedure.
- 4.2. For support contact School Operations on 6205 3313 or email [SchoolOperations@act.gov.au](mailto:SchoolOperations@act.gov.au)

## 5. **Monitoring and review**

- 5.1. The procedure owner will be responsible for monitoring the procedure through

annual scans. A full review will occur as necessary, or within a three-year period.

## 6. Complaints

- 6.1. Any concerns about the application of this procedure or the procedure itself, should be raised with:
- the school principal in the first instance;
  - the Directorate Feedback and Complaints team on (02) 6205 5429 or through the [online form](#); and
  - ACT Education's Regulatory Authority, Children's Education and Care Assurance on [\(02\) 6207 1114](#) or [complaintsCECA@act.gov.au](mailto:complaintsCECA@act.gov.au).
- 6.2. For more information also refer to the [Complaints Policy](#) on the Directorate's website.

## 7. Related Policies and Implementation Documents

- First Aid Policy
- First Aid General Procedure
- Administration of Student Medication and Complex Health Care Procedure
- Known Medical Conditions Consent Form
- Known Medical Conditions Response Plan
- Anaphylaxis Management Procedure
- Diabetes Management Procedure
- Epilepsy Management Procedure
- Asthma Management Procedure
- Medical Authorisation Administration Record Diabetes
- HAAS Policy and Procedure Flow Chart
- Administration of Analgesics Procedure
- Letter Medical Conditions
- Additional Information
- ASCIA Action Plans
- EDU ACT Health Model
- Asthma Chart
- HAAS Implementation Guide

## 8. References

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

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- ACT Education Directorate policies and procedures relating to health, such as the Infectious Diseases Policy and COVID-19 Management Strategy.