

EBASCA Medical Condition Risk Minimisation & Communication Plan

Please note: Separate plans are required for Anaphylaxis, Allergy and Asthma for each child in the family, where applicable.

Please complete the details below to assist us effectively avoid triggers and minimise risk factors whilst your child is at service, in relation to their medical condition/diagnosis.

Child Information		
Child Name		
Date of Birth	___ / ___ / ____	
Specific health care needs or diagnosed medical condition (Please tick)	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> Anaphylaxis</div> <div style="width: 50%;"><input type="checkbox"/> Epilepsy</div> <div style="width: 50%;"><input type="checkbox"/> Asthma</div> <div style="width: 50%;"><input type="checkbox"/> ASD</div> <div style="width: 50%;"><input type="checkbox"/> Diabetes</div> <div style="width: 50%;"><input type="checkbox"/> ADHD</div> <div style="width: 100%;"><input type="checkbox"/> Allergy _____</div> <div style="width: 100%;"><input type="checkbox"/> Other _____</div> </div>	
Signs and symptoms of the medical condition as it presents for the child named on this form		
Medical Action Plan provided? (prepared by GP/medical practitioner)	<input type="checkbox"/> Yes <input type="checkbox"/> No	OFFICE USE Date received ___ / ___ / ____ Name: _____ Review date: ___ / ___ / ____
Name of prescribed medicine and dosage	Medication: _____ Dosage: _____ Expiry: ___ / ___	
Medication Administration form completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	OFFICE USE Date received ___ / ___ / ____ Name: _____ Review date: ___ / ___ / ____
Is the child receiving support from specialist services e.g. Hearing support, speech pathologist, OT?		

Emergency Contacts	
First Emergency Contact Name	
Relationship to child	
Contact Numbers	Mobile:
	Home:
	Work:
Second Emergency Contact Name	
Relationship to child	
Contact Numbers	Mobile:
	Home:
	Work:

Identification of Triggers/Risks and Mitigation Strategies – Parent to complete	
<i>Please detail risks and/or triggers for your child and the corresponding strategy to help us mitigate and manage accordingly</i>	
Risk / Triggers	Strategy
<i>Eg. Child cannot eat eggs but can sit next to another child eating eggs. Anaphylaxis reaction if egg ingested</i>	<i>Ensure child is not served egg, or any food products including egg. This includes baked goods, mayonnaise. Follow action plan in the event of exposure and symptoms of anaphylaxis attack</i>
<i>Eg. Child can suffer an asthma attack when crying, emotional or anxious etc</i>	<i>Where possible help child avoid situations that cause upset. When child is emotional reassurance from an adult is helpful, as well as distraction from the source of stress</i>

Strategies for Minimising Risk – Service Procedures <i>Communication procedures are italicised</i>		
Tasks/Identification of hazards	Strategies to eliminate risk	OFFICE USE
Identify child at risk	<p>Information on enrolment form to be checked before first attendance at the service</p> <p><i>Dietary/Medical lists updated and displayed clearly for Educators in classroom and canteen</i></p> <p><i>Names and photos of children with Anaphylaxis, Asthma or allergens displayed clearly at the service</i></p>	
Inform all families at the service that a child may be at risk	<i>Notice displayed at front door detailing a child with allergy or anaphylaxis in attendance at the service, and allergens. Privacy of the child will be maintained</i>	
Notification of Staff	<p><i>Educators are updated regarding child's medical condition and corresponding Action Plan, Risk Minimisation Plan and medication.</i></p> <p><i>New staff updated as part of their orientation process</i></p>	
Staff Training	<p>Responsible Persons are all trained in First Aid (HLTAID004). Other permanent and casual staff are trained in First Aid also. Renewed every 3 years</p> <p><i>First aid trained staff listed on First Aid poster</i></p>	
Prescribed Medication expiry noted	On receipt of medication the expiry date will be noted on the Management Team's shared calendar with a 1 month reminder for follow up with the parent for replacement	
Administration of Medication	<p>In accordance with Action Plan provided by parent</p> <p><i>Authorisation obtained from parent</i></p> <p>Medication form completed by staff, and signed by witness (must be another staff member)</p> <p>There will always be one staff member on duty with a first Aid certificate authorised to administer medication. That staff member will be aware of procedures to handle, store, administer and dispose of any device used in the management of anaphylaxis and asthma.</p>	
Storage of Medication	<p>Medication to be clearly labelled, in its original packaging and with an expiry date</p> <p>Service to store spare auto-injector and asthma medication which will be administered in an emergency where the supplied medication is ineffective</p> <p>Medications to be stored in a pouch with the child's name, action plan and photo at the first aid area of the classroom.</p>	

Location of Medication	<i>Location of medication communicated to Educators at time of orientation. Any change in storage arrangements to be communicated to all staff via written notice.</i>	
Access to this form for Educators	<i>This document will be accessible to Educators at the service premises for the purposes of implementing safeguards and strategies listed herein. This form will be stored securely</i>	
Food preparation	Afternoon tea and breakfast will be prepared and served to ensure no cross contamination for children with allergies Kitchen surfaces cleaned and sanitised before & after food is prepared.	
Food consumption & Hygiene (Educators)	All staff to wash hands before each shift and be aware of their own food consumed either at the Service or prior to start of their shift. Staff can eat breakfast at the service but should not bring food from home – only eat from supplies at the service to reduce risk of any allergen introduction into the play environment. <i>This will be noted in the staff handbook which all staff must read as the time of employment</i>	
Atmospheric/Environmental Allergens	Management Team to monitor atmospheric allergen notices by the RFS or BOM, particularly during times of likely increase in smoke due to backburning. Asthmatic children to be directed towards indoor activities when increased levels of smoke, pollution or dust are present. Asthmatic children to remain indoors or closely monitored by supervising staff if outdoors during very cold weather. Particularly during the first hour of before school care and in the late afternoon when temperatures may drop in autumn/winter months. Child observed to be wheezing will be attended to for appropriate first aid attention and treatment	
Gardening/Nature activities	Staff aware of best practice to minimise risk of inhalation of dust, soil or other airbourne garden material that may induce an asthmatic event.	
Programmed activities	Staff to consider allergen impact of any planned activity for the program. A risk assessment may be required	

Strategies for Minimising Risk – Parent to Action <i>Communication procedures are italicised</i>		
Tasks/Identification of hazards	Strategies to eliminate risk	OFFICE USE
Provision of Action Plan	The parent will supply an updated Action Plan to the service annually (or – whenever it is updated or expired). This Action Plan should include a current photo of the child, and will be prepared by a medical practitioner	
Inform Service of any new medical condition or changes to existing condition	<i>The parent will promptly inform the Management Team in writing and update enrolment information of any changes to the child's medical condition and associated management – before the child's next attendance</i>	
Menu options and alternatives for children with food-based allergy	<i>In consultation with the Management Team the parent will provide suggestions as to suitable alternatives for their child.</i> Where possible the service will provide these alternatives as part of the menu for breakfast and afternoon tea	
Use of spacer for children with asthma	Parent will provide reusable spacer as well as Ventolin medication for their child with asthma.	
Provision of medication	The parent is responsible for ensuring medication is supplied to the service, within expiry date and labelled in original packaging. N.B the service keeps a spare Ventolin and epi-pen on site, but the parent is required to provide the service with this medication regardless	

Declaration - I confirm that I have received and understood the EBASCA Medical Condition Policy. I understand I am required to provide prompt updates to the service if there is any change to my child's medical condition or needs in regards to management of the condition.

I also give my permission for this information (including a current photo of my child) to be displayed in the EBASCA classroom for the purposes of Educator access. This plan will be reviewed annually or when changes are identified.

NAME: _____

SIGNATURE: _____

DATE: ____ / ____ / ____

COMMUNICATION UPDATES FROM PARENTS		
DATE	COMMUNICATION DETAILS	OFFICE USE