



2023 Risk Minimisation Plan - Medical Conditions

To be completed by the parent/guardian in consultation with the Nominated Supervisor (OSHC Coordinator)

relevant medical condition are assessed and minimised. The care plan should be devel child and the Nominated Supervisor of Imagination OSHC.	loped in consultation between the parents/ caregiver of the
Child's name:	
Centre name:	INSERT PHOTO HERE
Child's Date of Birth:/	
Medical Condition/health requirement:	

Regulation 90 of the Education and Care Services National Regulations requires a risk minimisation plan for the management of medical conditions

for children enrolled at an education and care service. This is to ensure that the risks relating to the child's specific health care need, allergy or

A medical action plan is required for children who are diagnosed with a medical condition. Action plans need to be				
completed by your medical practitioner.				
	Please ci	ircle:		
Has a medical action plan* been submitted to OSHC for this condition?	Yes	No	N/A	
Date medical action plan is due to be reviewed:				
* Please note that action plans must be in date. Medical action plans need to be	e reviewed	l annually, or	as requested by a	
medical practitioner. Parents/ caregivers will be notified when action plans are	due for re	view, or wher	n medication is about	
to expire.				
Has the medication been provided to OSHC?	Yes	No		
Expiry date of medication:				
For any medications that need to be administered at OSHC, we require a medication agreement form which needs to be				
completed by a medical practitioner.				
Medical practitioner contact details				
Name:Practice name:				
Phone number:				

Please describe your child's symptoms or behaviours that may present with this medical condition:
Responding to your child's medical condition
At the first sign of symptoms please administer prescribed medicine:
Name of medication:
Dose and method of application:
Frequency of application:

Further instructions:
If symptoms increase
Steps to take:
1)
2)
3)
4)
5)

Emergency contact details

Good Shepherd OSHC will follow the steps outlined in the medical management plan, if the primary carer does not respond, please nominate in order who will be the best person/s to contact:

Priority	Name	Relationship to child	Contact number 1	Contact number 2
1.				
2.				
3.				
4.				

How can the educators at the OSHC service minimise the risks associated with your child's medical condition and what strategies can we implement to avoid triggers?

Triggers	Reaction	Strategies to minimise the risk of	Who is responsible?
		exposure/ reaction	

Strategies to avoid triggers

- An educator who is trained in anaphylaxis, asthma, and first aid are always on site when students are present
- All medical information including medical action plans, risk minimisation and communication plans, and medication is easily accessible to all educators at Imagination
- Medication will be taken to any location that the student is playing in, in the OSHC first aid bags. Educators will always have these, especially in locations where there is a high risk of triggers
- The Nominated Supervisor with ensure all medical information and medication will be taken on excursions
- New educators will be briefed on the students' medical information before their shift starts
- The Nominated Supervisor will ensure that all staff are aware of medical procedures, medical information, and where medication is stored for each student attending each Before School Care, After School Care, and Vacation Care session
- The students' medication is stored correctly in a locked cupboard in the OSHC room
- The medication will be placed in individual containers which are labelled with student's full name, date of birth, medical information including a clear expiry date of forms and medication
- The students' medication expiry dates will be checked regularly by the Nominated Supervisor and marked off on each individual risk minimisation form quarterly
- A list of all students and medical action plans are stored in the kitchen, in a locked drawer which is clearly displayed when staff are preparing food at OSHC
- Parents and a medical practitioner will need to consent to the administration of medication on a medication agreement form
- Medication agreement form will be attached to the medical action plan and risk minimisation plan for each child
- If any medication is administered at OSHC, an ACECQA approved medication record form will be used to record any medication given at OSHC

Checklist

Actions to be completed by Good Shepherd OSHC	Checked	Actions to be completed by family	Checked
Nominated Supervisor will ensure that all		Medical Management Plans are correct and	
educators and students understand the medical		current to ensure the correct information is	
conditions for this child		provided to the centre	
Medical management plan is fully competed and		If medical condition is food related, have	
visible for educators in risk areas		spoken with the coordinator about alternate	
		food options	
The risk minimisation plan is developed and		The risk minimisation has been developed in	
completed with lead educators and family (child is		consultation with the family and Good	
relevant)		Shepherd OSHC	
The Nominated Supervisor will communicate with		Any changes to their child's medical	
educators any changes to the child's medical		condition will be communicated immediately	
condition		to the Nominated Supervisor	
Medication will be stored out of reach of children,		All medications required will always be on the	
but in a recognisable, known location to		premises the child is in attendance.	
educators.		Medication will be prescribed by a doctor, in	
Medical will be checked to ensure it meets policy		date and clearly labelled	
requirements			
The Nominated Supervisor will communicate the		Family will ensure that changes of attendance	
attendance patterns and any changes to		and absences are notified to the centre	
educators			
The Nominated Supervisor will ensure the medical		The medical management, risk minimisation	
management, risk minimisation and		and communication plan will be reviewed	
communication plan are reviewed annually, or		annually or when changes are identified	
when changes are identified			

Communication Plan

Date	Issue/ concern/ request/	Action required	Action by	Communicated to
	information			educators

This Medical Condition Risk Minimisation Plan and Communication Plan has been developed with my knowledge and input and will be reviewed at the commencement of Term 1 and 3 of the school year, or as required.				
plan with	ame of Nominated Supervisor	r) at Imagination OSHC and agree to		
I give permission for this information (including a current photo of my child) to be prominently displayed to staff only near locations where risk is high:				
☐ Yes				
□ No				
Parent/ guardian signature:	Nominated Supervisor sig	gnature:		
Name:	Name:			
Date:	Date:			
This plan will be reviewed annually or when changes are identified. The next planned review date is:/				
Quarterly checks (week one of every term) for date of expiry	of medication (office use only)			
Date:Signature:	Date:	Signature:		
Date:Signature:	Date:	Signature:		