Under the Education and Care Services National Regulations, an approved provider must ensure that policies and procedures are in place for dealing with medical conditions in children (regulation 168), taking into account the matters set out under regulation 90 (below), and must take reasonable steps to ensure those policies and procedures are followed (regulation 170).

To help children stay safe and healthy, under regulation 90 services must have a policy for dealing with medical conditions in children that includes:

- service procedures if a child enrolled has a specific health care need or relevant medical condition (for example diabetes, asthma, allergy or anaphylaxis)
- information for staff and volunteers about managing these conditions
- requirements for parents and carers to provide a medical management plan for their child
- information for parents and carers on their involvement in developing a risk-minimisation plan and communication plan with the service
- if providing education and care for children over school age:
  - the self-administration of medication by children, if permitted
  - recording notification from a child who has self-administered medication.

Approved providers must ensure that their services have a policy for dealing with medical conditions in children, even if they have no children with a medical condition at the service. This is because circumstances could change or new medical conditions can emerge and new children enrol.

During the enrolment process, children’s medical issues and management must be discussed with families, including the provision of a medical management plan and supporting documentation, if required.

In collaboration with the family/carers, the service must develop a risk minimisation plan and communication plan if an enrolled child has a specific health care need, allergy or relevant medical condition, to minimise risk by ensuring staff and volunteers understand the medical conditions policy and each child’s medical requirements.

Your policies and procedures should address these requirements, as well as quality practices relating to dealing with medical conditions in children that align with the National Quality Standard.

Every service is different so it is not sufficient to apply generic policies and procedures to multiple services. You will need to contextualise your policies and procedures to your service’s operations and its unique context.
1. Title

*Dealing with medical conditions in children policy*

2. Policy statement

The policy statement will reflect your service’s philosophy about dealing with children with medical conditions.

*For example:*

Children are supported to feel physically and emotionally well, and feel safe in the knowledge that their wellbeing and individual health care needs will be met when they have a medical condition or are unwell.

At all times staff will act in the best interests of the children and ensure the health, safety and wellbeing of all children being educated and cared for at the service.

3. Background

Your policy needs to include a statement of why this policy is in place.

*For example:*

The *Education and Care Services National Regulations* require approved providers to ensure their services have policies and procedures in place for dealing with medical conditions in children.

4. Legislative requirements

Your policy must be consistent with, and refer to, legislative requirements for medical conditions.

Examples include, but are not limited to:

<table>
<thead>
<tr>
<th>Section/regulation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section 167</strong></td>
<td>Offence relating to protection of children from harm and hazards</td>
</tr>
<tr>
<td>Regulation 85</td>
<td>Incident, injury, trauma and illness policy and procedures</td>
</tr>
<tr>
<td>Regulation 86</td>
<td>Notification to parent of incident, injury, trauma and illness</td>
</tr>
<tr>
<td>Regulation 87</td>
<td>Incident, injury, trauma and illness record</td>
</tr>
<tr>
<td>Regulation 89</td>
<td>First aid kits</td>
</tr>
<tr>
<td>Regulation 90</td>
<td>Medical conditions policy</td>
</tr>
<tr>
<td>Regulation 91</td>
<td>Medical conditions policy to be provided to parents</td>
</tr>
<tr>
<td>Regulation 92</td>
<td>Medication record</td>
</tr>
<tr>
<td>Regulation 93</td>
<td>Administration of medication</td>
</tr>
<tr>
<td>Regulation 94</td>
<td>Exception to authorisation requirement – anaphylaxis or asthma emergency</td>
</tr>
<tr>
<td>Regulation 95</td>
<td>Procedure for administration of medication</td>
</tr>
<tr>
<td>Regulation 96</td>
<td>Self-administration of medication</td>
</tr>
<tr>
<td>Regulation 136</td>
<td>First aid qualifications</td>
</tr>
<tr>
<td>Regulation 162(c) and (d)</td>
<td>Health information to be kept in enrolment record (c) details of any – (i) specific healthcare needs of the child, including any medical condition; and (ii) allergies, including weather the child has been diagnosed as at risk of anaphylaxis (d) any medical management plan, anaphylaxis medical management plan or risk minimisation plan to be followed with respect to a specific healthcare need, medical condition or allergy referred to in paragraph (c).</td>
</tr>
<tr>
<td>Regulation 168</td>
<td>Education and care services must have policies and procedures</td>
</tr>
<tr>
<td>Regulation 169</td>
<td>Additional policies and procedures – family day care</td>
</tr>
</tbody>
</table>
When writing your policy you will need to break down what is required under each regulation and how your service will meet these requirements. How these work in practice will be contained in your procedures.

As you reflect on your Dealing with medical conditions in children policy, it might highlight the need to split its various areas into different policies that can be readily accessed by all staff members to follow. For example, you may wish to have separate policies for Administration of prescribed medication and Medical management plans.

5. Principles to inform your policy

All decision-making should be carried out in accordance with the principles of your service’s Dealing with medical conditions in children policy. Examples of principles could include, but are not limited to:

- All staff are informed of any children diagnosed with a medical condition or specific health care need and the risk minimisation procedures in place.
- All staff are informed where medication is stored and/or any specific dietary restrictions relating to their health care need or medical condition.
- All children with diagnosed medical conditions have a current risk minimisation plan and communication plan that is accessible to all staff.
- Staff are trained in the administration of emergency medication.
- Families can expect that educators will act in the best interests of the children in their care at all times and meet the children’s individual health care needs.
- We will partner with families of children with diagnosed medical conditions to develop a risk minimisation plan to ensure that the risks relating to the child’s specific health care need or relevant medical condition are assessed and minimised. In conjunction with the risk minimisation plan, a communication plan will be developed setting out how communication occurs if there are any changes to the medical management plan or risk minimisation plan for the child. The communication plan ensures all staff are informed of the child’s medical condition and relevant documentation.
- We will communicate with families about their children’s health requirements in a culturally sensitive way.

6. Key terms

To make it easier for your audience, provide definitions of key terms that may not be used every day. For example:

<table>
<thead>
<tr>
<th>Term</th>
<th>Meaning</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACECQA – Australian Children’s Education and Care Quality Authority</td>
<td>The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children.</td>
<td>acecqa.gov.au</td>
</tr>
<tr>
<td>Approved anaphylaxis management training</td>
<td>Anaphylaxis management training approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website.</td>
<td>National Regulations</td>
</tr>
<tr>
<td>Term</td>
<td>Meaning</td>
<td>Source</td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>Approved first aid qualifications</td>
<td>A qualification that includes training in the matters set out below, that relates to and is appropriate to children and has been approved by ACECQA and published on the list of approved first aid qualifications and training on the ACECQA website. Matters are likely to include: Emergency life support and cardio-pulmonary resuscitation; convulsions; poisoning; respiratory difficulties; management of severe bleeding; injury and basic wound care; and administration of an auto-immune adrenalin device.</td>
<td>National Regulations</td>
</tr>
<tr>
<td>Communication plan</td>
<td>A plan that forms part of the policy and outlines how the service will communicate with families and staff in relation to the policy. The communication plan also describes how families and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of any medical condition such as anaphylaxis is enrolled at the service.</td>
<td></td>
</tr>
<tr>
<td>Medical condition</td>
<td>This may be described as a condition that has been diagnosed by a registered medical practitioner.</td>
<td>Guide to the NQF</td>
</tr>
<tr>
<td>Medical management plan</td>
<td>A document that has been prepared and signed by a registered medical practitioner that describes symptoms, causes, clear instructions on action and treatment for the child’s specific medical condition, and includes the child’s name and a photograph of the child.</td>
<td></td>
</tr>
<tr>
<td>Risk minimisation plan</td>
<td>A document prepared by service staff for a child, in consultation with the child’s parents, setting out means of managing and minimising risks relating to the child’s specific health care need, allergy or other relevant medical condition.</td>
<td>Guide to the NQF</td>
</tr>
</tbody>
</table>

7. Links to other policies

Refer to related policies and procedures, for example:

- Incident, injury, trauma and illness
- Nutrition, food and beverages, dietary requirements
- The administration of first aid
- Enrolment and orientation
- Providing a child safe environment
- Acceptance and refusal of authorisations

8. Induction and ongoing training

State information about induction training and frequency of ongoing training and information sharing to assist managers, co-ordinators, educators and other staff to fulfil their roles effectively.

9. Policy created/reviewed

Include the date the policy was created, reviewed or changes were made.

10. Monitoring, evaluation and review

State when the policy will be reviewed and who will be responsible for this.

11. Checklist

- Have you referenced the relevant regulations and are these reflected in the policy?
- Does the title provide a clear and concise statement identifying the intent of the policy?
- Have you checked the policy requirements and referenced related legislation that applies to your service type?
- Does your policy statement provide a framework for decision-making and ensure consistent practice?
- Does your policy statement reflect your service’s philosophy?
- Is it clear why this policy exists?
PROCEDURES GUIDELINES

Under the *Education and Care Services National Regulations*, an approved provider must ensure that policies and procedures are in place for dealing with medical conditions in children. These guidelines are part of a series intended to assist in the development of your policies and procedures required under regulations 168 and 169. They are to guide how you develop your policies and procedures, and are not an exact format to be followed.

Your procedures should be written in clear and concise language, making them easy to read and understand. This makes them easy for anyone within your service to implement.

The steps and guidelines you document will not only guide your practice, but also inform regulatory authorities of roles and responsibilities at the service.

When thinking about your procedures for dealing with medical conditions for children in your service, they need to be practical and achievable. For example, if your procedure states that you update your medical management plans from the doctor and your risk minimisation plans every six months (or more frequently if required) you will need to make sure steps are in place for this to occur.

1. Title

   *Dealing with medical conditions in children procedures*

2. Reference to policy and philosophy

   Here you refer to your *Dealing with medical conditions in children policy* as seen in your policy documents. You can reference where you will find the policy to help those looking for it.

   Your procedures will also reflect your service’s overall philosophy, evidence-based quality practice guidelines for dealing with medical conditions in children and supervision and action plans for specific children.

3. Procedures

   This is where you detail the way you will implement the *Dealing with medical conditions in children policy*.

   It is the ‘How to’ in your service and includes specific step-by-step procedures for dealing with medical conditions in children.

   Some areas that will be outlined here should include:

   - where the procedures will be kept
   - when they were last reviewed
   - templates and documents that might be required and/or used as a part of the procedure (e.g. medical management plan template, risk minimisation plan and communication plan, register of children attending with medical conditions, emergency contact information)
   - resources required for the implementation of procedures, e.g. medication storage systems, mobile phone, first aid kit, etc.
   - systems to monitor the implementation of procedures.

   The main feature of your procedures will outline the steps for your educators in relation to children with medical conditions.

   It is important to consider the specific medical conditions of the children in your service and the actions and various risks associated with different medical conditions. This will be recorded in your risk minimisation plan. You will need to consider the various physical capabilities of children and the groups at your service, particularly in a family day care and outside school hours care setting where you will commonly find a mixed age group.

   Your procedures need to reflect the guidelines outlined in your policy. You may want to consider using the references and links under Useful Resources (see p. 10) to guide the development of your procedures.

   Additionally, you may need to consider other procedures and how they interact in relation to the *Dealing with medical conditions in children procedures*. For example, your service will need to consider how you will implement your first aid procedures, emergency and evacuation procedures, sleep and rest, health and hygiene and administration of medication procedures to name a few.
As you reflect on your **Dealing with medical conditions in children policy**, it might highlight the need to split its various areas into different procedures which will be displayed or accessed by educators and staff to follow in relation to their required actions. For example, you may wish to have procedures for how to care for a child having an asthma attack, or how to administer an EpiPen.

4. Roles and responsibilities

This is where you will designate specific roles and responsibilities for the people who hold different positions within your service. This needs to align with the **Education and Care Services National Regulations** (see pp. 8–9 below).

It is important to note that it is the legal responsibility of approved providers to ensure systems are in place to minimise risk and ensure health and safety procedures are implemented by the responsible people in services, including family day care environments (if applicable). Ultimate responsibility lies with the approved provider to ensure their service/s are meeting the requirements under the **Education and Care Services National Law**.

When developing this section consider:

- What are the roles and responsibilities of the approved provider, nominated supervisor, educators, other staff, volunteers, students and families in your service in relation to dealing with medical conditions in children?
- How will you clearly define these roles and expectations and where will it be documented?
- Why are clear and robust procedures for dealing with medical conditions in children important for children’s safety, health and wellbeing?
- How will you learn from the administration of these procedures to improve your practices?
- How will you ensure that the necessary tools are available so the approved provider, nominated supervisor, educators and other staff members can follow the procedures? How will they be made aware of the procedures?
- The information you need from families to ensure they have informed you of any changes to the medical condition and how these changes will be managed.
- Do the roles and responsibilities reflect your service type?

An example of roles and responsibilities could include, but is not limited to:

<table>
<thead>
<tr>
<th>Roles</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved provider</td>
<td>• ensure the <strong>Dealing with medical conditions in children policy</strong> and procedures are met, the appropriate medical management plans and risk assessments are completed, and all relevant actions are managed to minimise the risks to the child's health (regulation 90)  &lt;br&gt; • ensure families of children that have a specific medical condition have been given a copy of the <strong>Dealing with medical conditions in children policy</strong> (regulation 91) and any other relevant policies  &lt;br&gt; • in consultation with families, develop risk minimisation plans for children with medical conditions or specific health care needs  &lt;br&gt; • ensure all educators and staff have training as part of the induction process and ongoing training for the management of medical conditions (e.g. asthma, anaphylaxis and specific requirements for the enrolled child in your care)  &lt;br&gt; • ensure a written plan for ongoing communication between families and educators is developed as part of your risk minimisation plan, relating to the medical condition and any changes or specific needs. It should be in place before a child commences at the service, or as soon as possible after diagnosis for children already attending  &lt;br&gt; • if a child is diagnosed as being at risk of anaphylaxis, ensure that a notice is displayed in a position visible from the main entrance to inform families and visitors to the service  &lt;br&gt; • take reasonable steps to ensure that nominated supervisors, educators, staff and volunteers follow the policy and procedures  &lt;br&gt; • ensure copies of the policy and procedures are readily accessible to nominated supervisors, educators, staff and volunteers, and available for inspection  &lt;br&gt; • notify families at least 14 days before changing the policy or procedures if the changes will:  &lt;br&gt;   • affect the fees charged or the way they are collected or  &lt;br&gt;   • significantly impact the service’s education and care of children or  &lt;br&gt;   • significantly impact the family’s ability to utilise the service.</td>
</tr>
<tr>
<td>Roles</td>
<td>Responsibilities</td>
</tr>
<tr>
<td>-----------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Nominated supervisor</td>
<td>• implement the <em>Dealing with medical conditions in children policy</em> and <em>procedures</em> and ensure all the action plans that are in place are carried out in line with these&lt;br&gt;• ensure any changes to the policy and procedures or individual child’s medical condition or specific health care need and medical management plan are updated in your risk minimisation plan and communicated to all educators and staff&lt;br&gt;• notify the approved provider if there are any issues with implementing the policy and procedures&lt;br&gt;• display, with consideration for the children’s privacy and confidentiality, their medical management plan (from the doctor) and ensure that all educators and staff are aware of and follow the risk minimisation plans (developed by the service) for each child&lt;br&gt;• ensure communication is ongoing with families and there are regular updates as to the management of the child’s medical condition or specific health care need&lt;br&gt;• ensure educators and staff have the appropriate training needed to deal with the medical conditions or specific health care needs of the children enrolled in the service&lt;br&gt;• ensure inclusion of all children in the service&lt;br&gt;• ensure all educators and staff are aware of and follow the risk minimisation procedures for the children, including emergency procedures for using EpiPens.</td>
</tr>
<tr>
<td>Educators</td>
<td>• ensure all the action plans are carried out in line with the <em>Dealing with medical conditions in children policy</em> and <em>procedures</em>&lt;br&gt;• ensure you monitor the child’s health closely and are aware of any symptoms and signs of ill health, with families contacted as changes occur&lt;br&gt;• ensure that two people are present any time medication is administered to children (except for FDC or permitted services) (regulation 95(c))&lt;br&gt;• ensure communication with families is regular and all educators and staff (including the nominated supervisor) are informed of any changes to a child’s medical condition&lt;br&gt;• understand the individual needs of and action plans for the children in your care with specific medical condition&lt;br&gt;• ensure a new risk assessment is completed and implemented when circumstances change for the child’s specific medical condition&lt;br&gt;• ensure all children’s health and medical needs are taken into consideration on excursions (first aid kit, personal medication, management plans, etc)&lt;br&gt;• maintain current approved first aid, CPR, asthma and anaphylaxis training&lt;br&gt;• undertake specific training (and keep it updated if required) to ensure appropriate management of a child’s specific medical condition.</td>
</tr>
<tr>
<td>Cook and kitchen staff</td>
<td>• ensure that practices and procedures in relation to the safe handling, preparation, consumption and service of food are adhered to&lt;br&gt;• ensure all changes to child’s medical management plan or risk minimisation plan are implemented immediately within the menu preparation.</td>
</tr>
<tr>
<td>Families</td>
<td>• advise the service of the child’s medical condition and their specific needs as part of this condition&lt;br&gt;• provide regular updates to the service on the child’s medical condition including any changes, and ensure all information required is up-to-date&lt;br&gt;• provide a medical management plan from a doctor on enrolment or diagnosis of the medical condition (refer to links for requirements) and provide an updated plan as required&lt;br&gt;• collaborate with the service staff to develop a risk minimisation plan.</td>
</tr>
</tbody>
</table>
The following table will assist you in developing procedures specific to your service’s needs and context. Referring to the *Education and Care Services National Regulations* when you are writing your procedures will assist you to ensure that you are meeting your obligations.

<table>
<thead>
<tr>
<th><strong>Areas to include in your procedures</strong></th>
<th><strong>Things to consider and outline in each area</strong> (this will be specific to the context of your service)</th>
<th><strong>Strategies for monitoring and implementing procedures</strong></th>
<th><strong>Related policy and/or procedures</strong></th>
</tr>
</thead>
</table>
| **Preparation for a child with a medical condition** | • The information required for dealing with the specific medical conditions and what you need to plan for enrolling this child.  
  • Undertaking risk assessments and developing risk minimisation plans that will identify potential risks of the medical condition and minimise these risks.  
  • Implement systems to ensure regular monitoring and the needs of the child are met.  
  • What adjustments need to be made to include the child (e.g. grouping, supervision, additional equipment needed).  
  • How you will consult with families about the child’s specific medical condition and action plans to deal with the medical condition.  
  • How you will inform all educators and staff of their responsibilities with the medical condition and any changes. How will you communicate this moving forward? How will this be reflected in your risk minimisation plan?  
  • How you will ensure this is part of the induction for new educators and staff and any changes are covered in ongoing training.  
  • How you will ensure educators or staff have appropriate first aid qualifications and are immediately available in an emergency (regulation 136).  
  • In event of an emergency, who you will contact and how you will contact them.  
  • What authorisations you require from families.  
  • How you will work with the family of the child to develop a risk minimisation plan that reflects the medical management plan from the doctor.  
  • What will be included in a communication plan from your risk minimisation plan.  
  • What precautions may be necessary to protect the safety, health and wellbeing of a child with a medical condition. | • Make sure your policy and procedures are available for all to access.  
  • Review enrolment records and identify any children with medical conditions as part of the enrolment and orientation procedures for the service.  
  • Consider creating a checklist of all tasks/items needed on enrolment and throughout the process.  
  • Consider creating a Medical Conditions template for families to fill in when there has been a change to a child’s medical condition or a new medical condition.  
  • Request a medical management plan from families prior to commencement of enrolment.  
  • Record any medical condition and keep the medical management plan and risk minimisation plan on the enrolment record.  
  • Ensure risk assessments are carried out and reviewed as required (refer to your procedure for developing a risk assessment). This will be the basis of your risk minimisation plan.  
  • Regularly reflect on supervision plans and monitoring children’s health.  
  • Implement a communication plan for all involved (families, educators, staff, doctors and specialists).  
  • Conduct regular staff meetings to ensure timely and accurate information about the medical condition, any updates, and the management of the medical condition, is provided to all educators and staff. | Providing a child safe environment  
Enrolment and orientation  
Incident, injury, trauma and illness |
<table>
<thead>
<tr>
<th>Areas to include in your procedures</th>
<th>Things to consider and outline in each area (this will be specific to the context of your service)</th>
<th>Strategies for monitoring and implementing procedures</th>
<th>Related policy and/or procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Ensure all educators and staff and volunteers understand each step of the procedure.</td>
<td>• Regularly review educator and staff rosters to ensure first aid qualification requirements are being met.</td>
<td>• A risk assessment should be developed and rehearsed in relation to a medical emergency.</td>
<td>Emergency and evacuation Providing child safe environment Incident, injury, trauma and illness</td>
</tr>
<tr>
<td>• Implement a system to identify when qualifications need to be updated or renewed.</td>
<td>• Create a specific risk minimisation plan template that reflects the medical management plan.</td>
<td>• Check expiry dates of any medication supplied for the child and request new medication as required.</td>
<td></td>
</tr>
<tr>
<td>• Create a specific risk minimisation plan template that reflects the medical management plan.</td>
<td></td>
<td>• Ensure children do not attend the service without their required medication prescribed by the child's medical practitioner.</td>
<td></td>
</tr>
<tr>
<td>• In relation to the medical condition, the step-by-step actions that need to happen when caring for the child, in the case of a specific incident or emergency with the medical condition, including for an excursion or transportation.</td>
<td></td>
<td>• Regularly review the risk minimisation plan for the child.</td>
<td></td>
</tr>
<tr>
<td>• Step-by-step procedures for specific illnesses (e.g. asthma, anaphylaxis, diabetes).</td>
<td></td>
<td>• Seek regular updates from the family relating to their child's medical condition.</td>
<td></td>
</tr>
<tr>
<td>• How will you monitor the safety, health, wellbeing of the child?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Are your service's practices and procedures inclusive of the child?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• How will you ensure that families and visitors to the service are aware of any child at risk of anaphylaxis through your service's signage?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Plans for the child while in the service**

**Act:** 167  
**Regs:** 85–89, 90–96, 173  
**QA2:** 2.1, 2.1.2  
**QA7:** 7.1, 7.1.2

**Plans for recording after an event related to a medical condition**

**Act:** 167  
**Regs:** 85–89 and 90–96  
**QA2:** 2.1, 2.13  
**QA7:** 7.1.2

**Governance and management**

**Incident, injury, trauma and illness**

**Act:** 167  
**Regs:** 85–89 and 90–96  
**QA2:** 2.1, 2.13  
**QA7:** 7.1.2

**To help ensure continual improvement, consider creating an Incident Review template that reflects the effectiveness or the management and systems as well as health and safety issues that need to be noted for the future.**

**Ensure systems are in place to report items that need to be purchased to replenish consumables, or consult with families to replenish medication as required.**
5. Procedures created/reviewed
Include the date the procedures were created or reviewed.

6. Monitoring, evaluation and review
Your service, in consultation with educators and other key staff, families and other stakeholders, should review the effectiveness of these procedures within a set timeframe or earlier if there is a change in relevant legislation.

State when the procedures will be reviewed and who will be responsible for this.

7. Checklist
☐ Do the *Dealing with medical conditions in children procedures* align with your *Dealing with medical conditions in children policy*?
☐ Have your procedures been written in plain English and can they be easily implemented by an educator new to your service?
☐ Is it clear who is responsible for the implementation of the procedures?
☐ Are all educators and other staff aware of the procedures and can implement them if required?
☐ Do you need to develop any resources to monitor and record the procedures?

**USEFUL RESOURCES**
Include links to useful resources that have helped inform the development of your policy. Be mindful of any state or territory specific content.

Some examples include, but are not limited to:
- ACECQA – ACECQA Newsletter Issue 7 2014
- ACECQA – First aid qualifications & training
- ACECQA – Guide to the National Quality Framework
  [acecqa.gov.au/media/23811](acecqa.gov.au/media/23811)
- ACECQA – Opening a new service
- Allergy and Anaphylaxis Australia
  [allergyfacts.org.au](allergyfacts.org.au)
- Australasian Society of Clinical Immunology and Allergy – ASCIA Action Plans for Anaphylaxis
- Diabetes Australia
  [diabetesaustralia.com.au](diabetesaustralia.com.au)
- National Asthma Council Australia
  [nationalasthma.org.au](nationalasthma.org.au)