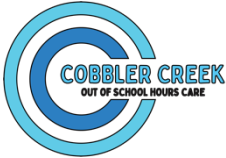


Risk Minimisation & Communication Form



Childs Name	
Date of Birth	
Medical Condition/ Diagnosis	

Medication & Storage

Medication Required <i>(name/dose)</i>	
Expiry date	
Storage Location	<i>Medication is in a locked Cupboard located in the CCOSHC Office</i>
Who can access it	<i>Responsible Persons at CCOSHC</i>

Identified Triggers/Risks	Proactive strategies to reduce the risk

Communication Plan

With Parents <i>(e.g. parents notify service of medication/condition changes immediately, preferred method of communication).</i>	Parents will notify service of any changes in medication/care plans immediately or before their next session. <u>Parents Preferred method of Communication is:</u>
With Staff <i>(e.g. risk plan reviewed at staff meetings, relief staff briefed on arrival).</i>	Childs Medication and photo are in a locked cupboard in the OSHC kitchen. Detailed version of medical condition stored in medication pouch and in confidential folder.
With Children (if appropriate) <i>(e.g. peers reminded of "no food sharing" rule).</i>	Children are not to share food and children are reminded that we are not allowed to have anything containing nuts at OSHC

Who administers	Qualified OSHC Educator
Who calls 000	OSHC Leadership or Responsible Person
Who contacts parents/guardians	OSHC Leadership or Responsible Person
Who supervises remaining children	OSHC Educators

Review date	Amendments

Person	Signature	Date
Parent/Guardian		
Nominated Supervisor		