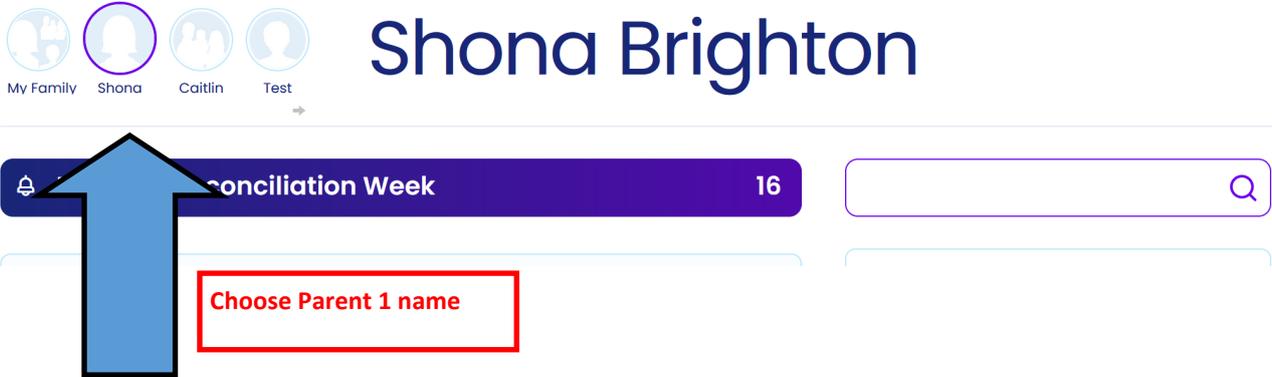
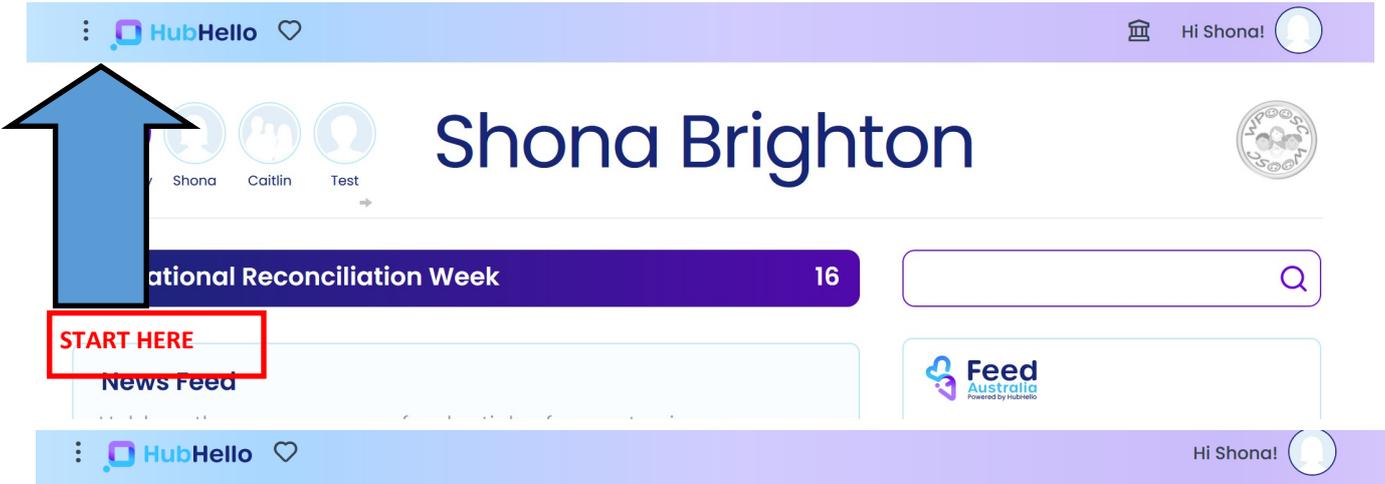
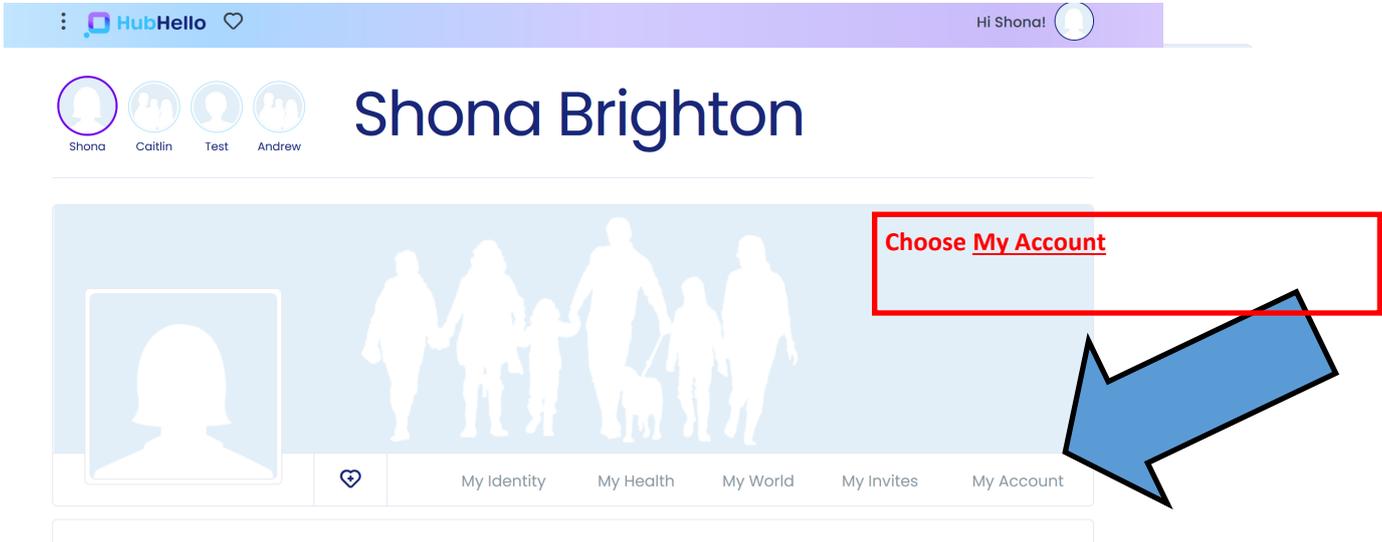
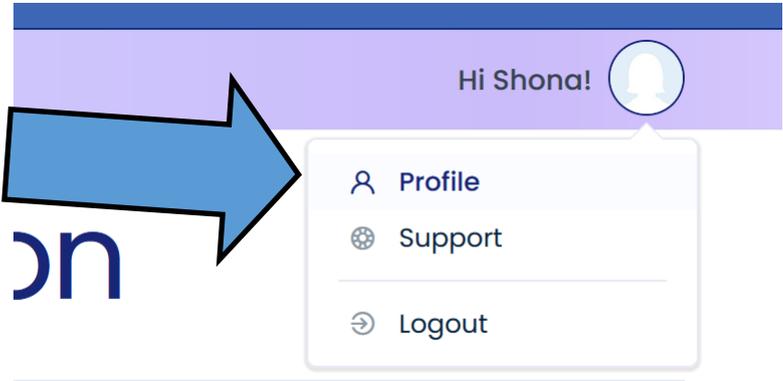


How to access the Conditions of Enrolment in HUBWORKS



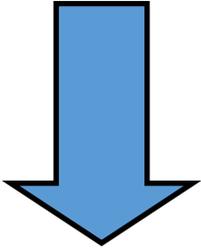
Click on the dropdown and choose Profile



Scroll down until you see the **CONDITIONS OF ENROLMENT**

Choose **YES** or **NO**

Please note: numbers 1,2 & 3 are **ONLY** relevant for families supplying Health / Action Plans



Conditions of enrolment

1. I/we have submitted treatment plans for asthma / or allergies, where required and agree to a staff member with a current First Aid Certificate conducting treatment as per the supplied medical plan.

Yes No

2. I/we hereby GIVE / DO NOT GIVE permission for a photograph of my child and an Action Plan to be displayed in a public area. The photograph and details will be included on an Allergy & Asthma Awareness Chart within the centre and will be visible to staff and visitors.

Yes No

3. Where necessary, I/we, have supplied additional documentation outlining additional health needs and management strategies such as dietary restrictions and additional assistance if required.

Yes No

4. In the event of accident or sudden illness I/we authorise West Pymble Out-of-School-Care to obtain whatever urgent medical, dental or hospital treatment as necessary and appropriate, and I/we accept fiscal responsibility for expenses incurred. I/we agree that should I/we not be able to be contacted that commencement of treatment will not be delayed. My child may be transported in an ambulance or, if necessary, a private vehicle, when emergency treatment is required. If a child requires transportation for treatment a staff member will always accompany the child to hospital.

Yes No

5. I/we agree that if my child has a temperature higher than 38°C and is in discomfort and/or pain whilst at the centre and attempts to contact parents have been unsuccessful that a staff member with a current First Aid certificate will administer a single age & weight appropriate dose of a paracetamol medication such as Panadol to my child. A Medication Administration Chart will be completed, signed, and witnessed.

Yes No

6. I/we agree that if my child with no known allergies appears to be having an anaphylactic reaction whilst in the centre's care that the Coordinator will call an ambulance and a staff member with a current First Aid Certificate will follow the recommend treatment from the ambulance staff. This may involve administration of an adrenaline auto-injector, such as Epipen® or Epipen® Jnr, from the centre.

Save

When you have accepted all the conditions
click **SAVE**

