

### Asthma Procedure

#### Purpose

This procedure relates to the Medical Policy and should be read in conjunction with this.

#### Background

Asthma is a long-term (chronic) lung condition of the airways (the passage that transports air into our lungs). One in nine Australians have asthma and it is one of the most common causes of childhood admission to hospital. At the moment, there is no cure, but it can be managed. Community Education and correct asthma management can assist to minimise the impact of asthma.

People suffering from this condition have sensitive airways. These airways become inflamed (also known as a flare-up) when they are exposed to a trigger. When the airways become inflamed, the narrowing airways cause significant, persistent, and troublesome symptoms such as:

- Cough
- Wheeze
- Difficulty breathing
- Chest tightness

A flare-up can come on slowly over hours, days, or even weeks, or quickly over minutes leading to a medical emergency. Generally, children under six years do not have the skills and ability to recognise and manage their own asthma effectively. Correct asthma management is critical for children with asthma.

#### Scope

This policy applies to all ECMS staff (including relief) and includes students on placement, volunteers, parents/guardians/family members, and also applies to incursions and excursions.

This policy will apply regardless of whether a child diagnosed by a registered medical practitioner as being at risk of asthma is enrolled at the service.

#### Principles

Asthma management is a shared responsibility. ECMS recognises the need to educate its staff and parents about asthma and to promote responsible asthma management strategies. ECMS will:

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- Raise the awareness of asthma amongst those involved in our services
- Implement strategies to ensure the health and safety of all persons with asthma involved with our services
- Provide an environment in which children with asthma can participate in all activities to the full extent of their capabilities
- Provide a clear set of guidelines and expectations to be followed with regard to the management of asthma
- Ensure all Educators have attended an Asthma Accreditation Course.

Educators should be aware that children do not have to be diagnosed with Asthma to experience symptoms of this disease.

If a child is experiencing asthma symptoms and is not diagnosed, follow the Asthma First Aid plan immediately call Ambulance Victoria on triple zero (000) and follow their direct instructions.

## Qualification and Service Requirements

ECMS requires:

- All Educators will have current first aid and asthma management training
- The service will have a risk minimisation plan, communication plan, and checklist in place to ensure all Educators are aware of correct procedures when caring for children at risk of asthma.

## Procedure – on enrolment or upon diagnosis

Educators responsible for the child at risk of asthma will ensure that:

- As part of the enrolment procedures (prior to a child attending the centre or immediately upon diagnosis), a diagnosis of asthma will be documented on the child's record. It is the parent's responsibility to notify ECMS of the child's asthma, triggers, and treatment
- Parents/guardians of a child diagnosed at risk of asthma have been provided a copy of the ECMS Medical Conditions Policy and the relevant procedure
- The enrolment checklist for children at risk of asthma is completed
- Following identification of children with asthma, parents must supply an Asthma Action/Care Plan (see examples below) which must include the following:
  - Clear identification of the child (photo)
  - Documentation of the asthma triggers
  - Documentation of the first aid response including any prescribed medication
  - Identification and contact details of the parents and medical doctor who has signed the form.
- Parents/guardians provide Asthma Care/Action Plan signed by the child's doctor, prescribed medication (in date), and any relevant spacer and face mask required for administration.

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- Store asthma action plans in the child's enrolment record and display in appropriate areas of the service
- The prescribed medication (and relevant spacer) must be available at the ECMS service at all times (provided by parents). Where this is not provided the child **will not** be able to attend the service.
- The labelled medication must be placed in a small insulated container:
  - Clearly marked with the child's name
  - Containing a list of symptoms, the child is likely to experience
  - Containing instructions on when and how to use the medication
  - Instructions on how and when to ring an ambulance - what to say etc
  - Parents must replace the medication before the expiry date. This is the parent's responsibility.
- A risk minimisation plan that clearly identifies risks relating to the child's specific health care need or medical condition is developed in consultation with the parent prior to the child attending
- A communication plan is developed using information from the child's Risk Minimisation Plan
- The child's Asthma Care/Action Plan is communicated and visible to all Educators (including relief) and displayed clearly in the child's room
- The child's action plan is followed in the event of an asthma attack.

## Examples of Asthma Care/Action Plans

There is no legal requirement for a particular type of form for Asthma Care/Action plans (only that one **must** be available at all times for a child diagnosed with asthma) and signed by a medical professional.

## Monitoring and storage of asthma medication

- The asthma medication is stored in a location that is known to all Educators, including relief Educators; is easily accessible to adults; inaccessible to children, and stored away from direct sources of heat

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- The asthma medication for each child at risk of asthma is carried by a trained adult on any excursion or regular outing that the child attends
- The asthma medication expiry date is regularly checked and is replaced (by parents) when required. (The manufacturer will only guarantee the effectiveness of the medication to the end of the nominated expiry month).

### Nominated Supervisors are also responsible for:

- Ensuring that at least one staff member who has completed accredited asthma training (Emergency Asthma Management) is on duty whenever children are being cared for or educated
- Encouraging open communication between parents/guardians and Educators regarding the status and impact of a child's asthma.
- Display asthma first aid poster in suitable locations
- Include asthma information in the newsletters and have brochures available
- Ensure staff have access to the Vic Emergency App and Pollen Count App (with relevant watch zones defined) on the services iPad to provide real-time information on extreme weather events (eg: high pollen count, thunderstorm asthma warnings) in the services watch zones
- Ensure housekeeping and gardening are planned to minimise exposure to potential asthma triggers in accordance with the child's risk minimisation plan and that this information is transferred to the service risk minimisation and communication plan.

### Educators are also responsible for:

- Ensure that they maintain current accreditation in emergency asthma management training (valid for three years)
- Ensure they are aware of the children in their care with asthma
- In consultation with the family, ensure the health and safety of each child through supervised management of the child's asthma
- Identify, and where practical, minimise asthma triggers
- Following the child's individual risk minimisation plan and communication plan
- Monitor Vic Emergency App and Pollen Count App and prepare for extreme weather events that may impact a child diagnosed with asthma
- Where necessary, modify activities in accordance with a child's needs and abilities
- Ensuring the asthma medication for each child at risk of asthma is carried by a trained adult on any excursion or regular outing that the child attends
- Ensure all regular prescribed asthma medication is administered according to the child's Asthma Care/Action Plan
- Administer emergency asthma medication according to the child's Asthma Care/Action plan. If no asthma action plan is available follow the asthma first aid plan
- Communicate regularly with families about the status and impact of a child's asthma

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### Parents/Guardians will:

- Inform the Nominated Supervisor at enrolment or on initial diagnosis, that their child has a history of asthma
- Provide all relevant information including the Asthma Care/Action plan, prescribed medication, and relevant spacer for administration at enrolment or upon diagnosis
- Notify Educators in writing of any changes to the Asthma Care/Action plan.
- Ensure that their child has an adequate supply of their asthma medication (within expiry date), including reliever, spacer, and face mask at all times
- Comply with the mediation policy
- Communicate regularly with Educators about the status and impact of a child's asthma

In consultation with educators, ensure the health and safety of their child through supervised management of the child's asthma.

### Children will:

- Be encouraged to recognise their early asthma symptoms and to tell the staff
- Where authorised to self-administer medication seek their reliever medication as soon as their symptoms develop

### Documentation

In the event of a child experiencing asthma at the service, educators will follow the first aid instructions and relevant Emergency Action Plans. As soon as possible educators will contact parents to inform them of the incident and will complete an Incident, Injury, Trauma and Illness Record and the relevant medication record

### Sources

#### Related Legislation

- Child Wellbeing and Safety Act 2005
- Education and Care Services National Law Act 2010: Section 1165, 167, 169 172 and 174
- Education and Care Services National Regulations (Current as at 1 July 2018): Regulations 4, 77 – 80, 85-98, 102, 136, 137, 146, 147 160- 162, 167 – 173, 176 – 178, 181, 183, 184
- Health Records Act 2001
- Health Infectious Diseases Regulations 2001
- National Quality Standards, Quality Area 2: Children's Health and Safety
- Occupational Health and Safety Act 2004
- Public Health and Wellbeing Act 2008
- Public Health and Wellbeing Regulations 2009 (Vic)
- Privacy and Data Collection Act 2014 (Vic)
- Privacy Act 1988 (Cth)

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## Sources and Further Reading

- Asthma Australia: [www.asthmaaustralia.org.au](http://www.asthmaaustralia.org.au)
- The Asthma Foundation of Victoria: [www.asthma.org.au](http://www.asthma.org.au) or phone (03) 9326 7088 or 1800 278 462 (toll-free)
- National Asthma Council of Australia <https://www.nationalasthma.org.au/>

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