

ASTHMA MANAGEMENT Policy

Policy and Procedures

Asthma is a chronic health condition affecting many Australian children. It is estimated that 1 in 10 Australian children are currently affected. It is a common reason for childhood admission to hospital. Community education and correct asthma management will assist in minimising the impact of asthma.

It is generally accepted that children under the age of six do not have the skills and ability to recognise and manage their own asthma effectively. We therefore recognise the need to educate our staff and families about asthma and to promote responsible asthma management strategies. Asthma management should be viewed as a shared responsibility.

Procedure

Management will:

- Provide educators with a copy of the Asthma Policy and brief them on asthma procedures during their orientation.
- Provide educators with Emergency Asthma Management (EAM) training and ensure that at least one educator who has completed accredited asthma training is on duty at the service at all times and on all excursions.
- Identify children with asthma during the enrolment process and inform the coordinator and assistant coordinators.
- Provide parents with a copy of the Asthma Policy and Asthma Action Plan upon enrolment.
- Store Asthma Action Plans with the child's enrolment records. Additional copies should be on display for staff alertness and awareness.
- Ensure that an emergency Asthma First Aid poster is displayed in key locations.
- Ensure that the First Aid Kit contains a blue reliever medication, a spacer device, a face mask and concise written instructions on Asthma First Aid procedures.
- Ensure that an accredited staff member correctly maintains the asthma component of the First Aid Kit (e.g. regular checks of expiry dates on medication).
- Provide a mobile Asthma First Aid Kit for use at activities outside the service.
- Encourage open communication between parents/guardians and educators regarding the status and impact of a child's asthma.
- Where appropriate, offer information sessions on asthma for parents/guardians.
- Promptly communicate any concerns to parents should it be considered that a child's asthma is limiting their ability to participate fully in all activities.

Educators will:

- Ensure that they maintain current accreditation in Emergency Asthma Management (valid for 3 years).
- Ensure that they are aware of the children in their care with asthma.
- Ensure, in consultation with families, the health and safety of each child through supervised management of the child's asthma.
- Identify and, where practical, minimise asthma triggers.
- Where necessary, modify activities in accordance with a child's needs and abilities.

- Ensure that all regular prescribed asthma medication is administered in accordance with the information on the child's written Asthma Action Plan.
- Administer emergency asthma medication if required according to the child's written Asthma Action Plan. If no written Asthma Action Plan is available, the Asthma First Aid Plan outlined in this document should be followed immediately.
- Make a record of asthma medication has been administered or self administered and inform families of such administration.
- Promptly communicate to parents/guardians any concerns should it be considered that a child's asthma is limiting their ability to participate fully in all activities.
- Ensure that children with asthma are treated the same as all other children at the service.

Families will:

- Provide information that their child has a history of asthma on the Expression of Interest Form.
- Provide all relevant information regarding the child's asthma via the written Asthma Action Plan, which should be completed by a GP and provided to the centre before enrolment.
- Together with a suitable staff member, families will complete the Risk Minimisation Plan to manage their child's asthma
- Notify the educators, in writing, of any changes to the Asthma Action Plan during the year.
- Ensure that their child has an adequate supply of appropriate asthma medication (including reliever) at all times, along with a spacer.
- Communicate all relevant information and concerns to educators as the need arises (e.g. if asthma symptoms were present the previous evening).

Children will:

- Wherever practical, be encouraged to seek their reliever medication as soon as their symptoms develop.
- Be encouraged to report to educators if they are experiencing asthma symptoms/ difficulty in breathing, and/or if they have self medicated.

Asthma First Aid

An asthma first aid kit within the service will include the following:

A reliever metered dose inhaler e.g. Ventolin, Asmol, Airomir, that is in date

- An accompanying spacer device
- Instructions on how to use the spacer device
- Instructions on how to implement nationally recognised asthma first aid.
- GPAC has one Asthma Emergency kit for use in the OSHC service which also can be taken on all off site excursions or should an emergency evacuation occur

The Asthma First Aid Kit will:

- be checked regularly for availability of correct contents and expiry dates of reliever medication
- be stored in an accessible location with all educators being aware of this location
- contain a spare unused spacer device to immediately replace the one that's been used

The Nationally Recognised Asthma First Aid poster will be located in the centre.

Responding to an Attack

In the event of a child experiencing an asthma attack or difficulty breathing:

- Educators will follow the child's completed Children's Services Asthma First Aid Record or the child's individual Asthma Management /Medical Management Plan for children diagnosed with asthma

OR

- Educators will follow the Nationally Recognised Asthma First Aid for children not previously diagnosed with asthma, or in the event that the child's asthma management plan is unavailable at the time of an attack. (Note: individual asthma management plan is to be implemented once sourced)

Not sure if it's Asthma? CALL AN AMBULANCE IMMEDIATELY (DIAL 000)

If the child stays conscious and their main problem seems to be breathing, follow the asthma first aid steps. Asthma reliever medicine is unlikely to harm them even if they do not have asthma.

* Adapted from Kids' First Aid for Asthma – National Asthma Council Australia. 2011.

Educators will call for an ambulance:

- If a child is experiencing a severe attack
- If a child not previously diagnosed with asthma is experiencing difficulty breathing
- If a child is not improving as per the instructions in the Nationally Recognised Asthma First Aid Plan
- In accordance with the child's individual asthma management plan
- If educators have concerns or doubts. All asthma treatment including asthma first aid to be recorded on the Asthma First Aid Treatment Record Card and filed with the services incident reports.

All parent/authorised nominees are to be notified of asthma first aid administration as soon as practicable.

Further notes:

A trigger is something that causes your airways to narrow, leading to asthma symptoms. Everyone's asthma is different, and everyone has different triggers. For most people with asthma, triggers are only a problem when their asthma is not well-controlled.

Triggers can range from:

Aerosol sprays	Allergens	Air pollution
Gardens	Bushfires	Chemicals
Colds and flu	Depression	Dust mites
Emotions	Exercise	Food
Hormones	Medications	Mould

Pets

Pollen

School

CONSIDERATIONS:

Education and Care Services National Regulations	National Quality Standard	Other Service policies/documentation	Other
Education and Care Services National Law 2010 Education and Care Services National Regulations 2011	National Quality Standard 2 National Quality Standard 2 "Children's Health and Safety"	<ul style="list-style-type: none">- Management of Medical Conditions Policy- Administration of First Aid	Asthma Aware Out of School Hours Guidelines 2013 National Asthma Council Australia: www.nationalasthma.org.au NSW WHS Act and Regulations 2011 -

ENDORSEMENT BY THE SERVICE:

Approval date: _____

Signature: _____