

▲ **ASTHMA POLICY**

▲ **NQS**

Element 2.1: Each child's health and physical activity is supported and promoted

Element 2.1.2: Effective illness and injury management and hygiene practices are promoted and implemented

Element 2.2.1: At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

Element 2.2.2: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented

Education and Care Services National Regulations: 85-89; 90-91; 92-96; 136; 161-162; 168(d).

▲ **PURPOSE**

Asthma is a chronic health condition affecting approximately 10% of Australian children (NHMRC, 2010). To meet the legal obligations of the Education and Care Services National Regulations and ensure the health and wellbeing of all children attending the centre, FROEBEL Australia ensure all staff are aware of, and implement best practice for administering action plans and first aid for Asthma Management. The following policy ensures all stakeholders who engage with the service have an understanding of the asthma policy and management guidelines and are provided with the necessary information for the effective management of children with asthma who are attending the service.

▲ **POLICY**

The Nominated Supervisor will:

- Identify children with asthma during the enrolment process.
- Provide families with a copy of the Asthma Policy upon enrolment whenever applicable.
- Provide an Asthma Action Plan to all families of children with asthma upon enrolment to be completed by with health care professional. The completed Asthma Action Plan is to be returned promptly,
- Ensure processes are in place to have parents review action plans annually and shared with FROEBEL.
- Provide all educators with a copy of the Asthma Policy and brief them on asthma procedures upon their appointment to FROEBEL.

- Provide opportunity and encouragement for educators to attend regular asthma training and ensure that at least one educator has completed a certified asthma training (Emergency Asthma Management).
- Ensure that all educators are informed of the children with asthma in their care and the location of the asthma emergency kit.
- Formalise and document the internal procedures for asthma first aid, for both children with a diagnosis of asthma, and those with no known diagnosis of asthma (first attack).
- Encourage children to bring their reliever medication to the centre and use their medication (with educator supervision) as soon as symptoms develop
- Ensure that at least one asthma first aid poster is displayed in a key location throughout the centre.
- Ensure that the asthma first aid kit contains reliever medication (a blue/grey metered dose inhaler containing salbutamol), a spacer device, a children's face mask, instructions for the first aid procedure and a record form
- Provide a mobile asthma first aid kit for use on excursions.
- Provide families with the contact details of the Asthma Foundation if further asthma advice is needed.
- Document any information from the child's parent/guardian about recent symptoms that the child has experienced, (e.g. the child has recently had a cold and this has increased asthma symptoms at night) and communicate this information to other educators.

Nominated Supervisor and Educators will:

- Identify and, where possible, minimise asthma triggers (including checking pollen counts and air quality using weather apps)
- Ensure that children with asthma are not discriminated against in any way.
- Ensure that children with asthma can participate in all activities safely and to their fullest abilities.
- Encourage open communication between families/guardians and educators regarding the status and impact of a child's asthma.
- Ensure that all regular prescribed asthma medication is administered in accordance with the information on the Child's Asthma Action Plan and administration of medication policies
- Administer emergency asthma medication if required according to the child's Asthma Action Plan. If no Asthma Action Plan is available, the Standard Asthma First Aid Plan should be followed immediately.
- Document the use of medication according to service policy and notify parents/guardians.
- Regularly maintain all asthma components of the first aid kit to ensure all medications are current and any asthma devices are correctly cleaned after each use.

- Promptly communicate any concerns to families should it be considered that a child's asthma is limiting his/her ability to participate fully in all activities.
- FROEBEL will notify the Department of Education and Training, if a serious asthma flare up occurs; resulting in emergency services being called and /or the death of a child.
- Should a parent inform an educator that is not the child's educator of trust, that educator will pass on all relevant information to the key educator and Centre Director as soon as practicable to ensure all records for management of the child's Asthma are updated and communicated effectively.

Families/Guardians will:

- Inform the Centre Director, either upon enrolment or on initial diagnosis, that their child has a history of asthma.
- Provide all relevant information regarding the child's asthma via the Asthma Action Plan as provided by the child's doctor.
- Notify the Centre Director, in writing, of any changes to the asthma action plan during the year.
- Ensure that their child has an adequate supply of appropriate medication (reliever) and spacer device clearly labelled with the child's name including expiry dates.
- Communicate all relevant information and concerns with the Centre Director or the child's key educator, as the need arises e.g. if asthma symptoms were present during the night.

▲ PROCEDURES

Asthma Management

Educators will follow the written instructions on the child's Asthma Action/Care Plan. If no specific and signed instructions are available, or the instructions are unclear or the child does not have an Asthma Action/Care Plan, begin the **first aid** procedure immediately as authorised by the Education and Care Services National Regulations.

All educators are made aware of how to deliver asthma first aid, and the service has an asthma emergency kit available for use in case of:

- An emergency where a child has difficulty breathing.
- A child's first attack of asthma.
- A child's own asthma reliever puffer is unavailable, expired or empty.

The service will ensure that an emergency asthma first aid kit is stored in a location that is known to all educators and staff, including relief staff, and easily accessible to adults (not locked away), inaccessible to children, and at room temperature in dry areas.

Asthma Emergency Kit contains:

- Blue or grey reliever medication
- X2 small volume spacer devices
- X2 compatible children's face mask
- Record form
- Asthma First Aid instructions

If a child has difficulty breathing and/or their asthma deteriorates.

A first aid trained educator with approved asthma management training will immediately attend to the child and administer Asthma First Aid according to either:

The Child's Asthma Action First Aid Plan as signed by the family and/or doctor's written instructions, OR

The Asthma First Aid Plan.

If a child has difficulty in breathing and there is no notification on any written communication from the parents/guardian about them having asthma; call an ambulance immediately, follow the Asthma First Aid Plan and contact the parents immediately. No harm is likely to result from giving a reliever puffer to someone without asthma. Spacers and masks can only be used by one person. That person can re-use the spacer or mask but it cannot be used by anyone else. We will ensure the child's name is written on the spacer and mask when it is used.

Asthma First Aid

Step 1:

- Sit the person upright
- Be calm and reassuring
- Do not leave them alone

Step 2:

- Give **4 puffs** of the blue reliever puffer medication
- Use a spacer if there is one
- Shake puffer
- Put **1 puff** into the spacer
- Take **4 breaths** from the spacer
- Repeat until 4 puffs have been taken
- Remember: **Shake, 1 puff, 4 breaths.**

Step 3:

- Wait 4 minutes.
- If there is no improvement, give 4 more puffs as above

Step 4:

- If there is still no improvement call emergency assistance (dial 000)
- Say 'ambulance' and that someone is having an asthma attack
- Keep giving 4 puffs every 4 minutes until emergency assistance arrives
- If calling triple zero (000) does not work on your mobile, try 112

Call emergency assistance immediately (dial 000)

- If the person is not breathing
- If the person's asthma suddenly becomes worse, or is not improving
- If the person is having an asthma attack and a puffer is not available
- If you're not sure it's asthma

Blue reliever medication is unlikely to harm, even if the person does not have asthma

SOURCES AND FURTHER READING

- Education and Care Services National Regulations
- National Quality Standard
- Asthma Australia
- National Asthma Organisation
- [Asthma Foundation NSW](#)
- [Asthma Foundation Victoria](#)
- National Health and Medical Research Council (NHMRC) (2010), "Australian Guidelines for the Prevention and Control of Infection in Healthcare", Commonwealth of Australia, Canberra, 2010.

ASSOCIATED POLICIES

- Medical Conditions Policy
- Medication Policy
- Interaction with children and behaviour guidance
- Supervision

POLICY REVIEW

- This policy will be reviewed every 12 months.
- The Approved Provider and Centre Director will ensure that at all times all educators maintain and implement this policy and its procedures.

- Families are encouraged to collaborate with the Centre to review the policy and procedures.

Last review: 31.07.2023

Next review: 31.07.2024

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