

## ASTHMA MANAGEMENT POLICY

Asthma is a chronic health condition, which is one of the most common reasons for childhood admission to hospital. Correct asthma management will assist to minimise the impact of asthma. Children under the age of six usually do not have the skills or ability to recognise and manage their own asthma effectively. With this in mind, our Service recognises the need to educate its staff and families about asthma and to implement responsible asthma management strategies.

### NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazards.
2.2.2	Incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.

### EDUCATION AND CARE SERVICES NATIONAL REGULATIONS

CHILDREN (EDUCATION AND CARE SERVICES) NATIONAL LAW NSW	
85	Incident, injury, trauma and illness policies and procedures
90	Medical conditions policy
90(1)(iv)	Medical Conditions Communication Plan
91	Medical condition policy to be provided to parents
92	Medication record
93	Administration of medication
94	Exception to authorisation requirement – anaphylaxis or asthma emergency
95	Procedure for administration of medication
136	First Aid qualifications
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed

## **PURPOSE**

We aim to create and maintain a safe and healthy environment for all children enrolled at the Service where all children with asthma can fully participate.

## **SCOPE**

This policy applies to children; families, educators, management, and visitors of the Service.

We are committed to be an Asthma Friendly Service as outlined by Asthma Australia. This means:

- At least one staff member holds a current ACECQA approved Emergency Asthma Management certificate during the service operation time;
- Asthma Emergency Kits (AEKs) are accessible to staff and include reliever medication
- Asthma First Aid posters are on display and information is available for staff and parents;
- Active supervision to children.

Nominated Supervisor, Responsible Person and educators must have adequate knowledge of the signs and symptoms of asthma to ensure the safety and wellbeing of the children. Management will ensure educators are aware of children's Medical Management Plan and Risk Management Plans.

## **BACKGROUND**

Asthma is clinically defined as a chronic lung disease, which can be controlled but not cured. In clinical practice, asthma is defined by the presence of both excessive variation in lung function, i.e. variation in expiratory airflow that is greater than that seen in healthy children ('variable airflow limitation'), and respiratory symptoms (e.g. wheeze, shortness of breath, cough, chest tightness) that vary over time and may be present or absent at any point in time (National Asthma Council Australia, 2015, p.4).

Asthma affects approximately 1 in 10 Australian children and adults. It is the most common reason for childhood admission to hospital. However, with correct asthma management, people with asthma need not restrict their daily activities. Community education assists in generating a better understanding of asthma within the community and minimising its impact.

Symptoms of asthma may vary between children, but may include wheezing; coughing (particularly at night), chest tightness, difficulty in breathing and shortness of breath. It is generally accepted that children under 6 years of age do not have the skills and ability to recognise and manage their own asthma without adult assistance. Our Service recognises the need to educate the staff and parents/guardians about asthma and to promote responsible asthma management strategies.

Asthma causes three main changes to the airways inside the lungs, and all of these can happen together:

- The thin layer of muscle within the wall of an airway can contract to make it tighter and narrower – reliever medicines work by relaxing these muscles in the airways.
- The inside walls of the airways can become swollen, leaving less space inside – preventer medicines work by reducing the inflammation that causes the swelling.
- Mucus can block the inside of the airways – preventer medicines also reduce mucus.

Legislation that governs the operation of approved children's services is based on the health, safety and welfare of children, and requires that children be protected from hazards and harm. Our Service will ensure that at least one educator on duty has current approved emergency asthma management training in accordance with the Education and Care Services National Regulations.

## **ASTHMA AND COVID-19**

There is no specific data as yet to suggest people with asthma are at greater risk of contracting COVID-19. However as this is a serious respiratory illness, anyone with asthma should implement strict hygiene measures to protect themselves and others.

Health practitioners have encouraged parents of children with asthma to (Asthma Australia, June 2020):

- Update their child's Asthma Action Plan with their medical practitioner;
- Ensure their child uses their reliever and preventer medicines (if required) as prescribed;
- Ensure their child continues taking medication to keep their asthma well controlled;
- Practice good hygiene and other measures to reduce contact with people who may be infected;
- Have their child tested for COVID-19 if they develop any symptoms (cough, fever, shortness of breath, sore throat).

## **IMPLEMENTATION**

We will involve all educators, families, and children in regular discussions about medical conditions and general health and wellbeing throughout our curriculum. The Service will adhere to privacy and confidentiality procedures when dealing with individual health needs.

A copy of our Medical Conditions Policy will be provided to all educators and families of the Service and will be reviewed on a regular basis. It is important that communication is open between families and educators to ensure appropriate asthma management.

It is imperative that all educators and volunteers at the Service follow a child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy, or medical condition.

### **Management and Nominated Supervisor will ensure:**

- New educators will read and be aware of all medical condition policies and procedures, maintaining awareness of asthma management strategies;
- That all educator's first aid qualifications, anaphylaxis management training and Emergency Asthma Management training is current, and meets the requirements of the National Law and National Regulations;
- At least one educator has current approved Emergency Asthma Management training is on duty during the service operation times;
- The details of approved Emergency Asthma Management training are included on the staff record;
- Parents/guardians of an enrolled child who is diagnosed with asthma are provided with a copy of the Asthma Management Policy and Medical Conditions;
- To identify children with asthma during the enrolment process and inform all educators;
- Written consent is requested from families on the enrolment form to administer emergency asthma medication or treatment if required;
- Families need to provide the Service with the Asthma Action Plan in consultation with, and signed by, a medical practitioner prior to the child starting at the Service;
- The Asthma Action Plan is updated regularly or whenever a change to their child's management of asthma changes;

- A Risk Minimisation Plan is developed for every child with asthma, in consultation with parents/guardians;
- That all children with asthma have an Asthma Action Plan and Risk Minimisation Plan filed with their enrolment record;
- An Administration of Medication Record is kept for each child to whom medication is to be administered by the Service;
- Families of children with asthma provide reliever medication and a spacer if specified as required by the Medical Practitioner in the Medical Management Plan whilst their child is attending the Service;
- The expiry date of reliever medication is checked regularly and replaced when required, and that spacers and facemasks are replaced after every use;
- The asthma first aid procedure is consistent with current national recommendations;
- That educators with first aid qualification are aware of the asthma first aid procedure
- Communication between management, educators, and parents/guardians regarding the Service's Asthma Policy and strategies are reviewed and discussed regularly to ensure compliance and best practice;
- All educators are able to identify and minimise, where possible, asthma triggers for children attending the Service
- Children with asthma are not discriminated against in any way;
- Children with asthma can participate in activities safely and to their full potential;
- To communicate any concerns with parents/guardians regarding the management of children with asthma at the Service;
- Asthma Australia's Asthma First Aid posters are displayed in key locations at the Service.

**In the Event that a Child Experiences an Asthma Emergency the Service and Staff Will:**

- Follow the child's Asthma Action Plan
- If the child does not respond to steps within the Asthma Action Plan call an ambulance immediately by dialling 000
- Continue first aid measures
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Notify the Regulatory Authority within 24 hours

**Educators Will Ensure:**

- They are aware of the Services Asthma Policy and asthma first aid procedure;
- To maintain current approved emergency Asthma Management qualifications;
- They are able to identify and, where possible, minimise asthma triggers as outlined in the child's Asthma Action Plan;
- That the asthma first aid kit, children's personal asthma medication and Asthma Action Plans are taken on excursions or other offsite events, including emergency evacuations and drills;
- To administer prescribed asthma medication in accordance with the child's Asthma Action Plan;
- To discuss with parents/guardians the requirements for completing the enrolment form and Administration of Medication Record for their child;
- To consult with the parents/guardians of children with asthma in relation to the health and safety of their child;

- To communicate any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities;
- That children with asthma are not discriminated against in any way;
- That children with asthma can participate in activities safely and to their full potential, ensuring an inclusive program;
- That any asthma attacks are documented, advising parents as a matter of priority, when practicable.

### **Families Will:**

- Read and acknowledge the Service's Asthma Management Policy;
- Inform the Responsible Person during enrolment or as soon as diagnosed that their child has asthma;
- Provide a copy of their child's Asthma Action Plan to the Service ensuring it has been prepared in consultation with, and signed by, a medical practitioner;
- Have the Asthma Action Plan reviewed and updated at least annually or whenever medication or management changes;
- Ensure all details on their child's enrolment form and medication record are completed prior to commencement at the Service;
- Provide an adequate supply of appropriate asthma medication and equipment for their child at all times;
- Notify the Service in writing, of any changes to the information on the Asthma Action Plan, enrolment form, or medication record;
- Communicate regularly with the Responsible Person in relation to the ongoing health and wellbeing of their child, and the management of their child's asthma;
- Encourage their child to learn about their asthma, and to communicate with the Service if they are unwell or experiencing asthma symptoms.

### **RISK MINIMISATION PLAN FOR A CHILD WITH DIAGNOSED ASTHMA**

The Responsible Person, together with the parents/guardians of a child with asthma, will discuss and agree on a Risk Minimisation Plan of action for the emergency management of an asthma attack based on the child's Asthma Action Plan. This plan should include action to be taken where the parents/guardians have provided asthma medication, and in situations where this medication may not be available.

### **COMMUNICATION PLAN**

A communication plan will be created in accordance to our Medical Conditions Policy. This will detail the negotiated and documented manner in which to communicate any changes to the child's medical management plan and risk management plan for the child with relevant educators.

### **RESOURCE**

[Asthma First Aid A4 Poster](#)

[Asthma Action Plan](#)

[Supporting the Continuity of Asthma Care \(for patients with severe asthma during Coronavirus \(COVID-19\) pandemic\)](#)

**SOURCE:**

Australian Children’s Education & Care Quality Authority. (2014).  
 Asthma Australia: [www.asthmaaustralia.org.au](http://www.asthmaaustralia.org.au)  
 Australian Asthma Handbook: <https://www.astmahandbook.org.au/>  
 Australian Children’s Education & Care Quality Authority. (2014)  
 Early Childhood Australia Code of Ethics (2016)  
 Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).  
 Guide to the National Quality Standard. (2020).  
 National Asthma Council Australia (2015) *Australian asthma handbook: Quick reference guide*.  
 National Asthma Council Australia (2019) *My asthma guide* <https://www.nationalasthma.org.au/living-with-asthma/resources/patients-carers/brochures/my-asthma-guide>  
 National Health and Medical Research Council(2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*  
Revised National Quality Standard (2018).

**Version History**

Version	Description of changes	Author	Effective Date
1	Updated content from KCS Medical Conditions Policy	Tury To	August 2020