

Moreland Early Years Management

ASTHMA POLICY AND PROCEDURE

Mandatory – Quality Area 2

PURPOSE

Moreland Early Years Management places high priority on the health, wellbeing and safety of all children in early years services. This policy and procedure will provide guidelines to all early childhood professionals, staff and families in relation to the management of Asthma.

In addition, this policy and procedure aims to minimise the risk of asthma incidents occurring while children are in the care of Moreland Early Years Management early years services

This policy should be read in conjunction with the *Administration of First Aid, Dealing with Medical Conditions and Incident, Injury, Trauma and Illness Policy and Procedures*.

POLICY STATEMENT

The Moreland Early Years Management early years services are committed to:

- Providing a safe and healthy environment in which children at risk of asthma can participate fully in all aspects of the program.
- Raising awareness of families, staff, children and others attending the service about asthma.
- Actively involving the parents of each child at risk of asthma in assessing risks, and in developing risk minimisation and risk management strategies for their child.
- Ensuring early childhood teachers and educators at the service have completed and are up to date with First Aid training and Asthma Emergency Management.
- Facilitating open communication between early childhood teachers and educators to ensure the safety and wellbeing of children at risk of asthma.

BACKGROUND AND LEGISLATION

Asthma is a chronic, treatable health condition that affects approximately one in 10 Australian children and is one of the most common reasons for childhood admission to hospital. With good 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.

Services must ensure that each child diagnosed with asthma has a current medical action plan prepared specifically for that child and signed by their medical practitioner or specialist, at or prior to enrolment, and must implement strategies to assist children with asthma through the development and use of risk minimisation and communication plans.

Moreland Early Years Management will ensure all early childhood teachers and educators working directly with children have current approved Emergency Asthma management and First Aid Training in accordance with the *Education and Care Services National Regulations 2011* (Regulation 136(1)(b)).

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010: Sections 167, 169,174*
- *Education and Care Services National Regulations 2011: Regulations 90–96, 102, 136, 137,*
- *Health Records Act 2001 (Vic)*
- *National Quality Standard, Quality Area 2: Children’s Health and Safety*
- *Occupational Health and Safety Act 2004 (Vic)*
- *Privacy and Data Protection Act 2014 (Vic)*
- *Privacy Act 1988 (Cth)*
- *Public Health and Wellbeing Act 2008 (Vic)*
- *Public Health and Wellbeing Regulations 2009 (Vic)*

PROCEDURES

All Moreland Early Years Management early childhood teachers and educators will have an understanding and familiarity with the signs and symptoms and management of asthma, and medication to be used for individual children at the early years’ service.

PREVENTION AND RISK MANAGEMENT

Moreland Early Years Management early childhood teachers and educators will:

- Conduct a Risk Assessment of the potential for asthma triggers.
- Be familiar with individual medical action plans and risk minimisation and Communication plans.
- Work with families and the community to reduce the presence of triggers that cause asthmatic incidents within the learning environment.

Moreland Early Years Management early childhood teachers and educators will take the following measures to reduce risks:

- Check a child with known asthma has an asthma action plan signed by a medical practitioner, current (in-date) medication documented in the action plan.
- Work closely with parents to document an effective communication plan as well as a risk minimisation plan including ongoing management of asthma.
- Ensure that a copy of the child’s individual asthma action plan and risk minimisation and communication plan is placed in the child’s individual enrolment record at the service.

- Respond appropriately to an asthma reaction by following the individual child's asthma action plan. Children are not permitted to self-administer medication at the service.
- Ensure that each individual child's medication is accessible to all early childhood teachers and educators whilst the child is accessing the service and is out of reach of children.
- Ensure containers/storage bags are maintained for individual children's medications. This must be clearly labelled with the child's photo, their name and include a copy of their asthma action plan.
- Early childhood teachers and educators are required to check each child's medication expiry dates regularly to ensure it is in date.
- Ensure a suitably equipped and in date Asthma first aid kit is available at the service at all times.

INDIVIDUAL MANAGEMENT OF CHILDREN

When an enrolled child is identified as asthmatic and is at risk of experiencing an asthmatic reaction, early childhood teachers and educators and parents will work together to ensure the wellbeing of the child.

Early childhood teachers and educators will;

- Ensure that an individual medical action plan for asthma is prepared and signed by a Medical Practitioner.
- Check that individual medical action plans are updated on a regular basis, or when a medical practitioner or the parent, notify early childhood teachers, educators and staff of a change of medical/general information.
- Ensure that the child allergy chart is displayed in each room and that every staff member, including relief staff have access to it.
- Be aware of children who are known to have asthma and do not have 'in date' reliever medication at the service, are not able to access the service until the parent has provided 'in date' reliever medication to the services to use in case of an asthmatic reaction.
- Provide parents of a child identified with asthma with a copy of the Asthma and Medical Conditions Policy and Procedure.
- Document any asthmatic incident that has occurred at the Moreland Early Years Management's early years services in the Incident, Injury, Illness and Trauma record and inform the parent as soon as possible. This information is also required to be given to the attending ambulance officers if applicable.
- Document any administration of medication in the medication record.
- Moreland Early Years Management must be notified within 24 hours of any incident that requires the attention of a medical practitioner or attendance at a hospital and a subsequent report will be made to the regulatory authority.
- Ensure a copy of the child's individual medical action plan, communication and risk minimisation plan is completed prior to the child commencing at the service and is placed in the child's individual enrolment record at the service.

Induction of Early Childhood Professionals and Relief Educators

If a child with asthma attends a Moreland Early Years Management early years service, induction of early childhood teachers and educators and staff will include (as per the induction checklist):

- Being provided with a copy of the Asthma Policy and Procedure and Dealing with Medical Conditions Policy and Procedure
- The location of the medication and spacer device.
- Information about where the following documents are located:
 - Action Plan (signed by a medical practitioner)
 - Risk minimisation and communication plans for the management of asthma.

A copy of this information should be available in the Relief staff folder at each service.

PARENTS

Parents will:

- Identify a child's known medical condition on the Enrolment Form
- Provide a current individual action plan for asthma, (no older than 12 months), prepared and signed by a medical practitioner. The plan will be updated regularly or when health needs change.
- Assist early childhood teachers and educators to develop medical conditions risk assessment and communication plans.
- Provide 'in date' asthmatic reliever medication bearing the child's name and expiry date and spacer (including a child's face mask if required).
- Advise the service and early childhood teachers and educators of any changes in the child's health status. This change must also be reflected in the child's individual enrolment record and be signed and dated by the parent.

RESPONDING TO AN ASTHMA ATTACK

Early childhood teachers and educators will respond to an asthma incident.

Where a child has asthma and appears to be having an asthma attack, early childhood teachers and educators will follow the individual medical action plan for asthma and if necessary, call an ambulance by dialling 000.

Where a child has not been identified as asthmatic but appears to be having an asthma attack early childhood teachers and educators will administer first aid and call an ambulance.

Reliever medication is safe to administer to children, even if they do not have asthma, however if there is no Asthma action plan you must also **call emergency assistance to attend (000)** and notify the parent of the child or person to be notified in the event of illness if the parent cannot be contacted as soon as possible. Notify the Moreland Early Years Management early years manager.

In the situation where a child is to be taken from the service by ambulance and their parent is not in attendance, a Moreland Early Years Management early childhood teacher or educator is to accompany the child to the hospital (ensure the child's individual enrolment record is also taken).

Moreland Early Years Management must be notified within 24 hours of any incident that requires the attention of a medical practitioner or attendance at a hospital and a subsequent report will be made to the regulatory authority. Early childhood teachers and educators will ensure the completion of the medication record and incident, Injury, trauma and illness forms.

Early Childhood teachers and educators will ensure a suitably equipped and in date Asthma first aid kit is available at the service at all times.

TRAINING AND PROFESSIONAL DEVELOPMENT

Early childhood teachers and educators have access to information with regard to the management of, asthma and the administration of associated medication. It is an expectation that all early childhood teachers and educators are trained in "Providing an Emergency First aid Response in an Education and Care Setting" and Emergency Asthma Management. All staff (including casual, relief and temporary staff) will be provided with the opportunity to become familiar with this policy and information regarding asthma.

DEFINITIONS

The terms defined in this section relate specifically to this policy and procedure. For commonly used terms e.g. Approved provider, Nominated Supervisor, Regulatory Authority etc. refer to General definitions section in the policy and procedure folder.

Approved Emergency Asthma Management (EAM) training: Training that is approved by the National Authority in accordance with Division 7 of the National Regulations, and is listed on the ACECQA website: <http://www.acecqa.gov.au>. EAM training provides knowledge about the underlying causes of asthma, asthma triggers, and the recognition and treatment of an asthma attack.

Asthma Friendly Children's Services Program: A program developed by The Asthma Foundation of Victoria to provide a safer environment for children in kindergarten, childcare, family day care and out-of-school hours care. This program also gives staff the confidence and skills to care for a child with asthma and gives parents/guardians peace of mind. To be recognised as an Asthma Friendly Children's Service, services must address and fulfil five essential criteria, which will be assessed by The Asthma Foundation of Victoria. Upon accreditation, the service will receive a certificate and window sticker. This accreditation is valid for three years.

Asthma Action Plan: A record of information on an individual child's asthma and its management, including contact details, what to do when the child's asthma worsens and the treatment to be administered in an emergency. An Asthma Action Plan template specifically for use in children's services can be downloaded from the Resources section of The Asthma Foundation of Victoria website: www.asthma.org.au

Asthma emergency: The onset of unstable or deteriorating asthma symptoms requiring immediate treatment with reliever medication.

Asthma first aid kit: Kits should contain:

- reliever medication
- 2 small volume spacer devices
- 2 compatible children's face masks (for children under the age of four)
- record form
- asthma first aid instruction card.

The Asthma Foundation of Victoria recommends that spacers and face masks are for single-use only. It is essential to have at least two spacers and two face masks in each first aid kit, and these should be replaced once used.

Asthma triggers: Things that may induce asthma symptoms, for example, pollens, colds/viruses, dust mites, smoke, thunderstorms, and exercise. Asthma triggers will vary from child to child.

Communication plan: A plan that forms part of the policy outlining how the service will communicate with parents and staff in relation to the policy. The communication plan also describes how parents and staff will be informed about risk minimisation plans and emergency procedures to be followed when a child diagnosed as at risk of asthma is enrolled at a service.

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonably foreseeable risk of injury.

Medication record: Contains details for each child to whom medication is to be administered by the service. This includes the child's name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.

Puffer: The common name for a metered dose inhaler.

Reliever medication: This comes in a blue/grey metered dose inhaler containing salbutamol, a chemical used to relax the muscles around the airways to relieve asthma symptoms. This medication is always used in an asthma emergency. Reliever medication is commonly sold by pharmacies as Airomir, Asmol, or Ventolin.

Risk minimisation plan: A service-specific plan that documents a child's triggers, practical strategies to minimise risk at the service and details of the person/s responsible for implementing these strategies. A risk minimisation plan should be developed by the Early childhood Teacher in consultation with the parents of the child diagnosed with asthma and the service staff. The plan should be developed upon a child's enrolment or initial diagnosis, and reviewed at least annually and always on re-enrolment. A sample risk minimisation plan is provided in Attachment 1.

Serious incident:

Serious incident: A serious incident is defined in Regulation 12 as:

- the death of a child while being educated and cared for by the service
- any incident involving an injury or trauma, or the illness of a child that requires or ought to have required:
 - attention of a registered medical practitioner; or
 - attendance at a hospitalexamples include whooping cough, broken limb, anaphylaxis reaction

- any incident requiring attendance by emergency services
- a circumstance where a child appears to be missing, is unaccounted for, has been removed from the service contrary to the Regulations, or has been locked in or out of the service premises.

Moreland Early Years Management must notify the Regulatory Authority (DET) in writing within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)).

Spacer device: A plastic chamber device used to increase the efficiency of delivery of reliever medication from a puffer. It should always be used in conjunction with a puffer device and may be used in conjunction with a face mask.

Staff record: Must be kept by the service and include details of the Nominated Supervisors, the educational leader, other staff members, volunteers and the Responsible Person. The record must include information about qualifications, training and details of the Working with Children Check (Regulations 146–149).

SOURCES AND RELATED POLICIES

Sources

- Asthma Australia: www.asthmaaustralia.org.au
- The Asthma Foundation of Victoria: www.asthma.org.au or phone (03) 9326 7088 or 1800 278 462 (toll free)
- Australian Children’s Education and Care Quality Authority (ACECQA): www.acecqa.gov.au
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011, ACECQA.

Related policies

- *Administration of First Aid Policy and Procedure*
- *Administration of Medication Policy and Procedure*
- *Anaphylaxis Policy and Procedure*
- *Dealing with Medical Conditions Policy and Procedure*
- *Diabetes Policy and Procedure*
- *Enrolment and Orientation Policy and Procedure*
- *Emergency and Evacuation Policy and Procedure*
- *Excursions and Service Events Policy and Procedure*
- *Incident, Injury, Trauma and Illness Policy and Procedure*
- *Inclusion and Equity Policy and procedure*
- *Nutrition and Active Play Policy*
- *Privacy and Confidentiality Policy and procedure*
- *Supervision of Children Policy and procedure*

Attachments

Attachment 1: Risk Minimisation and Communication Plan

Attachment 2: First Aid Treatment for Asthma

Attachment 3: Asthma Action Plans

Authorisation

May 2019

Review date: May 2021

Moreland Early Years Management

RISK MINIMISATION AND COMMUNICATION PLAN FOR CHILDREN AT INCREASED RISK OF MEDICAL EMERGENCIES

Centre Name:			
Child's Name:		Date of Birth:	
Child's Medical Condition:		Date Diagnosed:	
EMERGENCY CONTACT DETAILS (PARENT)			
Parent's Name:		Parent's Name:	
Relationship:		Relationship:	
Phone Number:		Phone Number:	
Address:		Address:	
EMERGENCY CONTACT DETAILS (ALTERNATIVE)			
Name:		Name:	
Relationship:		Relationship:	
Phone Number:		Phone Number:	
Medical practitioner contact:	Name:		
	Phone:		
Storage location of medication:			
Plan Prepared By: (position)			

The following procedures have been developed in consultation with the parent and implemented to help protect the child identified at high risk for a medical emergency.

I, (Parent name) _____ will communicate any changes in relation to my child's medical management plan and risk minimisation plan in writing to the early childhood teacher/educators immediately.
 I, (Parent name) _____ have read and understand my child's medical action plan and risk minimisation plan.

Parent signature		Date:	
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Relevant staff members and volunteers are informed about, have read and understood the medical conditions policy, and the medical management and risk minimisation plans for children at the service who have a diagnosed health care need, allergy or relevant medical condition.

Staff Name:			
Signature:		Date:	
Staff Name:			
Signature:		Date:	
Staff Name:			
Signature:		Signature:	

Environment			
The following suggestions may be considered when developing or reviewing a child's risk minimisation plan in consultation with the parent.			
Risk Identified	Actions required to minimise the risk	Who is responsible?	Completion date?

COMMUNICATION PLAN (ASTHMA)

Child's Name:		Date of Birth:		
Child's Medical Condition:	Asthma	Date Diagnosed:		
Parent's Name		Contact Number:		
What information are we communicating?	How will we communicate?	When we will communicate?	Who is responsible?	Date completed & signature
Enrolment process/ requirements. Service Policies and Procedures/ Asthma, Dealing with Medical Conditions & Administration of Medication Policies & Procedures. Service contact details.	Policy given to parent: Y N Name: Date: Signature:	When completing the new communication plan.	Teacher:	
The child has been diagnosed with Asthma	Formal notification on Enrolment Form.	On enrolment.	Parent:	
Asthma Action Plan (provided with prescribed and labelled medication).	Signed original plan by registered medical practitioner.	At orientation day. When enrolment form is handed in. As soon as diagnosis takes place.	Parent in consultation with family's Registered Medical Practitioner.	Parent: Teacher:
	Copy of the Individual action plan is kept with the child's enrolment record. Action Plan is displayed in the children's room and accessible to all teachers/-educators and a copy is in the medication bag/container.	Before the child attends service.	All Teachers/-Educators.	
Medication Form when the administration of medication occurs.	Signed the specific section in the enrolment form. Signed medication form when	Before the child attends the service. When a reaction	Parent: Teacher:	

	medication is administered.	occurs.		
Risk Minimisation Plan.	Signed original risk minimisation plan.	Before the child attends the service.	Parent: Teacher:	
Communication Plan.	Formal meeting.	Before the child attends the service.	Parent: Teacher:	
The Asthma action plan, risk minimisation plan and communication plan are stored in the child's individual enrolment record, in their medical bag/container and in a prominent position (easily accessible to staff) in the children's room.	Staff meetings, verbally, and induction sessions.	During induction of staff, relievers, students, volunteers.	All Teachers/-Educators.	
Any changes to the child's Asthma Action Plan and relevant details.	Verbally or in writing.	As soon as possible after signed-off from family's Registered Medical Practitioner	Parent:	
All relevant information and concerns (<i>i.e. if Asthma symptoms were present last night</i>)	Verbally/by telephone.	As soon as practicable, but no later than 24 hours after condition became apparent.	Parent:	
	Documented in Accident, Injury, Trauma and Illness Record Book.	As soon as notified.	All Teachers/-Educators.	
Ambulance Victoria (AV) How to Call card	Displayed near all telephones.	At all times and when inducting relievers, students, volunteers.	All Teachers/-Educators.	
Procedure for excursions <ul style="list-style-type: none"> Child's Asthma Management Plan, medication, and mobile first aid kit. 	<ul style="list-style-type: none"> Formal meeting. Parent preferred emergency contact number. 	Prior to excursion.	All Teachers/-Educators.	

Medication reaching expiry date. Displayed on the medication bag/container.	Verbally and in writing	Parents to be given one month notice before medication expires.	All Teachers/- Educators.	
Staff Asthma/ Anaphylaxis/ First Aid training requirements.	Check the training expiry dates	3 months prior to the expiry date.	All Teachers/- Educators.	
	Staff name	Anaphylaxis training Expiry	Asthma Expiry	First Aid Expiry

COMMUNICATED CHANGES TO THE MANAGEMENT OR DIAGNOSIS OF ANAPHYLAXIS

Date of Change	Change Required	Action Required	Actioned By	Communicated to Relevant Teachers/- Educators.	Parent Signature Date

Ensure that any changes made are also noted on the child's individual record and are signed and dated by the parent.

ATTACHMENT 2

First Aid Treatment for and Asthma Action Plans

Download this attachment from Asthma Australia: <https://www.asthmaaustralia.org.au>