

Asthma Policy

Our policy is current as at July, 2022 and will be reviewed again in July 2024 or as required. Our policy is based on the specialist source, Asthma Foundation of Victoria.

Rationale

Asthma is a chronic health condition affecting one in nine Australian children. It is a common reason for childhood admission to hospital. Community education and correct asthma management will assist to minimise 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. With this in mind, our Centre recognises the need to educate our staff and parents/carers about asthma and to promote responsible asthma management strategies.

Our Asthma Policy aims

This Asthma Policy aims to:

- Raise the awareness of asthma amongst those involved with the Children's Service.
- Provide the necessary strategies to ensure the health and safety of all persons with asthma involved with the Children's Service.
- 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.

Our commitment

Asthma management should be viewed as a shared responsibility. To this end each of the key groups within Mentone Park Child Care and Preschool give the following undertakings.

Our Management will:

- Provide educators with a copy of the Asthma Policy and brief them on asthma procedures upon their appointment to our Centre.
- Identify children with asthma during the enrolment process and inform educators.
- Provide parents with a copy of the Asthma Policy and Medical Conditions Policy upon enrolment
- Keep a copy of Asthma Action Plans in the child's enrolment record and display in the room where appropriate.
- Ensure that an emergency Asthma First Aid poster is displayed in key locations.
- Ensure that parents are reminded two weeks' prior to expiry dates on medications. Expiry dates will be recorded in the daily diary.
- Encourage open communication between parents/guardians and staff regarding the status and impact of a child's asthma.

* The First Aid Kit is located in the kitchen, in a cupboard above the fridge with an appropriate sign.

*Asthma medications are stored in the kitchen in a labelled container on the top shelf above the microwave.

Educators will:

- Read this policy when a child present with asthma enrolls in the centre.
- Ensure that they maintain current accreditation in first aid.
- Ensure that they are aware of the children in their care with asthma.
- Ensure, in consultation with the parent/guardian, 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, for example if the parents have not yet provided the asthma plan due within the seven days as described below, the Asthma First Aid Plan outlined in this document should be followed immediately.
- Promptly communicate, to management or parents/guardians, any concerns should it be considered that a child's asthma is limiting his/her ability to participate fully in all activities.
- Ensure that children with asthma are treated the same as all other children.

Parents/guardians will:

- Inform staff, 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 written Asthma Action Plan. This plan should be provided to our Centre within seven days of enrolment.
- Notify the staff, 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 at all times
- Ensure that they comply with all requirements and procedures in relation to the Medications Record.
- Communicate all relevant information and concerns to educator as the need arises (for example, if asthma symptoms were present the previous evening).
- Ensure, in consultation with the staff, the health and safety of their child through supervised management of the child's asthma.
- Any parent of a child with asthma in care is required to provide written information regarding the child's asthma either on enrolment or on diagnosis. No asthma medication will be given to children without an action plan or prescription from the doctor.

Air Quality

Children (up to age 14) are more sensitive to the effects of breathing in smoke, particularly those with a heart or lung disease (including asthma). Common symptoms due to smoke exposure include itchy eyes, sore throat, runny nose and coughing.

If we were to smell or see smoke outside, the children will be kept inside (if safe to do so) to ensure their safety.

In addition we will:

- ensure that all medical management plans (such as asthma plans) are in place
- ensure relevant medication is available
- reduce physical activity
- limit or cancel outdoor activities (including excursions)
- keep windows and doors shut

- switch air conditioners to ‘recirculate’

If we have further concerns about a child’s health, we will:

- phone parents
- seek medical advice or call NURSE-ON-CALL on 1300 60 60 24 for assistance
- call an ambulance for anyone who is experiencing chest tightness or breathing difficulties

We will check air quality on the Environment Protection Agency website: EPA Airwatch for local guidance.

The Asthma Action Plan should include information such as:

- Signs and symptoms specific to the child’s asthma.
- A list of known triggers.
- The preferred method for treating deteriorating asthma (that is, an asthma attack).
- What to do in an asthma emergency.
- Name, address and telephone number of a person who is to be notified of any accident, injury, trauma or illness involving the child.
- Name, address and telephone number of the child’s doctor.

ASTHMA FIRST AID PLAN

Step 1. Sit the person upright

- Be calm and reassuring.
- Do not leave them alone.

Step 2. Give medication

- Shake the blue reliever puffer.
- Use a spacer if you have one.
- Give 4 separate puffs into a spacer.
- Take 4 breaths from the spacer after each puff.

Giving blue reliever medication to someone who doesn’t have asthma is unlikely to harm them.

Step 3. Wait 4 minutes

- If there is no improvement, repeat steps 2.

Step 4. If there is still no improvement call emergency assistance (dial 000).

- Tell the operator the person is having an asthma attack.
- Keep giving 4 puffs every 4 minutes while you wait for emergency assistance.

Call emergency assistance immediately (DIAL 000) if the person’s asthma suddenly becomes worse.

The parents/guardians of any child who becomes ill at our Centre will be notified, even if the child has a complete recovery from the asthma attack.

The treatment given will be recorded in the Accident, Injury, Trauma and Illness and/or the Medication Record and parents will be requested to sign it.

An overdose cannot be given following the steps outlined. However, it is important to note that some children may experience an increased heart rate or tremors, but these will pass quickly.

All educators working at Mentone Park Child Care and Preschool hold a valid First Aid certificate.

What if it is the first attack of asthma?

A problem that may be encountered is when a child suddenly collapses, or appears to have difficulty breathing, and is not known to have pre-existing asthma or other health problems. In this situation educators will call the ambulance immediately by dialling 000 and state that the child is having difficulty breathing, then call the parents to inform them about what is happening with their child.