

D-16 Asthma

NQS

QA. 2.1	Health.
QA. 2.1.1	Wellbeing and comfort.
QA. 2.1.2	Health practices and procedures.
QA. 2.2.1	Supervision.
QA. 2.2.2	Incident and emergency management.
QA. 3	Physical environment
QA. 4.2.2	Professional standards.
QA. 6.1.1	Engagement with the service.
QA. 7.1.2	Management systems.
QA. 7.2.1	Continuous improvement.

National Regulations

Reg. 90	Medical conditions policy
Reg. 91	Medical conditions policy to be provided to parents
Reg. 94	Exception to authorisation requirement—anaphylaxis or asthma emergency
Reg. 95	Procedure for administration of medication
Reg. 136	First aid qualifications
Reg. 137	Approval of qualifications
Reg. 145	Staff record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures

My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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Policy Statement

We aim to provide an environment which is safe and healthy where children with asthma can participate equally in all aspects of the programs and experiences offered at the service. We will ensure all staff are equipped with adequate knowledge and training of asthma management to enable them to respond immediately and appropriately to an asthma emergency.

Related Policies

- Normanhurst West OSHC Policy A-4: Enrolment
- Normanhurst West OSHC Policy A-10: Acceptance and Refusal of Authorisations
- Normanhurst West OSHC Policy C-3: Staff Orientation and Induction
- Normanhurst West OSHC Policy C-9: Relief Educators
- Normanhurst West OSHC Policy C-10: Volunteers/Students/Visitors
- Normanhurst West OSHC Policy D-1: Dealing with Medical Conditions
- Normanhurst West OSHC Policy D-2: Hygiene

- Normanhurst West OSHC Policy D-10: First Aid
- Normanhurst West OSHC Policy D-15: Allergies
- Normanhurst West OSHC Policy D-20: Medication

Procedure

The Centre will ensure there is at least one educator present at all times that children are being educated and cared for at the centre who has undertaken approved emergency asthma management training, as per Regulation 136.

All educators will undertake Approved Asthma Management Training, as specified by the Australian Children's Education and Care Quality Authority (ACECQA). Training will be renewed every 3 years as required.

Parents will be required to inform the Centre of any child diagnosed by a medical practitioner as being asthmatic, and the severity, at the time of enrolment. This information is recorded online as part of the enrolment process. Any changes to a child's asthma status must be informed to the centre as soon as it is known (including new diagnosis, or changes to a current diagnosis). Parents will be reminded of this requirement through the Family Handbook.

Parents will be required to provide a copy of the asthma care plan, as authorised by a medical practitioner (Regulation 90). To ensure accuracy of the information, asthma plans must be provided prior to the review date noted, or alternatively where no date is provided, within 12 months of the writing of the plan. Without these plans, a child's enrolment will not be confirmed. When an asthma plan reaches either the review date noted, or where no date is listed, 12 months from the writing of the plan, the Parents / Guardians are responsible for organising a medical appointment and providing an updated plan to the centre. Centre staff will follow this up with the family if not received, and where the plans are not forthcoming, may suspend a child's enrolment at the service until the plan is received. Permission will be sought from parents as part of the Risk Minimisation and Communication Plan to have the asthma plan displayed in a location visible and accessible to staff responsible for the child.,

Any medication listed on the asthma plan, such as inhalers and/or spacers must be supplied by the parents, clearly marked with the child's name, and either:

- Provided to the centre, where it will be stored in the NWOOSH medication cupboard, an area easily accessible to educators (not locked away) but inaccessible to children and away from any direct heat source, in a hard plastic box with the child's asthma plan; or
- Left with the child to bring to the service. This medication MUST be carried in the child's pocket at all times, and must be presented to a NWOOSH Educator, who will consult the Responsible Person on Duty to ensure this matches the asthma care plan and is in date, as the child arrives at the service. If the child does not have their medication on them, or the medication is not in date, the child will not be able to remain at the centre and will either be taken to the school office (in the case of an afternoon session), or will be sent back home with the parent (in the case of a morning session, or Vacation care / pupil free day). Where medication is carried on the child, the child's asthma care plan will be kept in a plastic sleeve in the medication cupboard.

An emergency reliever inhaler and spacer will be kept in the First Aid Kit. Staff will be responsible for replacing the inhaler when it has expired. If the emergency spacer is used by a child during an asthma attack, the spacer will be disposed of after use, and a replacement purchased.

When taking children off school grounds, any asthma medication that relates to children on the excursion, and has been provided to the service, must be carried by centre staff. Any asthma medication carried in a child's pocket, will remain with the child, after being checked by a NWOOSH educator on arrival. Asthma medication must be administered either by educators adequately trained in asthma management, or by the child in the case of self-administration (see D-20: Medication).

All educators, including relief educators and volunteers, will be informed of any current enrolled children who have been diagnosed as being asthmatic upon employment, and reminded of these each session, specific to the children booked to attend. Staff will be responsible for familiarising themselves with the children diagnosed.

In the event of an asthma attack occurring where a child has been diagnosed as being asthmatic, staff will follow the instructions on the child's action plan.

In the event of an asthma emergency occurring where a child has not received an asthma diagnosis and has no prior history of asthma, medication may be administered without an authorisation (Regulation 94), by following the below steps:

- Sit the child upright and reassure them. Child must not be left alone.
- Administer 4 puffs of the reliever inhaler (one puff at a time), preferably through a spacer device. Child should take 4 breaths with each puff of the inhaler.
- Have another staff member contact parent or guardian and emergency services "000" (as per regulation 94), as well as advise the Nominated Supervisor.
- Wait 4 minutes.
- If there is little or no improvement repeat the administration
- Continue the above steps until advised otherwise by emergency services, or until medical services arrive.

Educators must ensure that all asthma medication administered is recorded in a medication record.

Parents/guardians of children diagnosed as being asthmatic must be provided with a copy of the Asthma Policy (Regulation 91).

Any educator who has been diagnosed as being asthmatic by a medical practitioner must advise the Centre Director on employment.

Sources

- Education and Care Services National Regulations 2011
- National Quality Standard
- Children (Education and Care Services National Law Application) Act 2010
- Australian Children's Education and Care Quality Authority (ACECQA)
- United Nations Rights of the Child (Article 24)
- NSW Public Health Act 2010
- Disability discrimination Act – federal 1992
- NSW Anti-Discrimination Act 1977
- Work Health and Safety Act 2011
- My Time, Our Place: Framework for School Age Care in Australia 2011
- Asthma Australia - <http://asthmaaustralia.org.au/>

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