

	<h2>Asthma Procedure</h2>
Linked Policy Document	This procedure details actions and processes pursuant to the <i>Asthma Policy</i> .
Version No.	Version 3.0 November 2021 (approved)
Authorisation	General Manager Community Services
Expiry Date	Policy to be reviewed by 1 December 2024
Responsible Officer	Manager Families and Children Services
Policy Owner	Early Childhood Coordinator

1. Purpose

This procedure will provide a process to:

- ensure educators, staff and parents/guardians are aware of their obligations and the best practice management of Asthma at Melton City Council children's services
- ensure that all necessary information for the effective management of children with Asthma enrolled at Melton City Council children's services is collected and recorded so that these children receive appropriate attention when required
- respond to the needs of children who have not been diagnosed with Asthma and who experience breathing difficulties (suspected Asthma Attack) at the service.

2. Scope

This procedure applies to services responsible for the direct education and care of children including offsite excursions and incursions. This Procedure applies to the Approved Provider, Nominated Supervisor, Person in day to day charge / Responsible Person's, staff, students on placement, volunteers, parents/guardians, children and others attending Melton City Council programs and activities.

Asthma Management should be viewed as a shared responsibility. While Melton City Council recognises its Duty of Care towards children with Asthma during their time at the service, the responsibility for ongoing Asthma Management rests with the child's family and medical practitioner.

3. Definitions

For terms that relate specifically to this procedure refer to the *Asthma Policy*. For commonly used terms e.g. Approved Provider, Regulatory Authority etc. refer to the *Glossary of Terms*.

4. Procedure

- 4.1. In terms of daily routines for allergens the educator will ensure that the child's exposure to the identified allergen is, if possible, prevented and at least minimised.
- 4.2. In terms of Asthma Care Plans
 - Once a child has been diagnosed with Asthma, prior to the child accessing care, the parent/guardian is to provide a current Asthma Care Plan (including a current photograph of the child), which is to be prepared and signed in consultation with a medical practitioner.
 - Educators are to follow the processes outlined in the Asthma Care Plan.

- The Asthma Care Plan, or a description of its location, is required to be displayed at the service.

4.3. In terms of Asthma Risk Minimisation Plans

Parents/guardians will be required to complete the Melton City Council Risk Minimisation Plan for each child in the service who has been diagnosed as at risk of Asthma. This plan is to be used in conjunction with the Asthma Care Plan.

- Prior to accessing the service, educators/staff are to develop a Risk Minimisation Plan in consultation with the parent/guardian, which includes the identified risks, identifies the child, their Asthma Care Plan and the location of their medication.
- Educators are to ensure that the child does not attend the service without the medication prescribed by the child's medical practitioner. In the event that the service needs to supply a child with a spacer, the parent/guardian will be responsible for a new replacement.

4.4. In terms of Communication Plan

- A Communication Plan is to be developed that ensures all relevant staff, educators and volunteers are informed about the *Dealing with Medical Conditions Policy*, Asthma Care Plan, Risk Minimisation Plan and how the parent/guardian can communicate any changes to the Asthma Care Plan and Risk Minimisation Plan for their child.
- All medication administered needs to be documented as per the *Administration of Medication Policy*.
- Provide access to the *Asthma Policy* to all parents/guardians and educators.
- At enrolment identify whether or not the child has been diagnosed at risk of Asthma.
- In consultation with the parent/guardian develop a Risk Minimisation Plan.
- Obtain an Asthma Care Plan from the parent/guardian that has been prepared and signed by the child's medical practitioner.
- Attach a current photograph of the child provided by the parent/guardian to the Asthma Care Plan.
- The staff member enrolling the child will identify the child at risk of Asthma to the appropriate educators.
- Provide a copy of the Risk Minimisation Plan, Communication Plan and Asthma Care Plan to the educators.
- All educators have access to the Asthma Care Plan.
- Educators will communicate the allergen triggers to all other families in care as required to ensure best practice within programs
- Educators will identify any child at risk of Asthma to any staff, students, volunteers or visiting early childhood professionals and communicate to them the location of the child's Asthma Care Plan and identify where the Asthma medication is.
- Parents/guardians and educators are required to communicate any changes with one another. The Asthma Care Plan and Risk Minimisation Plan need to be updated each time a change occurs, and a copy is to be provided to the educators of the service the child attends.

4.5. In terms of emergency procedures

- In the event of an Asthma Attack, educators will follow the Asthma Care Plan for that specific child. The educators must remain with child at all times until medical assistance arrives.

- When speaking with the emergency services stay calm, speak clearly, give exact details of location, inform the operator you believe it is Asthma and request a MICA Ambulance. Do not hang up until directed by the operator.
- Remove other children from area if possible.
- Have somebody waiting outside for the ambulance to direct them to the patient if practicable.
- Once medical attention has arrived and the Asthmatic attack has been confirmed by paramedics, contact parent/guardian and advise that the child has had an Asthma Attack and inform parent/guardian where the child is or which hospital child has been taken. If possible, allow paramedics to speak to parent.
- Inform parents/guardians of other children to explain an ambulance had been called to the program and offer parents/guardians a choice to collect children. Ensure confidentiality is maintained.
- Contact the coordinator or team leader as soon as practicable.
- The Coordinator or Team Leader needs to notify the Department of Education & Training (DET) as soon as practicable and no later than 24 hours after the emergency services has been called.

4.6. In terms of children self-administering medication

Please refer to *Administration of Medication Procedure*.

5. Responsibility/Accountability

5.1. The Approved Provider, according to Regulations is responsible for the implementation of the *Asthma Policy*. This will be achieved through the Leadership Group and their service staff:

- providing the Nominated Supervisor, Person in day to day charge, Responsible Person and all staff with access to the service's *Asthma Policy*, and ensuring that they are aware of Asthma First Aid upon employment at the service
- providing Approved Emergency Asthma Management (EAM) Training (refer to *Definitions*) to staff / educators as required under the National Regulations
- details of EAM (refer to *Definitions*) are included on the Staff /educator Record (refer to *Definitions*)
- providing parents/guardians with access to the service's *Asthma Policy* upon enrolment of their child (National Regulations 91)
- identifying children with Asthma during the enrolment process and informing staff /educators
- providing parents/guardians with an Asthma Care Plan to be completed in consultation with, and signed by, a medical practitioner
- developing a Risk Minimisation Plan for every child with Asthma, in consultation with parents/guardians
- developing a Communication Plan for every child with Asthma, in consultation with parents/guardians
- all children with Asthma have an Asthma Care Plan, Communication Plan and Risk Minimisation Plan filed with their enrolment record
- a Medication Record is kept for each child to whom medication is to be administered by the service (National Regulations 92)
- parents/guardians of all children with Asthma provide reliever medication and a Spacer Device including a child's face mask, if required, at all times their child is attending the service
- implementing an Asthma First Aid Procedure consistent with current national recommendations

- all staff are aware of the Asthma First Aid Procedure
- the expiry date of Reliever Medication is checked regularly and replaced when required, and that Spacer Devices and face masks are replaced after every use
- facilitating communication between management, educators, staff and parents/guardians regarding the service's *Asthma Policy* and strategies
- identifying and minimising Asthma Triggers (refer to *Definitions*) for children attending the service, where possible
- children with Asthma are not discriminated against in any way
- children with Asthma can participate in all activities safely and to their full potential
- immediately communicating any concerns with parents/guardians regarding the management of children with Asthma at the service
- displaying Asthma Australia's Asthma First Aid Poster (refer to *Sources*) at the service
- medication is administered in accordance with the *Administration of Medication Policy*
- when medication has been administered to a child in an Asthma Emergency without authorisation from the parent/guardian or authorised person, the parent/guardian of the child and emergency services are notified as soon as is practicable (National Regulations 94).

5.2. The Nominated Supervisor Person in day to day charge, Responsible Person is responsible for:

- ensuring that all First Aid qualifications, Anaphylaxis Management and EAM held by staff / educators are current and meet the requirements of the National Law (Section 169 (4)) and National Regulations 137 and are approved by Australian Children's Education and Care Quality Authority (ACECQA)
- ensuring that medication is administered in accordance with the *Administration of Medication Policy*
- ensuring that when medication has been administered to a child in an Asthma Emergency without authorisation from the parent/guardian or authorised person, the parent/guardian of the child and emergency services are notified as soon as is practicable (National Regulations 94)
- compiling a list of children with Asthma and placing it in a secure, but readily accessible, location known to educators. This should include the Asthma Care Plan for each child
- ensuring that induction procedures for casual and relief staff, students and volunteers, include information about children attending the service who have been diagnosed with Asthma, and the location of their medication and Asthma Care Plans
- ensuring programmed activities and experiences take into consideration the individual needs of all children, including any children with Asthma.

5.3. All educators / staff are responsible for:

- ensuring that they are aware of the service's *Asthma Policy* and Asthma First Aid Procedure
- ensuring that they can identify children displaying the symptoms of an Asthma Attack and locate the child's medication and Asthma Care Plans
- maintaining current EAM qualifications in line with regulations
- identifying and, where possible, minimising Asthma Triggers (refer to *Definitions*) as outlined in the child's Asthma Care Plan

- taking the Asthma First Aid Kit, children's personal Asthma medication and Asthma Care Plans on excursions or other offsite events
- administering prescribed Asthma medication in accordance with the child's Asthma Care Plan and the *Administration of Medication Policy* of the service
- developing a Risk Minimisation Plan for every child with Asthma in consultation with parents/guardians
- developing a Communication Plan for every child with Asthma, in consultation with parents/guardians
- discussing with parents/guardians the requirements for completing the enrolment form and Medication Record for their child
- consulting with the parents/guardians of children with Asthma in relation to the health and safety of their child, and the supervised management of the child's Asthma
- communicating any concerns to parents/guardians if a child's Asthma is limiting their ability to participate fully in all activities
- ensuring that children with Asthma are not discriminated against in any way
- ensuring that children with Asthma can participate in all activities safely and to their full potential.

5.4. Parents/guardians are responsible for:

- reading the service's *Asthma Policy*
- informing staff/educators, either on enrolment or on initial diagnosis, that their child has Asthma and prior to the child attending the program
- providing a copy of their child's Asthma Care Plan to the service and ensuring it has been prepared in consultation with, and signed by, a medical practitioner. The Asthma Care Plan should be reviewed and updated at least annually or as changes occur and prior to the child attending the program
- ensuring all details on their child's enrolment form and Medication Record (refer to *Definitions*) are completed prior to commencement at the service
- working with staff/educators to develop a Risk Minimisation Plan for their child and prior to the child attending the program
- working with staff/educators to develop a Communication Plan for their child and prior to the child attending the program
- providing an adequate supply of appropriate Asthma medication and equipment for their child at all times and prior to the child attending the program
- notifying staff/educators, in writing, of any changes to the information on the Asthma Care Plan, enrolment form or Medication Record
- communicating regularly with staff/educators in relation to the ongoing health and wellbeing of their child, and the management of their child's Asthma
- encouraging their child to learn about their Asthma, and to communicate with service staff/educators if they are unwell or experiencing Asthma symptoms.
- ensuring parents/guardians of all children with Asthma provide reliever medication and a Spacer Device including a child's face mask, if required, at all times their child is attending the service and prior to the child attending the program
- ensuring medication and equipment is replaced prior to expiry date

- 5.5. Volunteers and students, while at the service, are responsible for following the *Asthma Policy* and its procedures.

6. References, Sources, Links to Legislation and Other Documents

- 6.1. Please refer to Reference and Sources page.

<http://www.melton.vic.gov.au/Services/People/Children/Childrens-Services-policies-and-procedures/Sources-and-References>

- 6.2. Related service policies:

- *Administration of Medication Policy*
- *Administration of First Aid Policy*
- *Anaphylaxis Policy*
- *MCC Child Safe Policy, Procedure and Code of Conduct*
- *Dealing with Medical Conditions Policy*
- *Emergency and Evacuation Policy*
- *Excursions and Service Events Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and equity Policy*
- *Privacy and Confidentiality Policy*
- *Staffing Policy.*

7. Attachments

- Attachment 1 – Thunderstorm Asthma. Information for Patients, Consumers and Carers

[ASCIA_PCC_Thunderstorm_asthma_2019.pdf \(allergy.org.au\)](#)

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