




Policy Title:	Early Years Policy – Asthma
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Acting CEO Signature:	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">  </div> <div> Date: 6 October 2020 </div> </div>
Responsible Officer and Unit:	Coordinator Early Years Services, Early Years Unit
Review Period:	<input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other - 3 years
Last Review Date:	October 2020
Next Review Date:	September 2023
Purpose/Objective:	<p>This policy will outline the procedures to:</p> <ul style="list-style-type: none"> ensure educators, staff and parents/guardians are aware of their obligations and the best practice management of asthma at Macedon Ranges Shire Council's Early Years' Services ensure all necessary information for the effective management of children with asthma 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, yet experience breathing difficulties (suspected asthma attack) <p>This policy should be read in conjunction with the <i>Early Years Policy – Managing medical conditions</i>.</p> <p>Asthma management should be viewed as a shared responsibility. Whilst MRSC recognises its duty of care for children with asthma, the responsibility for ongoing asthma management rests with the child's family and medical practitioner.</p>
Background/Reasons for Policy:	<p>This policy was written in consultation with The Asthma Foundation of Victoria. The Foundation's <i>Asthma & the Child in Care Model policy</i> has been incorporated into this policy and procedure. For more detailed information, visit The Asthma Foundation of Victoria's website: WWW.ASTHMA.ORG.AU</p> <p>Asthma is a chronic, treatable health condition which affects approximately one in nine 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.</p> <p>Symptoms of asthma include wheezing, coughing (particularly at night), chest tightness and difficulty in breathing and shortness of breath with symptoms varying between children. It is generally accepted that children under six years</p>

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Initial Draft			
Second Draft	2	01/07/2020	A O'Sullivan
Final Draft	3	10/2020	J Laurent Goeman
Approval		10/2020	Executive Meeting

	<p>of age do not have the skills and ability to recognise and manage their own asthma without adult assistance. With this in mind, a Service must recognise the need to educate staff and parents/guardians about asthma and promote responsible asthma management strategies.</p> <p>Legislation which governs the operation of approved Early Years' Services is based on the health, safety and welfare of children, and requires that children are protected from hazards and harm. The Approved Provider will ensure that there is at least one educator on duty at all times who has current approved emergency asthma management training in accordance with the <i>Education and Care Services National Regulations 2011 (Regulation 136(c))</i>. As a demonstration of duty of care and best practice, all teachers and educators have current approved emergency asthma management training (refer to <i>Definitions</i>).</p>
<p>Definitions:</p>	<p>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.</p> <p>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.</p> <p>Asthma care 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 Care Plan template specifically for use in children's services can be downloaded from the <i>references</i> section of The Asthma Foundation of Victoria website: WWW.ASTHMA.ORG.AU</p> <p>Asthma emergency: the onset of unstable or deteriorating asthma symptoms requiring immediate treatment with reliever medication.</p> <p>Asthma first aid kit: kits should contain:</p> <ul style="list-style-type: none"> • 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 <p>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.</p> <p>Asthma triggers: things that may induce asthma symptoms, for example, pollens, colds/viruses, dust mites, smoke and exercise. Asthma triggers will vary from child to child.</p> <p>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 reasonable foreseeable risk of injury.</p> <p>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</p>

	<p>checking the medication, if required (<i>Regulation 92</i>). A sample medication record is available on the ACECQA website.</p> <p>Metered dose inhaler (puffer): a common device used to administer reliever medication.</p> <p>Puffer: the common name for a metered dose inhaler.</p> <p>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.</p> <p>Risk minimisation plan: provides information about child-specific asthma triggers and strategies to avoid these in the service. (refer Attachment 4) A risk minimisation plan template specifically for use in children’s services can be downloaded from the <i>References</i> section of The Asthma Foundation of Victoria website: WWW.ASTHMA.ORG.AU</p> <p>Spacer: 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.</p> <p>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 <i>Working with Children Check (Regulations 146–149)</i>. A sample staff record is available on the ACECQA website: WWW.ACECQA.GOV.AU</p>
References:	<p>Asthma Australia: WWW.ASTHMAAUSTRALIA.ORG.AU</p> <p>The Asthma Foundation of Victoria: WWW.ASTHMA.ORG.AU or phone (03) 9326 7088 or 1800 278 462 (toll free)</p> <p>Australian Children’s Education and Care Quality Authority (ACECQA): WWW.ACECQA.GOV.AU</p> <p><i>Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011</i>, ACECQA.</p>
Related Policies:	<p><i>Early Years Policy - Administration of medication</i></p> <p><i>Early Years Policy - Managing medical conditions</i></p> <p><i>Early Years Policy - Emergency and evacuation</i></p> <p><i>Early Years Policy - Excursions and Service events</i></p> <p><i>Early Years Policy - Incident, injury, trauma and illness</i></p> <p><i>Privacy Policy</i></p>
Related Legislation:	<p><i>Education and Care Services National Law Act 2010: Sections 167, 169, 174</i></p> <p><i>Education and Care Services National Regulations 2011: Regulations 90, 92, 93, 94, 95, 96, 136, 137</i></p> <p><i>Health Records Act 2001 (Vic)</i></p> <p><i>National Quality Standard, Quality Area 2: Children’s Health and Safety</i></p> <p>Standard 2.1: Each child’s health is promoted</p> <p>Element 2.1.1: Each child’s health needs are supported</p> <p>Standard 2.3: Each child is protected</p> <p>Element 2.3.3: Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented</p> <p><i>Privacy Act 1988 (Cth)</i></p> <p><i>Privacy and Data Protection Act 2014 (Vic)</i></p> <p><i>Public Health and Wellbeing Act 2008 (Vic)</i></p> <p><i>Public Health and Wellbeing Regulations 2009 (Vic)</i></p>

ASTHMA POLICY AND PROCEDURE

Mandatory – Quality Area 2

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, contractors, educators, staff, students on placement at kindergartens, volunteers, parents/guardians, children and others attending the programs and activities of Macedon Ranges Shire Council's Early Years Services.

RESPONSIBILITIES

The Approved Provider and Persons with Management or Control are responsible for:

- providing the Nominated Supervisor and all staff with a copy of the service's *Early Years Policy - Asthma*, and ensuring they are aware of asthma management strategies (refer to Attachment 1) upon employment
- providing approved Emergency Asthma Management (EAM) training (refer to *Definitions*) to staff as required under the National Regulations
- ensuring at least one staff member with current approved Emergency Asthma Management (EAM) training (refer to *Definitions*) is on duty at all times As best practice Council requires all Teachers/Educators to have Emergency Asthma Management (EAM) training
- ensuring details of approved Emergency Asthma Management (EAM) training (refer to *Definitions*) are included on the staff record (refer to *Definitions*)
- providing parents/guardians with a copy of the *Early Years Policy - Asthma* upon enrolment of their child if they have diagnosed asthma medical condition (*Regulation 91*)
- ensuring the Enrolment Officer identifies children with asthma during the enrolment process and informs the child's teacher
- providing parents/guardians with an Asthma Care Plan (refer to *Definitions and Attachment 2*) to be completed in consultation with, and signed by, a medical practitioner
- developing a Risk Minimisation Plan (refer to *Definitions and Attachment 4*) for every child with asthma, in consultation with parents/guardians
- ensuring all children with asthma have an Asthma Care Plan and Risk Minimisation Plan filed with their enrolment record
- ensuring a medication record is kept for each child to whom medication is to be administered by the Service (*Regulation 92*)
- ensuring parents/guardians of all children with asthma provide reliever medication and a spacer (including a child's face mask, if required) at all times
- implementing an asthma first aid procedure (refer to Attachment 1) consistent with current national recommendations
- ensuring all staff are aware of the asthma first aid procedure
- ensuring adequate provision and maintenance of asthma first aid kits (refer to *Definitions*)
- ensuring the expiry date of reliever medication is checked regularly and replaced when required, and that spacers and face masks are replaced after every use
- facilitating communication between management, educators, staff and parents/guardians regarding the service's *Early Years Policy - Asthma* and strategies
- identifying and minimising asthma triggers (refer to *Definitions*) for children attending the Service, where possible
- ensuring children with asthma are not discriminated against in any way and are encouraged to participate in all activities safely and to their full potential

- immediately communicating any concerns with parents/guardians regarding the management of children with asthma
- ensuring the Service meets the requirements to be recognised as an Asthma Friendly Children's Service (refer to *Definitions*) with The Asthma Foundation of Victoria
- displaying Asthma Australia's *Asthma First Aid* poster (refer to *References* and Attachment 3) in key locations at the Service
- ensuring that medication is administered in accordance with the *Early Years Policy - Administration of medication*
- ensuring when medication has been administered to a child in an asthma emergency without authorisation from the parent/guardian or authorised nominee, the parent/guardian of the child and emergency services are notified as soon as is practicable (*Regulation 94*)
- ensuring all educators' approved first aid qualifications, anaphylaxis management training and Emergency Asthma Management (EAM) training are current, meet the requirements of the National Law (Section 169(4)) and National Regulations (Regulation 137), and are approved by ACECQA
- following appropriate reporting procedures set out in the *Early Years Policy - Incident, injury, trauma and illness* in the event that a child is ill, or is involved in a medical emergency or an incident at the Service which results in injury or trauma

The Nominated Supervisor is responsible for:

- ensuring the medication is administered in accordance with the *Early Years Policy - Administration of medication*
- compiling a list of children with asthma and an Asthma Care Plan, placing it in a secure, yet readily accessible, location known to all staff
- ensuring induction procedures for all staff include information about children attending the Service who have been diagnosed with asthma, and the location of their medication and action plans
- organising asthma management information sessions for parents/guardians of children enrolled, where required
- ensuring programmed activities and experiences take into consideration the individual needs of all children, including any children with asthma

All staff are responsible for:

- ensuring when medication has been administered to a child in an asthma emergency without authorisation from the parent/guardian or authorised nominee, the parent/guardian of the child and emergency services are notified as soon as is practicable (*Regulation 94*)
- ensuring they are aware of the *Early Years Policy - Asthma* and asthma first aid procedure (refer to Attachment 1)
- ensuring they can identify children displaying the symptoms of an asthma attack and locate their personal medication, Asthma Care Plans and the asthma first aid kit
- maintaining current approved Emergency Asthma Management (EAM) (refer to *Definitions*) qualifications
- 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 *Early Years Policy - Administration of medication*

- developing a Risk Minimisation Plan (refer to *Definitions* and Attachment 4) 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 his/her ability to participate fully in all activities
- ensuring children with asthma are not discriminated against in any way and can participate in all activities safely and to their full potential

Parents/guardians are responsible for:

- reading the *Early Years Policy - Asthma*
- informing staff, either on enrolment or on initial diagnosis, that their child has asthma
- providing a colour copy of their child's Asthma Care Plan to the Service, ensuring it has been prepared in consultation with, and signed by, a medical practitioner at least annually
- ensuring all details on their child's enrolment form and medication record (refer to *Definitions*) are complete prior to commencement
- working with staff to develop a Risk Minimisation Plan (refer to *Definitions* and Attachment 4) for their child
- providing adequate supply of appropriate asthma medication and equipment for their child at all times and ensuring it is appropriately labelled with the child's name
- notifying staff, in writing, of any changes to the information on the Asthma Care Plan, enrolment form or medication record
- communicating regularly with educators/staff 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 if they are unwell or experiencing asthma symptoms

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback regarding this policy and its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the Service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures

ATTACHMENTS

Attachment 1: Asthma First Aid Procedure

Attachment 2: Asthma Care Plan – download from the Asthma Australia website:

[HTTPS://ASTHMA.ORG.AU/WP-](https://asthma.org.au/wp-)

[CONTENT/UPLOADS/ABOUT_ASTHMA/SCHOOLS/AACPED2018-CARE-PLAN-FOR-SCHOOLS-A4_2019.PDF](#)

Attachment 3: Asthma First Aid poster – download from the Asthma Australia website:
<HTTPS://ASTHMA.ORG.AU/ABOUT-ASTHMA/HOW-WE-CAN-HELP/FIRST-AID/>

Attachment 4 Asthma Risk Minimisation Plan – download from the ELAA website:
<HTTPS://ELAA.ORG.AU/WP-CONTENT/UPLOADS/2020/02/ASTHMA-RISK-MINIMISATION-PLAN.PDF>

ATTACHMENT 1

Asthma First Aid Procedure

This Asthma First Aid Procedure has been reproduced from The Asthma Foundation of Victoria's *Asthma & the Child in Care Model Policy*, Version 2, March 2014.

Follow the written first aid instructions on the child's Asthma Care Plan, if available and signed by a medical practitioner. If no specific and signed instructions are available, the instructions are unclear, or the child does not have an Asthma Care Plan, **begin the first aid procedure outlined** below.

Reliever medication is safe to administer to children, even if they do not have asthma, however if there is no Asthma Care Plan you must also **call emergency assistance to attend (000)** and notify the parent/carer of the child as soon as possible.

Call emergency assistance immediately (Dial 000)

- If the person is not breathing
- If the person's asthma suddenly becomes worse, or is not improving
- If the person is having an asthma attack and a blue reliever puffer is not available
- If you are not sure it is asthma.
- If the person is known to have anaphylaxis – follow their Anaphylaxis Action Plan, then give Asthma First Aid

Step 1. Sit the person upright

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

(Send someone else to get the asthma first aid kit)

(Sitting the child in an upright position will make it easier for them to breathe).

Step 2. Give 4 separate puffs of blue reliever puffer medication

- Use a spacer if there is one
- Shake the puffer
- Put 1 puff into the spacer
- Take 4 breaths from spacer
- Repeat until 4 puffs have been taken.

Remember: Shake, 1 puff, 4 breaths

(This medication is safe to administer and may be lifesaving).

Step 3. Wait 4 minutes

If there is no improvement, give 4 more separate puffs as above.

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

- Say ambulance and that someone is having an asthma attack
- Keep giving 4 puffs every 4 minutes until emergency assistance arrives.

ATTACHMENT 2

Sample Asthma Care Plan

Please click on hyperlink [HTTPS://ASTHMA.ORG.AU/WP-CONTENT/UPLOADS/ABOUT ASTHMA/SCHOOLS/AACPED2018-CARE-PLAN-FOR-SCHOOLS-A4_2019.PDF](https://asthma.org.au/wp-content/uploads/about_asthma/schools/aacped2018-care-plan-for-schools-a4_2019.pdf)

ATTACHMENT 3

Asthma First Aid Poster

Please click on hyperlink [HTTPS://ASTHMA.ORG.AU/ABOUT-ASTHMA/HOW-WE-CAN-HELP/FIRST-AID/](https://asthma.org.au/about-asthma/how-we-can-help/first-aid/)

ATTACHMENT 4

Asthma Risk Minimisation Plan

Please click on hyperlink [HTTPS://ELAA.ORG.AU/WP-CONTENT/UPLOADS/2020/02/ASTHMA-RISK-MINIMISATION-PLAN.PDF](https://elaa.org.au/wp-content/uploads/2020/02/asthma-risk-minimisation-plan.pdf)