

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. 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. 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 and young people 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

- ENOSHCP Policy A-4: Enrolment
- ENOSHCP Policy A-10: Acceptance and Refusal of Authorisations
- ENOSHCP Policy C-3: Staff Orientation and Induction
- ENOSHCP Policy C-9: Relief Staff

- ENOSHCP Policy C-10: Volunteers/Students/Visitors
- ENOSHCP Policy D-1: Dealing with Medical Conditions
- ENOSHCP Policy D-2: Hygiene
- ENOSHCP Policy D-10: First Aid
- ENOSHCP Policy D-15: Allergies
- ENOSHCP 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 staff will be required to undergo 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 on the enrolment form.

Parents are reminded of this requirement through the Family Handbook.

Parents will be required to provide a copy of the asthma action plan, as authorised by a medical practitioner (Regulation 90). Permission will be required from parents to have the action plan displayed in a location visible to staff responsible for the child.

Any medication required such as inhalers and spacers must be supplied by the parents in a hard plastic box, clearly marked with the child's name and any additional relevant information must be kept with the medication at all times.

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.

All medication must be stored in an area easily accessible to staff (not locked away) but inaccessible to children and away from any direct heat source.

When off school grounds, any asthma medication must be carried and administered only by staff adequately trained in asthma management.

All staff, including relief staff and volunteers, will be informed of the current enrolled children who have been diagnosed as being asthmatic upon employment. 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 attack occurring where a child has not received an asthma diagnosis and has no prior history of asthma, staff will:

- Sit the child upright and reassure them. Child must not be left alone.
- Shake the puffer
- Administer 4 separate 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.
- Wait 4 minutes
- Have another staff member contact parent or guardian
- If there is little or no improvement repeat the above steps
- If there is still little or no improvement, contact ambulance services “000”
- Continue the above steps until medical services arrive

Medication may be administered to a child without an authorisation in case of an asthma emergency (Regulation 94). If medication is administered under this regulation, the approved provider or nominated supervisor of the education and care service must ensure that the following are notified as soon as practicable:

- a parent of the child
- emergency services

Staff 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 staff member who has been diagnosed as being asthmatic by a medical practitioner must advise the Centre Coordinator. This will be recorded on their emergency details form and any additional information recorded on file.

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)
- Asthma Australia - <http://asthma.org.au/>

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