

ASTHMA MANAGEMENT POLICY

Robina Outside School Hours Care strives to provide a safe and suitable environment for all children attending the service. Children diagnosed with asthma who attend the service will be supported with the management of this medical condition and endeavors will be undertaken to create an asthma friendly environment in accordance with the recommendations of the Asthma Foundation of Queensland.

NATIONAL QUALITY STANDARD (NQS)

QUALI	QUALITY AREA 2: CHILDRENS HEALTH AND SAFETY				
2.2	Safety	Each child is protected.			
2.1.2	· ·	Effective Illness and injury management and hygiene practices are promoted and implemented.			
2.2.2	amargancy	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.			

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS		
90	Medical conditions policy	
91	Medical conditions policy to be provided to parents	

OTHER RELEVANT PROVISIONS
Health (Drugs and Poisons) Regulation 1996
Duty of Care
Work Health and Safety Act 2011

RELATED POLICIES

POLICIES
General Health and Safety Policy
Preventative Health and Wellbeing Policy
Medication Policy
Emergency Health and Medical Procedure Management Policy
Enrolment Policy

PROCEDURE

The service will ensure that at least one educator with a current first-aid and CPR qualification, anaphylaxis management and emergency asthma management training as required by the



Education and Care Services National Regulations 2011, is in attendance at any place children are being cared for, and immediately available in an emergency, at all times that children are being cared for by the service.

The service shall provide opportunities for all staff to participate in and receive regular approved education on asthma and appropriate management strategies as identified on the ACECQA website.

All children diagnosed with asthma must have a medical management plan outlining what to do in an emergency and developed in consultation with families, educators and the child's medical practitioner. Each plan shall be displayed in a clearly accessible area with approval from the child's family/guardian.

A risk minimisation plan must be developed in consultation with the parent/guardian of a child diagnosed with asthma to identify the triggers and how these will be managed and monitored within the service.

The service will ensure all families of children identified with asthma, and the educators at the service, receive a copy of the Medical Conditions Policy and Asthma Policy as part of their orientation/induction to the service.

Educators are made aware of the individual children who suffer from asthma, and are provided with training to recognise the relevant triggers, and to follow the risk minimisation strategies and specific management plans to manage the condition.

The service will display a poster for asthma first aid management in prominent locations to alert educators and other participants in the service's activities.

If the procedure outlined in the child's medical management plan does not alleviate the asthma symptoms, or the child does not have a medical conditions management plan, an educator will provide first aid following the steps outlined by Asthma Australia as follows:

- Sit the child upright. The educator will stay with the child and be calm and reassuring;
- Give four (4) puffs of blue reliever medication with slow and deep breathing in after each



puff. If using a spacer, follow each of 4 puffs with 4 breaths in and out following each puff;

- Wait four (4) minutes. If there is no improvement, give four (4) more puffs as above;
- If there is still no improvement, call emergency services; and
- Keep giving four (4) puffs every four (4) minutes until the emergency service arrive.

In the event of the above emergency event the parent of the child is to be contacted and informed.

The service will ensure that an emergency asthma first aid kit is stored in a location that is known to all educators, easily accessible to adults but inaccessible to children. The emergency asthma first aid kit should contain:

- An emergency supply of blue reliever puffer; and
- A spacer device that is compatible with the puffer.

Expiry dates of all puffers used will be closely monitored and replaced when expired.

Puffers and spacers from the emergency asthma first aid kit must be thoroughly cleaned after each use to prevent cross contamination.

All asthma medication provided by families and administered by educators and/or self-administered by the child with the condition, must be in accordance with the Medication Policy (see Policy 4.6) of this service.

Risk minimisation practices will be carried out to ensure that the service is, to the best of our ability, providing an environment that will not trigger an asthmatic attack. These practices will be documented, discussed at team meetings and potential risks reduced where possible.

References

Victoria, A. F. (n.d.). *Asthma and the Child in Care Model Policy*. Retrieved from Asthma foundation: http://www.asthma.org.au/Portals/0/doc/Resources/2013%20Child%20in%20Care%20Model%20 Policy%20%28Version%202%29.pdf



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