

D-16 Asthma

Epping Heights OSHC.

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 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.

RELATED POLICIES

- Epping Heights OSHC Policy A-4: Enrolment
- Epping Heights OSHC Policy A-10: Acceptance and Refusal of Authorisations
- Epping Heights OSHC Policy C-3: Staff Orientation and Induction

- Epping Heights OSHC Policy C-9: Relief Staff
- Epping Heights OSHC Policy C-10: Volunteers/Students/Visitors
- Epping Heights OSHC Policy D-1: Dealing with Medical Conditions
- Epping Heights OSHC Policy D-2: Hygiene
- Epping Heights OSHC Policy D-10: First Aid
- Epping Heights OSHC Policy D-15: Allergies
- Epping Heights OSHC Policy D-20: Medication

PROCEDURE

The Centre will ensure that 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 as being asthmatic, by a medical practitioner, at the time of enrolment. This information is recorded on the enrolment form. Parents are reminded of this requirement through the Family Handbook and the Information Brochure.

Parents will be required to provide a copy of the asthma action plan, as authorised by the medical practitioner.

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

An additional reliever inhaler and spacer will be kept in the First Aid Kit at all times and staff will be responsible for its replacement 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 but inaccessible to children and away from any direct heat source.

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

All staff are required to notify the Centre Coordinator if they have been diagnosed as being asthmatic by a medical practitioner. This will be recorded in their emergency details form and any additional information recorded on file.

All staff are informed of the current enrolments who have been diagnosed as being asthmatic, on an ongoing basis.

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.

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.

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

In the event of an asthma emergency, medication may be administered without parental authorisation if:(Regulation 94)

The parent and emergency contacts cannot be contacted.

The parent is notified as soon as is practicable or;

Emergency services is notified as soon as is practicable

Staff must ensure that all asthma medication administered is recorded in a medication record (see Medication policy)

All relief staff will be informed of all children who have been diagnosed as being asthmatic or who have a history of asthma, on initial employment.

Parents/guardians of child who has been diagnosed as being asthmatic must be provided with a copy of the ‘Asthma’ policy.

If relevant, policies and practices in relation to specific needs of individual children will be developed and implemented.

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)

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