



Asthma

POLICY:

Asthma is a chronic health condition affecting approximately 15% of children. Community education and correct Asthma management will assist to minimise the impact of Asthma. It is generally accepted that children under the age of six do not have the skills and ability to recognise and manage their own Asthma effectively. With this in mind, Stepping Stones Child Care Centre recognises the need to educate its staff and parents/carers about Asthma and to promote responsible Asthma management strategies.

AIM:

This Asthma Policy aims to:

- Raise the awareness of Asthma amongst those involved within Stepping Stones Child Care Centre.
- Provide the necessary strategies to ensure the health and safety of all persons with Asthma involved with Stepping Stones Child Care Centre.
- Provide an environment in which children with Asthma can participate in all activities to their full capacity.
- Provide a clear set of guidelines and expectations to be followed with regard to the management of Asthma.

PROCEDURE:

Management will:

- Provide staff with copies of the Asthma Policy.
- Provide parents with a copy of the Asthma Policy upon enrolment.
- Request families to identify children with Asthma on the Centre's Enrolment Form during the enrolment process.
- Request an Asthma Action Plan from the child's Doctor upon enrolment. The Asthma Action Plan is to be returned within 7 days. The Asthma Plan is to be received every 6 months by the child's doctor.
- Record a copy of any Asthma Action Plans with the child's enrolment records.
- Display copies of the Asthma Action Plan in each classroom and the staff room, to ensure staff are informed of the children with Asthma in their care.
- Inform parents of their requirement to provide the Centre with a clearly labelled blue reliever puffer (e.g. Airomir, Asmol, Epaq or Ventolin) and a clearly labelled spacer device.
- Encourage open communication between parents/guardians and staff regarding the status and impact of a child's Asthma.
- Promptly communicate any concerns to parents should it be considered that a child's Asthma is limiting his/her ability to participate fully in all activities.
- Provide opportunities for staff and parents to attend Asthma Training, as available.

Staff will:

- Ensure that they are aware of the children in their care with Asthma.
- Ensure in consultation with the parent/guardian, the health and safety of each child through supervised management of the child's Asthma.
- Identify and where practicable, minimise Asthma triggers.

- Where necessary, modify activities in accordance with a child's needs and abilities.
- Only administer prescribed Asthma medication in accordance with the information on the child's Asthma Action Plan and the Centre's Medication Policy.
- Promptly communicate, to Management or parents/guardians, any concerns should it be considered that a child's Asthma is limiting his/her ability to participate fully in all activities.
- Ensure that children with Asthma are treated the same as other children.
- Ensure Asthma medication is taken on excursions and to events away from the children's service and to the dining room during meal times.
- Ensure children's Asthma medication is accessible at all times.
- Ensure parents/guardians complete the Centre's "Medication Form" for scheduled administration of Asthma Medication.
- Asthma Medication is to be administered as stated on the "Medication Form" completed by parents on relevant days, as detailed in the Centre's Medication Policy.
- Notify a child's parents and the Centre Director if a child has had a suspected Asthma attack.

Parents/Guardians will:

- Inform staff, either upon enrolment or on initial diagnosis, that their child has a history of Asthma.
- Provide all relevant information regarding the child's Asthma via an Asthma Action Plan, completed by the Doctor within 7 days of enrolment or diagnosis. The Asthma Plan is to be received every 6 months by the child's doctor.
- Notify the staff, in writing, of any changes to the Asthma Action Plan.
- Ensure that their child has an adequate supply of appropriate Asthma medication (including reliever) at all times.
- Ensure that they provide the Centre with a clearly labelled blue reliever puffer (e.g. Airomir, Asmol, Epaq or Ventolin) and a clearly labelled spacer device including the child's full name.
- Store their child's reliever puffer and spacer device in the specified "Emergency Medication" Bag located in the classroom.
- Communicate all relevant information and concerns to staff as the need arises e.g. if Asthma symptoms were present last night.
- Ensure in consultation with the staff, the health and safety of their child through supervised management of the child's Asthma.
- Complete the Centre's "Medication Form" for scheduled administration of Asthma Medication.

Wherever practical, children will be encouraged to seek their reliever medication as soon as their symptoms develop.

Cleaning of puffers and spacers:

Puffers and spacers must be cleaned weekly to prevent blockages from the build-up of medication and must be thoroughly cleaned after each use to prevent cross infection. This is to be recorded on the Puffer and Spacers Cleaning Record Form, located in the "Emergency Medication" bag in each classroom. During this process, Expiry dates on puffers are to be checked and recorded on the Puffer and Spacers Cleaning Record Form. Once completed this record form, must be returned to the office, and commence using a new form.

Puffers are to be cleaned using the following steps:

1. Wash your hands and wear gloves.
2. Remove metal canister. Do not wash canister.
3. Wash the plastic casing only. Rinse the mouthpiece through the top and bottom under warm running water for at least 30 seconds. Wash mouthpiece cover.
4. Allow to air dry on a clean piece of paper towel.
5. Re-assemble, discard of paper towel in bin.
6. Test the puffer to make sure there isn't any water remaining in it.
7. Return to Emergency Medication Bag.

Spacers are to be cleaned using the following steps:

1. Wash your hands and wear gloves
2. Wash in warm soapy water.
3. Do not rinse
4. Allow to air dry. Do not wipe

If any device is contaminated by blood, dispose of it safely and replace the device.

EMERGENCY PROCEDURE:

If a child or staff member develops signs of what appears to be an Asthma attack, appropriate care must be given immediately. Regardless of whether the attack is mild, moderate or severe, treatment should commence immediately as delay may increase the severity of the attack and ultimately put the person's life at risk.

- If the child has written instructions of their Asthma Action Plan, follow these steps immediately.
- A problem that may be encountered is when a child suddenly collapses, or appears to have difficult breathing and is not known to have pre-existing Asthma or other health problems.

In this situation staff should:

- Call an ambulance immediately (dial 000) and state that the child is having breathing difficulty.
- The child's parent/guardian should be contacted at the same time as the ambulance.

Related documents:

- Medication Policy
- Children's Accident Policy
- Excursion
- Puffer and Spacer Cleaning Record form
- Infectious Diseases and Sick Children

Source:

- The Asthma Foundation of ACT www.asthmaact.org.au or 6286 4414.
- The Asthma Foundation of Victoria www.asthma.org.au
- Asthma in Under 5's – Information for Parents and Carers of Young Children with Asthma.
- Succeed Consultancy www.succeddconsultancy.com.au

This policy links to the following CCQA Principles:

Quality Practices Guide (2005) - Principle 5.3

Developed 19th August 2008, Reviewed 21st April 2009 to be reviewed: April 2010.



Puffer and Spacer Cleaning Record Form

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| Date | Puffers & Spacers Cleaned. Please tick | Children's Name | Puffer Expiry Dates | Staff Signature |
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