

We aim to create and maintain a safe and healthy environment for all children enrolled at the Family Day Care Service where all children with asthma can fully participate. Asthma is a chronic health condition, which is one of the most common reasons for childhood admission to hospital. Children under the age of six usually do not have the skills or ability to recognise and manage their own asthma effectively.

SCOPE

This policy applies to children, families, coordinators, staff, educators, educator assistants, families and visitors of Clarence Family Day Care.

IMPLEMENTATION

It is important that communication is open between families and educators to ensure appropriate asthma management. It is imperative that all FDC educators and volunteers at the Family Day Care Service follow a child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy or medical condition.

Children diagnosed with asthma should be not enrolled until the child's Medical Management Plan, including Risk Management Plan and Communication Plan and Asthma Action Plan is completed by their parent/guardian.

A Medical Management Plan, Risk Minimisation and Communication Plan must be developed by parents/guardians with educators to ensure risks are minimised and strategies developed for minimising any risk to the child.

It is imperative that all educators/educator assistants follow a child's Medical Management Plan in the event of an incident related to a child's specific health care need, allergy or medical condition.

The Nominated Supervisor/Coordinator will ensure that:

- parents/guardians have access to policies and procedures
- all educators and educator assistants, including volunteers, have access to policies and procedures
- all FDC educators/educator assistants have completed first aid training including asthma and anaphylaxis, approved by the Education and Care Services National Regulations at least every 3 years and that this is recorded, with a copy of each staff members' certificate held on the FDC Service's premises
- applications for additional funding opportunities are made if required to support the child and FDC educators.

FDC Educators will ensure:

- they are aware of the Family Day Care Services Asthma Policy and asthma first aid procedure (ensuring that they can identify children displaying the symptoms of an asthma attack and locate their personal medication, and Asthma Action Plans).
- to maintain current approved Asthma Management qualifications
- they are able to identify and, where possible, minimise asthma triggers as outlined in the child's Asthma Action Plan.
- that the children's personal asthma medication and Asthma Action Plans are taken on excursions or other offsite events, including emergency evacuations and drills
- to administer prescribed asthma medication in accordance with the child's Asthma Action Plan and the Service's Administration of Medication Policy.
- to discuss with parents/guardians the requirements for completing the enrolment form and medication record for their child
- to consult 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
- communicate any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities
- any asthma attacks are documented, advising parents as a matter of priority, when practicable.

Families will:

- read the Service's Asthma Management Policy
- inform staff, either on enrolment or on initial diagnosis, that their child has asthma

- provide a copy of their child's Asthma Action Plan to the Service ensuring it has been prepared in consultation with, and signed by, a medical practitioner
- have the Asthma Action Plan reviewed and updated at least annually or whenever medication or management changes
- review and update the Medical Action Plan, including Risk Management Plan and Communication Plan, at least annually or whenever medication or management changes
- ensure all details on their child's enrolment form and medication record are completed prior to commencement at the Family Day Care Service
- provide an adequate supply of appropriate asthma medication and equipment for their child at all times
- notify FDC Educator and staff at the FDC Service in writing, of any changes to the information on the Asthma Action Plan, enrolment form or medication record
- communicate regularly with their FDC educator in relation to the ongoing health and wellbeing of their child, and the management of their child's asthma
- encourage their child to learn about their asthma, and to communicate with Service staff if they are unwell or experiencing asthma symptoms.

If a child suffers from an asthma emergency the FDC educator will:

- Follow the child's asthma medical management/action plan
- If the child does not respond to steps within the Asthma medical management/action plan call an ambulance immediately by dialling 000
- Continue first aid measures
- Contact the parent/guardian when practicable
- Contact the emergency contact if the parents or guardian can't be contacted when practicable
- Notify the regulatory authority within 24 hours

Reporting Procedures

Any incident involving serious illness of a child while the child is being educated and cared for by the FDC Service for which the child attended, or ought reasonably to have attended a hospital e.g., severe asthma attack is considered a serious incident (Regulation 12).

- FDC educator/s involved in the incident are to complete an *Incident, Injury, Trauma and Illness Record* which will be countersigned by the Nominated Supervisor/Coordinator of the FDC Service
- ensure the parent or guardian signs the *Incident, Injury, Trauma and Illness Record*
- place a copy of the record in the child's file
- the FDC educator will inform the Nominated Supervisor of the incident
- the Nominated Supervisor or the Approved Provider will inform Regulatory Authority of the incident within 24 hours through the [NQA IT System](#) (as per regulations)
- the FDC educator will be debriefed after each serious incident and the child's individual medical management plan/action plan and risk minimisation plan evaluated, including a discussion of the effectiveness of the procedure used
- discussions about exposure to the allergen/trigger and the strategies that need to be implemented and maintained to prevent further exposure.

Minimisation Plan for a child with diagnosed asthma

The Coordinator and FDC educator together with the parents/guardians of a child with asthma, will discuss and agree on a risk minimisation plan for the emergency management of an asthma attack based on the child's asthma medical management/action plan. This plan will be included as part of, or attached to, the child's asthma medical management/action plan and enrolment record.

The plan will assess and minimise risks relating to the child's diagnosed health care need including any known allergens. Strategies for minimising the risk are developed and implemented.

The risk minimisation plan is to be updated whenever the child's medical management plan is changed or updated.

Common asthma triggers include:

- viral infections- such as colds, flu and respiratory conditions

- cigarette smoke
- physical exercise
- allergens- mould, pollens, pets
- irritants in the environment- dust, pollution, wood/bush fire smoke
- weather- changes in air temperature or thunderstorms
- chemicals and strong smells- perfumes, cleaning products
- stress or high emotions (including laughter or crying)

Betterhealth.vic.gov

Communication Plan

A communication plan is to be created in accordance with our *Medical Conditions Policy*. It will detail the negotiated and documented manner to communicate any changes to the child’s medical management plan and risk management plan for the child with relevant staff, educators, and volunteers.

Any changes to a child’s medical management plan and risk minimisation plans will be documented in the communication plan.

NATIONAL QUALITY FRAMEWORK

National ECEC Regulations

85 – Incident, injury, trauma and illness policy	86 – Notification to parent of incident, injury, trauma and illness
87 – Incident, injury, trauma and illness record	90 – Medical Conditions Policy
91 – Medical conditions policy to be provided to parents	92 – Medication record
93 – Administration of medication	94 – Exception to authorisation requirement— anaphylaxis or asthma emergency
95 – Procedure for administration of medication	96 – Self-administration of medication
136 – First Aid qualifications	170 – Policies and procedures are to be followed

National Quality Standards

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.1	Health	Each child’s health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child’s wellbeing and comfort is provided for, including appropriate opportunities to meet each child’s needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

REFERENCE & RELATED INFORMATION

- Australian society of clinical immunology and allergy. ASCIA. <https://www.allergy.org.au/hp/ascia-plans-action-and-treatment>
- Federal Register of Legislation Privacy Act 1988.
- National Health and Medical Research Council. Staying healthy: Preventing infectious diseases in early childhood education and care services.
- Australian Children’s Education & Care Quality Authority (ACECQA). 20201. Policy and Procedure Guidelines. Dealing with Medicals in Children Policy Guidelines.
- Clarence FDC Policies including:
 - Administration of First Aid Policy
 - Administration of Medication Policy
 - Anaphylaxis Management Policy

- Medical Conditions Policy
- Diabetes Management Policy
- Epilepsy Management Policy
- Incident, Illness, Accident and Trauma Policy
- Privacy & Confidentiality Policy

RESOURCES

[Asthma First Aid A4 Poster](#)

[Asthma Action Plan](#)

[Asthma in under 5s](#)

[KIDS FIRST AID FOR ASTHMA CHART](#)

[Supporting the Continuity of Asthma Care \(for patients with severe asthma during Coronavirus \(COVID-19\) pandemic\)](#)