

## Medical Conditions – Asthma Management

### Introduction

The BOOSH Centre will ensure that families and The BOOSH Centre staff will work together to ensure an 'asthma aware' environment for the children. It is therefore important that The BOOSH Centre takes responsibility for ensuring that appropriate asthma management strategies are implemented within the environment. This includes supporting staff in their duty of care to ensure that they have the current skills and knowledge to manage asthma effectively within the service, minimise its impact, and promote best practice asthma management strategies to parents.

### Objectives

The BOOSH Centre will ensure that a safe environment exists for all children, where potential allergens and high-risk situations will be identified and a risk minimisation plan will be created in consultation with the parents. The risk minimisation plan will detail the risk minimisation and prevention strategies that will be put in place to minimise the risk of exposure to known and notified allergens. It will outline alternatives to high risk situations while the child is under the care of The BOOSH Centre.

The risk minimisation plan will contain a communication plan, which includes strategies for advising educators, students and parents about how to respond to asthma symptoms. It will also include procedures to inform volunteers and educators of children with asthma, the potential for asthma symptoms to occur and their role in responding to a child in their care suffering from asthma symptoms.

Educators will recognise signs of an asthma attack in children who may be experiencing their first asthma attack or who are having difficulty breathing. Educators will be confident in responding to children diagnosed with asthma during an asthma attack. Children who have been diagnosed with asthma by a general practitioner or specialist, as notified to The BOOSH Centre by the parents, will receive appropriate care and management of their asthma symptoms.

### Service Implementation

- Educators who are responsible for administering asthma medication and/or asthma first aid to a child attending the service will be required to have appropriate accredited training, which is updated at regular intervals, usually every 3 years.
- A minimum of one educator who has completed an ACECQA approved accredited qualification is to be on duty at all times.
- Educators and management will work collaboratively to promote an asthma aware environment.

- The Director will facilitate opportunities for new and casual staff to receive feedback regarding important procedures in place for managing asthma within The BOOSH Centre environment, in particular the implementation of Nationally Recognised Asthma First Aid.
- Educators, including those who are new or casual, will be made familiar with the Asthma Management policy.
- Following notification of a child with a diagnosis of asthma, or previously treated with asthma medications, the Nominated Supervisor will ensure that families complete and return the necessary documentation:
  - The BOOSH Centre Enrolment Form which includes an authorisation for the Administration of Medication and Medical Procedures
  - The child's individual asthma management/medical management plan in accordance with the service's Medical Conditions Policy and Administration of Medical requirements.
- Educators will ensure that the child's asthma medication is in its original container, clearly labelled with the name of the child and expiry date of the medication along with a copy of the Children's Service Asthma First Aid Record or the individual asthma management plan.
- Disposable spacer devices will be provided by The BOOSH Centre
- A list of children with a diagnosis of asthma, together with copies of the child's asthma first aid documentation, will be compiled and be easily accessible by staff.
- Educators will be aware of those children with asthma and encourage those permitted to self-administer to carry their reliever medication and delivery device with them at all times. Educators must know where to access reliever medication and delivery device if immediate access is required.
- A record of asthma first aid treatment/medication given will be maintained via the service Medication Record and parents/guardians will be notified through the Kiosk message system if treatment has been provided and will be requested to sign acknowledgment on pick-up or as soon as practicable. In serious situations parents/guardians will be immediately contacted by phone.
- Asthma first aid kits along with children's medication and treatment plans will be carried on all off site excursions.
- Nationally recognised asthma first aid plans will be displayed in prominent locations around The BOOSH Centre.
- Educators will identify, and where practical, minimise exposure to asthma triggers.
- All Parents/guardians completing the enrolment form for a child to attend The BOOSH Centre must agree the *Education and Care Services Regulation 94- Exception to authorisation requirement – anaphylaxis or asthma emergency* which states that medication may be administered to a child without an authorisation in case of an anaphylaxis or asthma emergency.

## Excursions

- When children leave the service, all children are allocated to an Excursion group. The Educator that is the leader for that group must ensure the following steps are followed for any child in their group that has an Asthma diagnosis:
  - Identify the children with an Asthma diagnosis
  - Collect and sign for the child's Asthma action plan and medication
  - Carry the Asthma action plan and medication in their bag
  - Upon return to the service return the Asthma action plan and medication and sign that this has been completed

## Parents and carers responsibilities

Parents/Guardians must:

- Inform the centre in writing, on enrolment or on initial diagnosis, if their child has a history/diagnosis of asthma.
- Provide all relevant information regarding their child's asthma management through completion of The BOOSH Centre enrolment form (including permission for self-administration) or their child's individual asthma management /medical management plan.
- Notify the service of any changes to their child's asthma management and update this information on their child's relevant service documents.
- Provide the service with an adequate supply of the child's appropriate medication (reliever) in original container clearly labelled with the child's name and medication expiry date.
- Ensure that they replace their child's reliever medication prior to the expiry date.
- Notify the service of known asthma triggers including minimisation strategies.
- Notify the service if their child also has identified allergies or is at risk of having a severe allergic reaction (anaphylaxis)

## Asthma First Aid

- The Nationally Recognised Asthma First Aid poster will be located in the centre.
- Asthma first aid kits within the service will include the following:
  - A reliever metered dose inhaler (Salbutamol) e.g. Ventolin, Asmol or Airomir that is in date and fits the accompanying spacer device.
  - A spacer device
  - Instructions on how to use the spacer device
  - Instructions on how to implement nationally recognised asthma first aid.
- The BOOSH Centre will provide an asthma first aid kit which will be:
  - Used in the BOOSH service in emergency situations
  - Taken on all off site excursions
- The Asthma First Aid Kits will be checked monthly and when used for availability of correct contents and expiry dates of reliever medication and be stored in an accessible location with all educators being aware of this location. They should also contain spare disposable spacers to immediately replace the one that has been used.

## Responding to an Attack

In the event of a child experiencing an asthma attack or difficulty breathing educators will follow:

- The child's completed Children's Services Asthma First Aid Record or the child's individual Asthma Management /Medical Management Plan for children diagnosed with asthma; OR
- Nationally Recognised Asthma First Aid (SEE BELOW) for children not previously diagnosed with asthma, or in the event that the child's asthma management plan is unavailable at the time of an attack, (Note: individual asthma management plan is to be implemented once sourced)

Where a child carries their own asthma medication, they should be encouraged to report to an educator their use of their reliever medication as soon as possible after administering and the service is to maintain a record of this medication administration including time, educator advised and if the symptoms were relieved. The child should not delay the use of their medication to find an educator for permission but approach an educator immediately after administration.

All asthma treatment including asthma first aid to be recorded on *The BOOSH Centre – Incident, Injury, Trauma and Illness record* as well as the *Medication Administration Record*. Parents/guardians are to be notified of all asthma first aid administration as soon as practical.

**Not sure if it's Asthma? CALL AN AMBULANCE IMMEDIATELY  
(DIAL 000)**

### NATIONALLY RECOGNISED ASTHMA FIRST AID PLAN

#### Step 1

Sit the child up right and reassure. Do not leave the child alone

#### Step 2

**Give 4 separate puffs** of a blue reliever puffer (Asmol, Ventolin, Airomir) One puff at a time through the spacer (with a mask if required)

**4 breaths** in between each puff

Use the blue puffer on its own if a spacer is not available

#### Step 3

Wait 4 minutes

#### Step 4

If there is little or no improvement repeat Steps 2 and 3

**If still little or no improvement call an ambulance (DIAL 000) and continue Steps 2 and 3 until the ambulance arrives.**

*Adapted from the National Asthma Council Asthma Management Handbook.*

If the child stays conscious and their main problem seems to be breathing, follow the asthma first aid steps. Asthma reliever medicine is unlikely to harm them even if they do not have asthma.

Educators will call for an ambulance:

- If a child is experiencing a severe attack
- If a child not previously diagnosed with asthma is experiencing difficulty breathing.
- If a child is not improving as per the instructions in the Nationally Recognised Asthma First Aid Plan
- In accordance with the child's individual asthma management plan
- If educators have concerns or doubts.