
Bendigo Regional YMCA - Asthma Policy and Procedure

Mandatory – Quality Area 2

Policy Number	CS 2.4	Version	1
Drafted by	JB	Approved by CEO on	10.04.2018
Responsible Person	CSM	Scheduled Review date	10.04.2019

The Asthma Foundation's *Asthma & the Child in Care Model Policy* has been incorporated into this policy.

1. OBJECTIVES

The objective of the Asthma Policy is to provide guidelines to ensure that all BRYMCA Children's Services and Educators are aware of their obligations and best practice management of Asthma.

2. SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Certified Supervisor, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of YMCA services, including during offsite excursions and activities.

3. POLICY

All BRYMCA Children's Services will provide a safe and healthy environment for all children enrolled at the service and in which all children with asthma can participate to their full potential.

4. PROCEDURES

The YMCA is responsible for:

- providing all staff with a copy of the service's *Asthma Policy and Procedure*, and ensuring that they are aware of asthma management strategies (refer to Attachment 1) upon employment at the service
- ensuring all Educators hold current approved Emergency Asthma Management (EAM) training and the details are filed with the staff record.

The ELC Director, OSHC Coordinator, Occasional Care Supervisor and OSHC Supervisors are responsible for:

- providing parents/guardians with an Asthma Action Plan (available from www.asthma.org.au) to be completed in consultation with, and signed by, a medical practitioner
- compiling a list of children with asthma and placing it in a secure, but readily accessible, location known to all staff. This should include the Asthma Action Plan for each child
- ensuring plans are completed in consultation with the child's parents/guardians and available at the service for each child with asthma including:
 1. An asthma action plan signed by a medical practitioner.
 2. A medical conditions risk management plan.
 3. A medical conditions communications plan.
- ensuring that children with asthma are not discriminated against in any way
- making parents aware of the service's *Asthma Policy* upon enrolment of their child and providing a copy if requested (Regulation 91)
- ensuring adequate provision and maintenance of asthma first aid kits
- identifying children with asthma during the enrolment process and informing staff
- ensuring parents/guardians of all children with asthma provide reliever medication and a spacer (including a child's face mask, if required) at all times their child is attending the service
- ensuring the expiry date of reliever medication is checked regularly and replaced when required, and that the service spacers and face masks are replaced after every use
- facilitating communication between YMCA, educators, staff and parents/guardians regarding the service's *Asthma Policy* and strategies
- identifying and minimising asthma triggers for children attending the service, where possible
- displaying Asthma Australia's *Asthma First Aid* poster (refer to *Sources* and Attachment 3) in key locations at the service
- ensuring that medication is administered in accordance with the *Administration of Medication Policy*
- ensuring that when medication has been administered to a child in an asthma emergency without authorisation from the parent/guardian or authorised nominee, the parent/guardian of the child and emergency services are notified as soon as is practicable (Regulation 94).
- ensuring that children with asthma can participate in all activities safely and to their full potential
- immediately communicating any concerns with parents/guardians regarding the management of children with asthma at the service
- ensuring a medication record is kept for each child to whom medication is to be administered by the service (Regulation 92)
- ensuring an asthma first aid kit is taken on all excursions and other offsite activities
- ensuring that induction procedures for casual and relief staff include information about children attending the service who have been diagnosed with asthma, and the location of their medication and action plans
- ensuring programmed activities and experiences take into consideration the individual needs of all children, including any children with asthma.

All Educators are responsible for:

- ensuring that they are aware of the service’s *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, Asthma Action Plans and the asthma first aid kit
- maintaining current approved Emergency Asthma Management (EAM) qualifications
- identifying and, where possible, minimising asthma triggers as outlined in the child’s Asthma Action Plan
- taking the asthma first aid kit, children’s personal asthma medication and Asthma Action Plans on excursions or other offsite events
- administering prescribed asthma medication in accordance with the child’s Asthma Action Plan and the *Administration of Medication Policy* of the service
- communicating any concerns to parents/guardians if a child’s asthma is limiting his/her ability to participate fully in all activities
- ensuring that children with asthma are not discriminated against in any way
- ensuring that children with asthma can participate in all activities safely and to their full potential.

5. DEFINITIONS

Approved Emergency Asthma Management (EAM) training	Training that is approved by the National Authority in accordance with Division 7 of the National Regulations, and is listed on the ACECQA website: http://www.acecqa.gov.au . EAM training provides knowledge about the underlying causes of asthma, asthma triggers, and the recognition and treatment of an asthma attack
Asthma Action Plan	A record of information on an individual child’s asthma and its management, including contact details, what to do when the child’s asthma worsens and the treatment to be administered in an emergency. Asthma Action Plan templates can be downloaded from The Asthma Foundation of Victoria’s website: www.asthma.org.au . A sample plan specifically for use in children’s services is available from this website
Asthma emergency	The onset of unstable or deteriorating asthma symptoms requiring immediate treatment with reliever medication.
Asthma first aid kit	Kits should contain: reliever medication 1 small volume spacer device

	<p>1 compatible children’s face mask</p> <p>record form</p> <p>asthma first aid instruction card.</p> <p>The Asthma Foundation of Victoria recommends that spacers and face masks are for single-use only.</p>
Asthma triggers	<p>Things that may induce asthma symptoms, for example, pollens, colds/viruses, dust mites, smoke and exercise. Asthma triggers will vary from child to child.</p>
Medication record	<p>Contains details for each child to whom medication is to be administered by the service. This includes the child’s name, signed authorisation to administer medication and a record of the medication administered, including time, date, dosage, manner of administration, name and signature of person administering the medication and of the person checking the medication, if required (Regulation 92). A sample medication record is available on the ACECQA website.</p>
Metered dose inhaler (puffer)	<p>A common device used to administer reliever medication.</p>
Puffer	<p>The common name for a metered dose inhaler</p>
Reliever medication	<p>This comes in a blue/grey metered dose inhaler containing salbutamol, a chemical used to relax the muscles around the airways to relieve asthma symptoms. This medication is always used in an asthma emergency. Reliever medication is commonly sold by pharmacies as Airomir, Asmol, Epaq or Ventolin.</p>
Spacer device	<p>A plastic device used to increase the efficiency of delivery of reliever medication from a puffer. It should always be used in conjunction with a puffer device and may be used in conjunction with a face mask.</p>

6. SOURCES

- Asthma Australia: www.asthmaaustralia.org.au
- The Asthma Foundation of Victoria: www.asthma.org.au or phone (03) 9326 7088 or 1800 645 130 (toll free)

- Australian Children’s Education and Care Quality Authority (ACECQA):
www.acecqa.gov.au

7. ROLES AND RESPONSIBILITIES

Role/ Decision/ Action	Responsibility
Educators, Supervisors, Directors and Coordinators	<p>BRYMCA Nominated Supervisor and/or Service Management will oversee the implementation and service adherence to this policy (ie policy compliance).</p> <p>Nominated Supervisor and/or Person with Management and Control will seek individual community feedback and facilitate an active consultation process with service users as appropriate.</p> <p>All Educators are responsible for the daily implementation of the policy when directly supervising children.</p>
Community Services Manager	<p>Is responsible for ensuring suitable resources and support systems to enable compliance with this policy.</p> <p>Drive the consultation process and provide leadership and advice on the continuous improvement of the policy.</p>
CEO	Policy Approval

8. MONITORING, EVALUATION AND REVIEW

BRYMCA management team is responsible for formally reviewing and updating this policy every twelve months, in consultation with representatives from key stakeholder groups and in accordance with current legislation, research, policy and best practice. Small changes and additions may be made outside of the formal review to ensure the policy remains relevant and current. We retain records of each review undertaken. Such records may include minutes of meetings and documentation of changes to policies and procedures that result from a review.

ATTACHMENTS

Attachment 1: Asthma First Aid poster

Attachment 2: Medical conditions communication plan

Attachment 3: Medical conditions risk minimisation plan

ATTACHMENT 1
Asthma First Aid poster

This poster is available for download from The Asthma Foundation of Victoria's website.

Asthma First Aid

1

Sit the person upright

- Be calm and reassuring
- Do not leave them alone



2

Give medication

- Shake the blue reliever puffer*
- Use a spacer if you have one
- **Give 4 separate puffs into the spacer**
- **Take 4 breaths from the spacer after each puff**



*You can use a Bricanyl Turbuhaler if you do not have access to a puffer and spacer

Giving blue reliever medication to someone who doesn't have asthma is unlikely to harm them

3

Wait 4 minutes

- **If there is no improvement, repeat step 2**



4

If there is still no improvement call emergency assistance (DIAL 000)

- Tell the operator the person is having an asthma attack
- Keep giving 4 puffs every 4 minutes while you wait for emergency assistance



Call emergency assistance immediately (DIAL 000) if the person's asthma suddenly becomes worse

To find out more contact your local Asthma Foundation:

1800 645 130

asthmaaustralia.org.au

Translating and Interpreting Service: 131 450

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Attachment 2: MEDICAL CONDITIONS COMMUNICATION PLAN

This medical conditions communication plan is to be completed by BRYMCA Children's Services in consultation with the at risk child's parents/guardian. Copies are to be kept by both the parent/guardian and the Children's Service, on the child's file. It is the parent/guardians responsibility to notify the children's service of any changes.

All families must be aware that no child who has been prescribed with an EpiPen /Anapen is permitted to attend this Children's Service without an EpiPen/Anapen.

Child's Details

Name of Child	Date Of Birth

Parent/Guardian Contact Details

Name	Address Home & Work	Telephone/s

It is the responsibility of the Parent/Guardian to:
(please tick box when completed)

- Provide the Medical Management Plan during enrolment.
- Inform the child's service if their child's medical condition changes, by phone or in person, and if relevant provide an updated Medical Management Plan.

It is the responsibility of the BRYMCA Children's Service to:
(please tick box when completed)

- Ensure all enrolment forms are completed; including:
 - Medical Management Plan signed by medical practitioner and parent.
 - Medical Conditions Risk Minimisation Plan signed by children's service and parent/guardian
 - Medical Conditions Communication Plan signed by children's service and parent/guardian
- Provide the Parent/Guardian with contact details of the service so they can notify of any updates or changes to the child's medical condition, medical conditions risk minimisation plan or medical management plans
- Maintain up-to-date training, relevant to the child's condition e.g. Anaphylaxis training, including administering of EpiPen or Anapen of Educators

It is the responsibility of the BRYMCA Children’s Service Staff to:
 (please tick box when completed)

- Ensure all staff, including relief staff and parent/guardians/helpers, and others attending an excursion or outing with the at risk child are able to identify the child
- Carry the medical management plan/s and medication of any ‘at risk’ child when going on an excursion.
- Make sure any medication (within expiry date) is available for use at any time the child is in care and all staff including relief staff are aware of the location of the child’s medication.
- Inform other families in care that there is an ‘at risk’ child and the procedures that are to be followed, information sign up on display.
- Provide the Parent/Guardian with contact details so they can notify of any updates or changes to the child’s medical condition, medical conditions risk minimisation plan or medical management plans.
- Follow the DEECD Incident and Accident Reporting requirements.
- Maintain up-to-date training, relevant to the child’s condition e.g. Asthma Training, Anaphylaxis training, including administering of EpiPen or Anapen.

The following people have read, understood and agree that this document is a medical conditions communication plan for the at risk child of a medical condition.

Parent/ Guardian Name	Signature	Date
Educator Name	Signature	Date

Attachment 3: MEDICAL CONDITION RISK MINIMISATION PLAN

Date of risk minimisation plan:

Name of child	Date Of Birth	Medical Condition/s

***This risk minimisation plan is to be completed by the Children’s Service in consultation with the at risk child’s parents/guardian.**

Anaphylaxis

Are all families aware that children will not be accepted into care without their prescribed EpiPen or Anapen? Yes / No

The Service/Educator will ensure the EpiPen/Anapen kit is taken on all excursions attended by the ‘at risk’ child. Yes / No

Anaphylaxis/Allergy

Does the family give permission to display the potential sources of exposure to each known allergen to assist the Service/Educator to provide a safe environment for their child? Yes / No

Has the Service/Educator notified all other families in care of any specific procedures to be followed to minimise the risk of exposure to a known allergen? This may include requesting certain foods are not sent with children. i.e. nut products Yes / No

Asthma

Are all families aware that children will not be accepted into care without their prescribed Asthma medication? Yes / No

The Service/Educator will ensure the Asthma Medication is taken on all excursions attended by the ‘at risk’ child. Yes / No

Diabetes

Are all families aware that no child who has been prescribed with Diabetes medication and/or blood glucose meter is permitted to attend the Children’s Service without these items? Yes / No

The Service/Educator will ensure that the Diabetes Medication and/or blood glucose meter is taken on all excursions attended by the ‘at risk’ child. Yes / No

Epilepsy

Are all families aware that when medication is prescribed, parents must provide an adequate supply of emergency medication for their child? Yes / No

The Service/Educator will take medication on all excursions attended by the “at risk” child. Yes /No

Risk Minimisation Table

1. List the known Medical Condition and scenario including allergens where necessary for the 'at risk' child in the following table.
2. List the strategies to minimise the risk to the child, in the following column. This may include requesting that certain food / items not be brought to the service/care environment.
3. In the last column include who is responsible for enforcing the risk minimisation strategy

See examples of risk minimisation strategies on the last page

Medical Condition & Scenario	Risk Minimisation Strategies	Who (parent/guardian/ educator)

How will all staff, including relief staff and parent/guardians/helpers, recognise the child if on an excursion or incursion. (List Strategies)

State where the child's Medical Management/Action Plan will be displayed or located:

Record when regular checks of the expiry date of each medication for the at risk child are undertaken.

Date Checked	Name of Medication Applicable Notes	Checked By	Signature

(more space at back of plan)

The medical conditions risk minimisation plan will be reviewed with the family of the 'at risk' child at least annually, but always upon enrolment of the 'at risk' child and after any incident or accidental exposure.

Date the annual review is to be completed.....

Tick and Date those that apply:

- Parent/Guardian of an 'at risk' child is provided a copy of the Dealing with Medical Conditions Policy: Date:
.....
- Parent/Guardian of an 'at risk' child has provided an Asthma Action Plan/Allergy Action Plan/ Anaphylaxis Action Plan/Diabetes Management Plan/ Epilepsy Action Plan (Circle those that apply) to the children's service:
Date:
- Parent/Guardian has provided a complete EpiPen/Anapen kit:
Date.....
- Is the EpiPen or Anapen prescribed for the child? Yes / No
- Have copies of this form been stored at the Children's Service? Yes / No
- Have copies of this form been given to the parent/guardian? Yes / No

The following people have read, understood and agree that this document is a medical conditions risk minimisation plan for the 'at risk' child of Medical Conditions that affect the child's health. It is the parent/guardians responsibility to notify the child service of any changes.

Parent/ Guardian Name	Signature	Date
Educator Name	Signature	Date

Record when regular checks of the expiry date of each medication are undertaken by an Educator/Parent/Guardian of an 'at risk' child

Date Checked	Name of Medication Applicable Notes	Checked By	Signature

Example of Risk Minimisation Table

The following strategies will be implemented during the following possible scenarios. That will reduce the potential exposure for the 'at risk' child to a risk. allergen:

Medical Condition & Scenario	Risk Minimisation Strategies	Who (parent/guardian/educator)
<p>ANAPHYLAXIS</p> <p>Food allergies (eggs)</p> <p>Entering the children's service</p> <p>hygiene practices</p>	<p>Ensure each child in care washes his / her hands upon arrival and before eating.</p> <p>After eating the children will wash or use baby wipes to clean their hands.</p> <p>Hygiene procedures and practices are used to minimise the risk of contamination of surfaces, food utensils and containers by food allergens.</p> <p>Bottles and lunch boxes provided by the family of the child at risk should be clearly labelled with the child's name.</p>	<p>Parent/ Guardian / Educator</p> <p>Educator</p> <p>Educator</p> <p>Parent/guardian</p>
<p>ALLERGIC TO BEES</p> <p>Protection from insect bite allergies</p>	<p>Specify play areas that are lowest risk to the 'at risk' child and encourage him/her and peers to play in the area.</p> <p>Decrease the number of plants that attract bees.</p> <p>Ensure the at risk child wears shoes at all times outdoors</p> <p>Quickly manage any instance of insect infestation. It may be appropriate to request the exclusion of the child at risk during the period required to eradicate the insects.</p>	<p>Educator</p>
<p>ASTHMA</p> <p>Child has a cold</p>	<p>Monitor 'cold' symptoms notify parents if needed</p> <p>Monitor child's asthma symptoms and provide medication as required</p> <p>Be vigilant with the spread of infection to minimise repeat infections.</p>	<p>Educator</p>
<p>DIABETES</p> <p>Excursions,</p>	<p>Organise excursions to places that are low risk to the at risk child</p> <p>Make sure child's medication and management plan are with the child at all times</p>	<p>Educator</p>
<p>Other</p>		

Medical Condition & Scenario	Risk Minimisation Strategies	Who (parent/guardian/educator)
Note ** This is not a conclusive list and may be added to as the need arises		