

Asthma Management Procedure

This procedure should be read in conjunction with the 'Medical Conditions and Medication Policy'

Documentation and Communication Regarding Known Asthma Conditions

1. Asthma is considered a medical condition and requires documentation as per our medical conditions policy and procedures.
2. Whenever a child diagnosed with asthma is enrolled at the service, staff will be informed of:
 - the child's name and how to identify them
 - where the child's Asthma Action Plan is located
 - where the child's reliever medication is located
3. Staff will help children with asthma feel safe while they are at the service by:
 - Talking to the child about signs and symptoms of an asthma emergency so they learn to talk about these symptoms and how to tell staff when they are experiencing them.
 - Taking the child's and their parent's/guardian's concerns seriously.
 - Making every effort to address any concerns/worries they may talk about.

Provision & Storage of Reliever Medication (Blue/Grey)

1. Where children are prescribed with a Reliever Puffer (Aiomir, Asmol, Ventolin, of Zempreon and Bricanyl), parents/guardians will be required to make one device available to the service while the child is in care.
2. The Reliever Puffer must be labelled with the name of the child and placed in a location easily available to staff (not locked away), but not accessible to children.
3. The service will have at least one general use Reliever Puffer at the service at all times while children are on-site, and an additional Reliever Puffer will accompany each group of children while off-site or during transport.
4. Reliever Puffers will be regularly checked to ensure they have not expired and do not need to be replaced.

Administering Medication

1. Administration of any asthma related medication will be in accordance with the child's Asthma Action Plan and the services Medication Administration Procedures.

Asthma Emergency Response (Known Diagnosis)

In the event that a child with a known diagnosis of Asthma has an asthma emergency, service staff will:

1. Follow the child's Asthma Action Plan.
2. If the child does not respond to steps within the Asthma Action Plan, call an ambulance immediately by dialing 000, and follow the Ambulance Action Procedure.
3. Continue first aid measures until the ambulance arrives and is handed over to paramedics.
4. Contact the parent/guardian or other authorised person as soon as practicable.

Asthma Emergency Response (No Prior Diagnosis)

1. A child (or staff member/visitor) with no history of asthma may have their first asthma emergency whilst at the service.
2. If the First Aider reasonably believes a child, staff member or visitor may be having an asthma attack, the general use Reliever Puffer should be given to the individual immediately.
3. Authorisation to administer the Reliever Puffer medication is not required in the event of an Asthma Emergency – medication should be administered as soon as possible!
Remember: if you are uncertain whether the emergency is due to asthma or anaphylaxis, then they should be treated for anaphylaxis as the first response.
4. An ambulance should be called and the Ambulance Action Procedure followed.
5. Contact the parent/guardian or other authorised person as soon as practicable to notify them of the incident.

Documentation Following an Asthma Emergency

1. An incident report will be completed as soon as practicable following any asthma emergency
2. If required as per the reporting guidelines, the Centre Manager will report the incident to ACECQA within 24 hours.
3. After an asthma emergency, the child's current Risk Minimisation plan will be reviewed to determine if the service's risk minimisation strategies and emergency response procedures need to be changed or improved.
4. If the child had no prior diagnosis of asthma, the parent will be required to take the child to a medical practitioner for investigation and diagnosis, and provide an Action Plan and other relevant documentation to the service.

PROCEDURE VERSION AND REVISION INFORMATION

	Current version	1
Authorised by GENERAL MANAGER	Last review	January 2023