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PLANS AND POLICIES FOR MANAGING ASTHMA

AMERICANS WITH DISABILITIES ACT

The Americans with Disabilities Act (ADA) applies to children with asthma in the childcare or preschool setting. Under this law, “breathing problems” including asthma are considered a disability and protected by the Act. Children cannot be excluded from childcare on the basis of their asthma diagnosis. Childcare providers and preschools must accommodate the needs of the child with asthma while the child is in their care. The accommodations may require the provider to:

- Administer asthma medicines to the child, and
- Reduce triggers in the care environment that may make the child’s asthma worse.

There are exceptions to this law in cases that involve significant difficulty and expense. For specific questions, contact the ADA hotline at (800) 514-0301, the Child and Youth Law Center at (415) 394-7144, or the California Department of Social Services, Community Care Licensing (916) 229-4500, web page: <http://www.cclcd.ca.gov>.

CONTROLLING ASTHMA IN CHILDCARE AND PRESCHOOLS

Asthma is the most common chronic disease of children in preschools and childcare. Asthma cannot be cured but it can be controlled or managed so that children can be fully active, grow healthy and be ready to learn. Schools and childcare providers play an important role in helping children manage their asthma. When the family, the care providers, and the medical provider work together and form a team, most children with asthma do extremely well in childcare and preschool settings. When a child's asthma is well controlled and everyone works together, as a team, almost all children can participate in all activities. There are several things that preschools and childcare providers can do in joining the child's team to help the child control his or her asthma including:

- 1. Learn the basics about asthma.**
- 2. Become familiar with state laws** regarding caring for children with asthma (including the regulations pertaining to the administration of prescription medicines). See RESOURCES, pages 73-88.
- 3. Establish asthma-friendly policies and procedures.**
 - Review the requirements of the licensing and certification agency for childcare and preschools.
 - Collect and record information as required by licensing.
 - Provide staff training on asthma, including recognizing the signs of worsening asthma.

- Provide information about asthma to other children and their families to encourage their support for children with asthma, and ensure the child’s safe participation in activities.
- Ensure that an asthma-trained staff person is always available when a child with asthma is present.
- Eliminate or reduce asthma triggers in the childcare setting; improve the indoor air quality for everyone.
- At the daily health check, conducted when children come to the childcare or pre- school, review information about the child and his or her asthma and keep it easily accessible for the staff to use if the child has asthma signs that day.
- Facilitate the asthma management partnership of parents, doctors, and childcare providers by keeping and sharing a “Daily Asthma Medicine Record”(see ASTHMA FORMS, pages 89-105). Review each new entry with the parent or guardian on a daily basis and, if parents request, provide copies of the daily records for the child’s doctor to review.
- Be prepared to manage the child’s asthma on field trips or in case of an emergency, power failure, or evacuation. Make sure the existing emergency procedures are complete for the child with asthma.



4. Familiarize parents and guardians with the childcare or preschool setting to help identify possible asthma triggers or any needed special considerations. A quick tour of the facility, welcoming the parent's questions and observations, can lead to easier adjustments for all concerned.

- Explain any experience that the setting has had with caring for children with asthma.
- Share with families the details of the daily routine, including exercise and play.
- Make sure families are aware of any classroom pets, the types of furnishings the child will be using, the types of cleaning supplies used, foods and snacks served, plans for field trips or special activities. .

5. Learn about each child in your care who has asthma:

- Arrange time to meet with the parent or guardian to discuss the child's asthma.
- Obtain a copy of the child's asthma action plan/asthma management plan (see ASTHMA FORMS, pages 89-105 for sample plans).
- Review the asthma action plan with parent or guardian and staff. Have a form completed by a doctor or clinic staff that gives you exact medicine dosing information, including side effects and other possible concerns for each particular child.
- Know when and how to administer asthma medicines for the individual child. If parents are unclear about any part of the child's asthma management plan or medicines, assist them in getting the necessary information from their child's health care provider.

- Complete all necessary permission forms for administering medicines (see ASTHMA FORMS, pages 89-105).
- Encourage parents to provide a set of equipment, devices and medicines to be kept at the childcare site if medicines are to be administered by the staff.
- Develop an individualized care plan with the parent, and involve the child if he or she is old enough to say he or she is not feeling well. Parents should make sure the child’s doctor knows the child is in childcare and has signed an asthma action care plan for the child.
- If a child does not have a regular medical care provider, you can help the family to find health care resources through the local Public Health Department’s Child Health and Disability Prevention (CHDP) Program. There are a growing number of health care access and insurance programs for young children; the local CHDP program staff can help families in need of children’s medical care find local resources.

6. Talk with parents or guardians to review and update each child’s records regularly.

- Parents should regularly update their schedules, emergency contact phone numbers, and record this on the child’s action plan. Have the plan updated every six months, or more often if the child’s condition is changing.

7. Know who to call and what to do in case of an emergency.

The asthma-friendly childcare team needs to know about each individual child's asthma, including its severity, triggers, medicines and devices. Communication is essential for teamwork. Talk with parents and guardians of children with asthma to get to know each child, and to keep parents informed about how the child is doing in your care. Parents and medical care providers need to communicate frequently about the child's asthma care. Any new information or instructions needs to be reported to the preschool and childcare providers. Important information about the child's triggers, signs and treatment must be readily available to all staff. There are many different tools to use to regularly share information (samples are included in ASTHMA FORMS beginning on page 89). With clear information close at hand, the childcare/preschool staff can help manage a child's asthma and provide a safe and supportive environment in which children can thrive.

In the past, caring for a child with asthma focused on treating acute episodes. We now know that most asthma episodes can be prevented with good asthma management. Prevention of asthma episodes can reduce long-term lung damage. Effective management of asthma enables children with asthma to lead fully active lives, with fewer acute episodes, and minimizes the amount of medicines they need to use (thereby often reducing medicine side effects).



EFFECTIVE MANAGEMENT OF ASTHMA

Avoiding or controlling triggers

Keep the environment clear of asthma-provoking substances. Avoid exposing children and staff to fumes, dust, and other irritants, as well as other known or suspected asthma triggers.

Assuring medical management

A health care provider prescribes medicines and care that are most effective for the child with asthma. The medicines should be taken exactly as prescribed. Families must regularly discuss with their child's medical care provider how the medicines are working and what asthma signs the child is having. Refer children without a primary care provider to the local health department and children's health insurance programs. In California, low cost and no cost healthcare services are available for eligible children through Medi-Cal, Healthy Families, Healthy Kids, Child Health and Disability Prevention (CHDP), and other public and privately funded programs.

Monitoring children with asthma

Families and caregivers need to carefully observe the child with asthma and keep track of how well the child is doing. Caregivers, teachers and parents need to share with each other how the child is doing. For some children, daily reporting is needed. For all children with asthma, the following must be reported to the parent by the caregiver and vice versa:

- Any signs of an asthma episode
- Any administration of medicines and any reactions to the medicines
- Changes in the child's behavior

Following the Asthma Action Plan

The asthma action plan is developed by the doctor and family and should be provided to all caregivers. Parents or guardians must regularly review the plan with the staff who will be responsible for looking after the child. Be sure staff who are authorized and trained to give medicines are present at all times for the child with asthma. Staff must have immediate access to the asthma action plan, prescribed medications, and a telephone for emergency calls to parents or the child's doctor.

Knowing what to do in an emergency

If the child is having severe signs of asthma (in the red zone), and is not improving within 10 minutes of getting a quick relief medicine
– **call 9-1-1 immediately.**

If the child is having severe signs of asthma and the quick relief medicine is not there to give to the child
– **call 9-1-1 immediately.**

If a child shows any ONE of these emergency signs of asthma
– **call 9-1-1 immediately.**

