

OFFICIAL

# 22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace

Version 1.1 - November 2024

This course has been accredited under Part 4.4 of the *Education and Training Reform Act 2006*.

**Accreditation period: 01 July 2020 – 30 June 2025**



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**22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace**

Version History	Comments	Date
Version 1.1	Copyright owner details and contact information in Section A, updated.	November 2024
Version 1.0	Initial release approved to commence from 1 July 2020.	11 March 2020

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**Section A: Copyright and course classification information**

<b>1. Copyright owner of the course</b>	<p>Copyright of this material is reserved to the Crown in the right of the State of Victoria on behalf of the Department of Jobs, Skills, Industries and Regions (DJSIR) Victoria.</p> <p>© State of Victoria (DJSIR) 2020.</p>
<b>2. Address</b>	<p>Deputy CEO Victorian Skills Authority Department of Jobs, Skills, Industries and Regions (DJSIR) GPO Box 4509 MELBOURNE VIC 3001</p> <p><b>Organisational contact</b> Manager, Training and Learning Products Unit Engagement Branch Victorian Skills Authority Department of Jobs, Skills, Industries and Regions (DJSIR) Email: <a href="mailto:course.enquiry@djsir.vic.gov.au">course.enquiry@djsir.vic.gov.au</a></p> <p><b>Day-to-day contact</b> Human Services Curriculum Maintenance Manager Swinburne University of Technology PO Box 218 Hawthorn, VIC 3122 Telephone: (03) 9214 5034 / 9214 8501 Email: <a href="mailto:cmmhs@swin.edu.au">cmmhs@swin.edu.au</a></p>
<b>3. Type of submission</b>	Re-accreditation
<b>4. Copyright acknowledgement</b>	<p>Copyright of this material is reserved to the Crown in the right of the State of Victoria.</p> <p>© State of Victoria (DJSIR) 2020</p>
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	<p>Victorian Skills Authority          Department of Jobs, Skills, Industries and Regions (DJSIR)          GPO Box 4509          MELBOURNE VIC 3001</p> <p>Email: <a href="mailto:course.enquiry@djsir.vic.gov.au">course.enquiry@djsir.vic.gov.au</a></p> <p>Copies of this publication can be downloaded free of charge from the <a href="#">Victorian government website</a>.</p>
<b>6. Course accrediting body</b>	Victorian Registration and Qualifications Authority (VRQA)
<b>7. AVETMISS information</b>	<p><b>ANZSCO code</b> – GEN20 Non-industry specific training</p> <p><b>ASCED Code (4 digit)</b> – 0699 Other Health</p> <p><b>National course code</b> – 22556VIC</p>
<b>8. Period of accreditation</b>	01 July 2020 – 30 June 2025

## Section B: Course information

<b>1. Nomenclature</b>	<b>Standard 1 AQTF Standards for Accredited Courses</b>
<b>1.1 Name of the qualification</b>	Course in the Management of Asthma Risks and Emergencies in the Workplace
<b>1.2 Nominal duration of the course</b>	4 hours
<b>2. Vocational or educational outcomes of the course</b>	<b>Standard 1 for AQTF Standards for Accredited Courses</b>
<b>2.1 Purpose of the course</b>	Successful completion of this course will provide participants with the knowledge and skills to be able to develop an asthma management strategy and provide asthma related first aid interventions in the workplace.
<b>3. Development of the course</b>	<b>Standards 1 and 2 AQTF Standards for Accredited Courses</b>
<b>3.1 Industry /enterprise/ community needs</b>	<p>According to the Australian Bureau of Statistics (ABS) National Health Survey, around 2.7 million Australians (one in nine or 11.2% of the total population) have had asthma in 2017–18.<sup>1</sup> The survey shows that the prevalence of asthma in the Australian population has increased over the last 10 years from 9.9% in 2007-08 to 11.2% in 2017-18.<sup>2</sup> While overall rates of asthma are higher for females than for males (12.3% compared with 10.2%), asthma is much more common among boys aged 0-14 years than it is for girls of the same age group (12.1% compared with 7.9%).<sup>3</sup></p> <p>The <i>National Asthma Strategy 2018</i> states that while children are much more likely than adults to be hospitalised for asthma, there are now few deaths among the younger age groups due to improvements in asthma management for this cohort.<sup>4</sup> Older people with asthma, on the other hand, are at higher risk of dying from asthma than younger people.<sup>5</sup></p> <p>In 2018, there were 389 asthma-related deaths recorded in Australia (250 females and 139 males), which is a decrease from</p>

<sup>1</sup> Australian Bureau of Statistics, *National Health Survey 2017-18: First Results* (see [Australian Bureau of Statistics](#) for more information)

<sup>2</sup> *ibid.*

<sup>3</sup> *ibid.*

<sup>4</sup> Commonwealth of Australia (Department of Health), *National Asthma Strategy 2018*, pg 9 (see [Commonwealth of Australia \(Department of Health\)](#) for more information)

<sup>5</sup> *ibid.*

	<p>441 deaths in 2017 and 457 deaths in 2016.<sup>6</sup> The National Asthma Council states that while asthma-related deaths among children remain uncommon, they can still occur (seven deaths in 2018), and that those aged over 75 accounted for nearly two-thirds of the asthma-related deaths (241 of 389) in 2018.<sup>7</sup></p> <p>The importance of providing training and support to professionals working outside the health care system is emphasised by the <i>National Asthma Strategy 2018</i>.<sup>8</sup> These professionals from different sectors and settings “have an important role to play in asthma care, including responding to emergency situations and promoting health and reducing asthma risk”.<sup>9</sup></p> <p>The need for the development of a Victorian Crown Copyright accredited course to address the risk assessment, risk minimisation and first aid management of asthma emergency situations in the workplace was initially recognised in 2009. Accordingly, the first ‘<i>Course in the Emergency Management of Asthma in the Workplace</i>’ (22024VIC) was developed and accredited in 2010 and subsequently re-accredited in 2015 as the ‘<i>Course in the Management of Asthma Risks and Emergencies in the Workplace</i>’ (22282VIC). This re-accreditation represents the third iteration of this accredited course.</p> <p>With the incidence of asthma in Australia steadily increasing, uptake in Victoria for accredited training in the management of asthma risks and emergencies is also increasing year-on-year. NCVET Total VET Activity enrolment data for the years 2015-2018 (inclusive) shows a total of 55,025 enrolments in 22282VIC nationally. Refer to Section B 3.2 (<i>Review for re-accreditation</i>) for enrolment data.</p> <p><b>Target Audience</b></p> <p>The target audience for this course includes, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Early childhood educators</li> <li>• Teachers (primary/secondary)</li> <li>• Aged care workers</li> <li>• Disability support workers</li> <li>• Home and Community Care (HACC) workers</li> <li>• Sports coaches</li> <li>• Outdoor recreation guides/leaders</li> <li>• Youth workers</li> <li>• Industry/workplace first aiders</li> </ul>
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<sup>6</sup> National Asthma Council Australia (2019), *Media Release: Asthma Council welcomes drop in asthma deaths but warns against complacency* (see [National Asthma Council Australia](#) for more information)

<sup>7</sup> *ibid.*

<sup>8</sup> Commonwealth of Australia (Department of Health), *National Asthma Strategy 2018*, pg 12 (see [Commonwealth of Australia \(Department of Health\)](#) for more information)

<sup>9</sup> *ibid.*



	<p>It should be noted that this course is designed for the management of asthma emergencies in a workplace context rather than the day-to-day treatment of asthma.</p> <p><b>Project Steering Committee</b></p> <p>The accreditation of this course was guided by a project steering committee (PSC) who provided advice on and validated the skills and knowledge requirements for the course.</p> <p>The PSC consisted of the following members:</p> <table data-bbox="619 560 1452 1142"> <tr> <td>Andrew Fleming</td> <td>Community Services &amp; Health Industry Training Board (Victoria)</td> </tr> <tr> <td>Anna Sims</td> <td>Ambulance Victoria</td> </tr> <tr> <td>Anthony Cameron</td> <td>Australian Red Cross</td> </tr> <tr> <td>Brendon Harre</td> <td>Asthma Australia</td> </tr> <tr> <td>David Loiacono</td> <td>St. John Ambulance Australia (Victoria)</td> </tr> <tr> <td>Tamara Brown</td> <td>St. John Ambulance Australia (Victoria)</td> </tr> <tr> <td>Kristina Bergin</td> <td>Department of Education and Training (Victoria)</td> </tr> <tr> <td>Peter Nicholson</td> <td>Australian First Aid</td> </tr> <tr> <td>Sandra Vale</td> <td>Australian Society of Clinical Immunology and Allergy (ASCIA)</td> </tr> </table> <p><b>In attendance:</b></p> <table data-bbox="619 1220 1452 1400"> <tr> <td>Autumn Shea</td> <td>Curriculum Maintenance Manager (CMM) for Human Services</td> </tr> <tr> <td>Wendy Dowe</td> <td>CMM Administrator</td> </tr> <tr> <td>Christine Foard</td> <td>CMM Project Officer</td> </tr> </table> <p>This course:</p> <ul data-bbox="667 1489 1484 1971" style="list-style-type: none"> <li>• Does not duplicate, by title or coverage, the outcomes of an endorsed training package qualification.</li> <li>• Is not a subset of a single training package qualification that could be recognised through one or more statements of attainment or a skill set.</li> <li>• Does not include units of competency additional to those in a training package qualification that could be recognised through statements of attainment in addition to the qualification.</li> <li>• Does not comprise units that duplicate units of competency of a training package qualification.</li> </ul>	Andrew Fleming	Community Services & Health Industry Training Board (Victoria)	Anna Sims	Ambulance Victoria	Anthony Cameron	Australian Red Cross	Brendon Harre	Asthma Australia	David Loiacono	St. John Ambulance Australia (Victoria)	Tamara Brown	St. John Ambulance Australia (Victoria)	Kristina Bergin	Department of Education and Training (Victoria)	Peter Nicholson	Australian First Aid	Sandra Vale	Australian Society of Clinical Immunology and Allergy (ASCIA)	Autumn Shea	Curriculum Maintenance Manager (CMM) for Human Services	Wendy Dowe	CMM Administrator	Christine Foard	CMM Project Officer
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<p><b>3.2 Review for re-accreditation</b></p>	<p>The review and redevelopment of this course was based on extensive monitoring, evaluation, research, consultation and validation processes to ensure the course remains relevant and reflects the current practices for the first aid management of asthma risks and emergencies.</p> <p>Course development involved:</p> <ul style="list-style-type: none"> <li>• Email and telephone consultation to form the project steering committee (PSC) and review course amendments throughout the development process.</li> <li>• Face-to-face and online PSC meetings.</li> <li>• A review of sample Asthma Action Plans and the National Asthma Council's <a href="#">Asthma First Aid protocol</a>,<sup>10</sup> <a href="#">My Asthma Guide</a>,<sup>11</sup> and the <a href="#">Australian Asthma Handbook</a>.<sup>12</sup></li> <li>• PSC consideration of the feedback received during the mid-cycle review process for the previous course (22282VIC).</li> </ul> <p><b>Enrolment Data</b> State-level Total VET Activity enrolment data for 22282VIC:</p> <table border="1"> <thead> <tr> <th></th> <th>2015</th> <th>2016</th> <th>2017</th> <th>2018</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td><b>Victoria</b></td> <td>1,523</td> <td>6,480</td> <td>7,464</td> <td>8,269</td> <td><b>23,737</b></td> </tr> <tr> <td><b>Queensland</b></td> <td>592</td> <td>9,712</td> <td>3,976</td> <td>2,919</td> <td><b>17,197</b></td> </tr> <tr> <td><b>New South Wales</b></td> <td>563</td> <td>1,343</td> <td>3,147</td> <td>3,198</td> <td><b>8,244</b></td> </tr> <tr> <td><b>South Australia</b></td> <td>7</td> <td>778</td> <td>712</td> <td>99</td> <td><b>1,600</b></td> </tr> <tr> <td><b>Tasmania</b></td> <td>0</td> <td>1,347</td> <td>131</td> <td>47</td> <td><b>1,530</b></td> </tr> <tr> <td><b>Australian Capital Territory</b></td> <td>111</td> <td>441</td> <td>224</td> <td>266</td> <td><b>1,032</b></td> </tr> <tr> <td><b>Northern Territory</b></td> <td>38</td> <td>175</td> <td>347</td> <td>420</td> <td><b>983</b></td> </tr> <tr> <td><b>Western Australia</b></td> <td>0</td> <td>209</td> <td>231</td> <td>246</td> <td><b>679</b></td> </tr> <tr> <td><b>TOTAL</b></td> <td><b>2,836</b></td> <td><b>20,487</b></td> <td><b>16,243</b></td> <td><b>15,452</b></td> <td><b>55,025</b></td> </tr> </tbody> </table> <p><b>Transition arrangements</b> The re-accredited course, <i>22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace</i>, replaces and <b>is equivalent</b> to <i>22282VIC Course in the Management of Asthma Risks and Emergencies in the Workplace</i>. Refer to the transition table below.</p>		2015	2016	2017	2018	Total	<b>Victoria</b>	1,523	6,480	7,464	8,269	<b>23,737</b>	<b>Queensland</b>	592	9,712	3,976	2,919	<b>17,197</b>	<b>New South Wales</b>	563	1,343	3,147	3,198	<b>8,244</b>	<b>South Australia</b>	7	778	712	99	<b>1,600</b>	<b>Tasmania</b>	0	1,347	131	47	<b>1,530</b>	<b>Australian Capital Territory</b>	111	441	224	266	<b>1,032</b>	<b>Northern Territory</b>	38	175	347	420	<b>983</b>	<b>Western Australia</b>	0	209	231	246	<b>679</b>	<b>TOTAL</b>	<b>2,836</b>	<b>20,487</b>	<b>16,243</b>	<b>15,452</b>	<b>55,025</b>
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<sup>10</sup> National Asthma Council Australia, *Asthma first aid* (see [National Asthma Council Australia](#) for more information)

<sup>11</sup> National Asthma Council Australia, *My Asthma Guide* (see [National Asthma Council Australia](#) for more information)

<sup>12</sup> National Asthma Council Australia, *Australian Asthma Handbook* (see [Australian Asthma Handbook](#) for more information)

	RTOs should teach-out or transition current students in accordance with their VET Regulator's transition policies and timelines (i.e. ASQA, VRQA, or WA TAC).
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**Transition Table: 22282VIC and 22556VIC**

Old Unit (from 22282VIC)	New Unit (from 22556VIC)	Comments
VU21658 Manage asthma risks and emergencies in the workplace	VU22927 Manage asthma risks and emergencies in the workplace	Equivalent

<b>4. Course outcomes</b>	<b>Standards 1, 2, 3 and 4 Standards for Accredited Courses</b>			
<b>4.1 Qualification level</b>	<p><i>Standards 1, 2, and 3 AQTF Standards for Accredited Courses.</i></p> <p>The <i>22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace</i> meets an industry and community need, but does not have the breadth, depth or volume of learning of an Australian Qualifications Framework (AQF) qualification.</p>			
<b>4.2 Employability skills</b>	<p><i>Standard 4 AQTF for Standards for Accredited Courses</i></p> <p>Not applicable.</p>			
<b>4.3 Recognition given to the course</b>	<p><i>Standard 5 AQTF Standards for Accredited Courses</i></p> <p>Not applicable.</p>			
<b>4.4 Licensing/ regulatory requirements</b>	<p><i>Standard 5 of AQTF Standards for Accredited Courses</i></p> <p>At the time of accreditation, no licensing or regulatory requirements apply.</p> <p>Requirements for refresher training and currency should be obtained from the relevant state/territory Work Health and Safety Regulatory Authority and industry sector Regulatory Authorities where applicable.</p>			
<b>5. Course rules</b>	<b>Standards 2, 6, 7 and 9 AQTF Standards for Accredited Courses</b>			
<b>5.1 Course structure</b>				
To be eligible for the award of a Statement of Attainment for the <b>22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace</b> , participants must successfully complete one (1) unit listed in the table below.				
Unit of competency code	Field of Education code	Unit of competency title	Pre-requisite	Nominal hours

VU22927	069907	Manage asthma risks and emergencies in the workplace	None	4
<b>Total nominal duration</b>				<b>4</b>
<b>5.2 Entry requirements</b>	<p><i>Standard 9 AQTF Standards for Accredited Courses</i></p> <p>There are no mandatory entry requirements for the <i>22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace</i>.</p> <p>Learners enrolling in the <i>22556VIC Course in the Management of Asthma Risks and Emergencies in the Workplace</i> are best equipped to successfully undertake the training if they have language, literacy and oral communication skills that align to Level 3 of the Australian Core Skills Framework (ACSF), see <a href="#">ACSF</a> for more information.</p> <p>Learners with language, literacy, and oral communication skills at levels lower than suggested above may require additional support to successfully undertake this course.</p>			
<b>6. Assessment</b>	<b>Reference: Standard 10 and 12 AQTF Standards for Accredited Courses</b>			
<b>6.1 Assessment strategy</b>	<p><i>Standard 10 AQTF Standard for Accredited Courses</i></p> <p>All assessment, including Recognition of Prior Learning (RPL), must be compliant with the requirements of:</p> <ul style="list-style-type: none"> <li>• Standard 1 of the AQTF: Essential Conditions and Standards for Initial/Continuing Registration and Guidelines 4.1 and 4.2 of the VRQA Guidelines for VET Providers,</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• The Standards for Registered Training Organisations 2015 (SRTOs),</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• The relevant standards and Guidelines for RTOs at the time of assessment.</li> </ul> <p>Assessment procedures for this course should be developed to simulate a range of different workplace environments, as closely as possible.</p> <p>Evidence should be gained through a range of methods to ensure valid and reliable assessment and consistency in performance. The following examples are appropriate:</p> <ul style="list-style-type: none"> <li>• Critical incident scenarios involving role playing which includes a person in the role of a simulated casualty requiring the administration of the placebo</li> </ul>			

	<p>asthma reliever medication inhaler device with and without a single-use spacer.</p> <ul style="list-style-type: none"> <li>• Completion of workplace documentation.</li> <li>• Practical demonstration of skills.</li> </ul> <p>Verbal and written assessment of underpinning knowledge and its application.</p> <p>Assessment of asthma first aid procedures <b>MUST</b> be undertaken using a person in the role of a simulated casualty with the placebo puffer and spacer placed in their mouth (<i>not to the side of the face</i>).</p>
<p><b>6.2 Assessor competencies</b></p>	<p><i>Standard 12 AQTF Standards for Accredited Courses</i></p> <p>Assessment must be undertaken by a person or persons in accordance with:</p> <ul style="list-style-type: none"> <li>• Standard 1.4 of the AQTF: Essential Conditions and Standards for Initial/Continuing Registration and Guidelines 3 of the VRQA Guidelines for VET Providers,</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• The Standards for Registered Training Organisations 2015 (SRTOs),</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• The relevant standards and Guidelines for RTOs at the time of assessment.</li> </ul> <p><b>In addition, assessors are required to have <u>either</u>:</b></p> <ul style="list-style-type: none"> <li>• A current advanced first aid certificate,</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• Hold current registration with the relevant National Board/ Australian Health Practitioner Regulation Agency(AHPRA) as a Nurse, Medical Practitioner or Paramedic,</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• A qualification or course that addresses higher-level skills and knowledge in asthma first aid.</li> </ul> <p>These additional competency requirements were identified by the project steering committee as essential due to the high-risk nature of the course.</p>
<p><b>7. Delivery</b></p>	<p><b><i>Standards 11 and 12 AQTF Standards for Accredited Courses</i></b></p>

<p><b>7.1 Delivery modes</b></p>	<p><i>Standard 11 AQTF Standards for Accredited Courses</i></p> <p>There are no restrictions on offering the program on either a full-time or part-time basis. Where possible, participants should be exposed to real work environments and examples/case studies.</p> <p>This course may be delivered in a variety of modes including:</p> <p>Educational/classroom setting.</p> <p>Workplace or simulated workplace.</p> <p>Blended learning.</p> <p>Delivery methods should allow for self-directed development and achievement, independent and peer to peer judgement and accountability for a high standard of outcomes.</p> <p>It is highly recommended that training providers use additional educational support mechanisms to maximise each learner's completion of the course. An initial assessment of learner's needs must be conducted during entry into the course to identify the need for language, literacy and oral communication support and reasonable adjustment.</p> <p>Trainers and assessors should contextualise delivery of the course in response to learner needs, while still meeting the requirements of the units of competency.</p>
<p><b>7.2 Resources</b></p>	<p><i>Standard 12 AQTF Standards for Accredited Courses</i></p> <p>Training must be undertaken by a person or people in accordance with:</p> <ul style="list-style-type: none"> <li>• Standard 1.4 of the AQTF: Essential Conditions and Standards for Initial/Continuing Registration and Guideline 3 of the VRQA Guidelines for VET Providers,</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• The Standards for Registered Training Organisations 2015 (SRTOs),</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• The relevant standards and Guidelines for RTOs at the time of assessment.</li> </ul> <p><b>In addition, trainers are required to have <u>either</u>:</b></p> <ul style="list-style-type: none"> <li>• A current advanced first aid certificate,</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• Hold current registration with the relevant National Board/ Australian Health Practitioner Regulation</li> </ul>

	<p>Agency(AHPRA) as a Nurse, Medical Practitioner or Paramedic,</p> <p>or</p> <ul style="list-style-type: none"> <li>• A qualification or course that addresses higher-level skills and knowledge in asthma first aid.</li> </ul> <p>These additional competency requirements were identified by the Project Steering Committee as essential due to the high-risk nature of the course.</p> <p>Resources include:</p> <p>Placebo asthma reliever medication inhaler device.</p> <p>Single-use spacer.</p> <p>Sample documentation, including:</p> <p>Incident reporting documents.</p> <p>Personal Asthma Action Plans.</p> <p>Workplace Asthma Emergency Management Plans.</p> <p>A person in the role of a simulated casualty for practical demonstration of skills.</p> <p>Asthma First Aid protocol developed by National Asthma Council Australia.</p> <p>Training providers must ensure that all reference material is current and follows the National Asthma Council Australia guidelines.</p>
<b>8. Pathways and articulation</b>	<b><i>Standard 8 AQTF Standards for Accredited Courses</i></b>
	There are no formal articulation arrangements in place at the time of accreditation.
<b>9. Ongoing monitoring and evaluation</b>	<b><i>Standard 13 AQTF Standards for Accredited Courses</i></b>
	<p>This course is maintained and monitored by the Curriculum Maintenance Manager – Human Services.</p> <p>A formal review of the course will take place at the mid-point of the accreditation period. Feedback will be sought from industry, those providers offering the course, and other relevant stakeholders as part of the review process.</p> <p>Recommendations for any significant changes will be reported to the Victorian Registration and Qualification Authority (VRQA).</p>

## **Section C—Units of competency**

The following units of competency have been developed for this course and are attached in this section:

- VU22927 - Manage asthma risks and emergencies in the workplace



<b>Unit code</b>	<b>VU22927</b>
<b>Unit title</b>	<b>Manage asthma risks and emergencies in the workplace</b>
<b>Unit Descriptor</b>	<p>This unit of competency provides the skills and knowledge to be able to develop an asthma risk assessment and emergency management strategy to handle asthma episodes in the workplace. It provides background knowledge of the triggers, signs, symptoms and effects of asthma as well as emergency management.</p> <p><i>No licensing, legislative, regulatory or certification requirements apply to this unit at the time of publication.</i></p> <p><i>Requirements for refresher training and currency should be obtained from the relevant state/territory Work Health and Safety Regulatory Authority and industry sector Regulatory Authorities where applicable.</i></p>
<b>Employability Skills</b>	This unit contains Employability Skills.
<b>Application of the Unit</b>	<p>This unit applies to work in a wide range of settings where emergencies involving asthma episodes may occur, such as:</p> <ul style="list-style-type: none"><li>• Childcare</li><li>• Education</li><li>• Aged and community care</li><li>• Sport</li><li>• Tourism</li><li>• Hospitality</li><li>• Industry enterprises and other environments.</li></ul> <p>Application of this unit relates to the use of either the casualty's own asthma reliever medication and spacer or the workplace's asthma reliever medication and single-use spacer.</p> <p>The management of the situation should be carried out in accordance with relevant legislation and organisational policies and procedures.</p>

**ELEMENT****PERFORMANCE CRITERIA**

*Elements describe the essential outcomes of a unit of competency.*

*Performance criteria describe the required performance needed to demonstrate achievement of the element. Where bold italicised text is used, further information is detailed in the required skills and knowledge and/or the range statement. Assessment of performance is to be consistent with the evidence guide.*

- |   |  |
|---|--|
| 1. Prepare for an asthma episode within the workplace context       | <p>1.1 <b>Identify individuals at risk</b> and obtain a copy of their personal Asthma Action Plan</p> <p>1.2 Develop and document <b>risk assessment and emergency management strategies</b> within the <b>workplace context</b> for individuals identified with asthma and those presenting with asthma-like <b>signs and symptoms</b></p> <p>1.3 Develop and document a communication plan to raise awareness of asthma and its first aid management within the workplace</p> <p>1.4 Review the effectiveness of the <b>workplace's Asthma Emergency Management Plan</b></p> |
| 2. Assess the emergency situation                                   | <p>2.1 Identify, assess and minimise <b>hazards</b> that may pose a risk to self and others</p> <p>2.2 Evaluate the casualty's condition and recognise the signs and symptoms of an asthma episode</p> <p>2.3 Assess <b>severity of asthma episode</b></p> <p>2.4 Determine <b>appropriate response</b> to ensure prompt control of the situation</p>  |
| 3. Apply the appropriate first aid procedures for an asthma episode | <p>3.1 Reassure casualty in a caring and calm manner and make comfortable using available resources</p> <p>3.2 Ascertain the casualty's medical history of asthma and check the availability of their personal Asthma Action Plan, their asthma reliever medication and their spacer</p> <p>3.3 Identify, access and assess <b>resources and equipment</b> appropriate for the situation</p> <p>3.4 Provide <b>appropriate emergency action for an asthma episode</b> that reflects the severity of the casualty's condition</p>   |

- 3.5 Monitor casualty's condition in accordance with first aid principles and procedures and identify **signs immediate emergency assistance is required**
4. Communicate details of asthma emergency incidents
- 4.1 **Request** immediate assistance from emergency response services, where required, by calling 000 using appropriate **communication equipment**
- 4.2 Identify and seek **additional emergency assistance** that may be available within the organisation or workplace context, where required
- 4.3 Accurately convey details of casualty's condition and emergency actions undertaken to **relieving personnel**
- 4.4 Communicate information to **relevant others** as specified in casualty's personal Asthma Action Plan and/or organisational policies and procedures
- 4.5 Complete **required documentation** in a timely manner, presenting all relevant facts, in accordance with organisational policies and procedures
5. Evaluate responses to asthma emergencies
- 5.1 Participate in workplace defusing relating to the asthma emergency incident to identify the need for **further support**, in accordance with organisational policies and procedures
- 5.2 Assess the workplace's response to the asthma emergency incident, in accordance with organisational policies and procedures
- 5.3 Make required changes to the risk assessment and emergency management strategies for individuals identified with asthma and those presenting with asthma-like signs and symptoms
- 5.4 Recommend required changes to the workplace's Asthma Emergency Management Plan
- 5.5 Communicate changes to the workplace's Asthma Emergency Management Plan to relevant parties within the workplace
- 5.6 Provide advice to casualty to consult with their physician to review their personal Asthma Action Plan, or to develop a Plan, as a result of the asthma episode

**REQUIRED SKILLS AND KNOWLEDGE**

*This describes the essential skills and knowledge and their level, required for this unit.*

**Required skills**

- Observational skills to:
  - Recognise:
    - Signs and symptoms of an asthma episode
    - Severity of an asthma episode
  - Monitor casualty's condition
- Self-management skills to:
  - Respond appropriately to challenging situations and recognise the psychological impacts of medical emergencies on individuals
  - Control the situation according to established first aid principles prior to providing emergency response for an asthma episode
  - Apply asthma first aid skills in response to an asthma episode or suspected asthma episode
  - Comply with the workplace's incident recording requirements
  - Follow organisational policies and procedures
- Analysis Skills to:
  - Assess risks and hazards in an emergency situation
  - Evaluate the casualty's physical condition
  - Assess severity of an asthma episode
  - Determine appropriate response to the emergency
- Planning and organising skills to:
  - Develop risk minimisation strategies for the emergency management of asthma in accordance with legislative, regulatory and workplace requirements
  - Plan for contingencies
- Communication skills to:
  - Convey details of the casualty's condition and the asthma emergency to emergency services
  - Elicit required information from the casualty
  - Reassure and calm the casualty
- Literacy skills to:
  - Maintain accurate records and complete required reporting documentation
  - Read and interpret:
    - Personal Asthma Action Plans
    - Workplace Asthma Emergency Management Plans
    - Organisational policies and procedures
    - National Asthma Council's Asthma First Aid protocol
    - Labelling on asthma reliever medication and inhaler devices
- Initiative and enterprise skills to:
  - Contribute to the evaluation of responses to an incident in accordance with organisational policies and procedures

**Required knowledge**

- Appropriate action to take if:
  - There is uncertainty whether the casualty is experiencing anaphylaxis (severe allergic reaction) or an asthma episode
  - The event is possibly first-time asthma episode or not sure if casualty has asthma
  - A spacer or other equipment is not available
  - The casualty becomes unresponsive or unconscious after providing asthma first aid
- Composition and essential components of a workplace Asthma Emergency Management Plan
- Triggers for the review of a workplace Asthma Emergency Management Plan includes:
  - Following a severe or life-threatening asthma episode
  - Following recurrent asthma episodes
  - Planned review dates set at regular intervals and detailed within the plan
- Relevant organisational policies and procedures for the management of an asthma emergency
- Guidelines of asthma peak bodies
- Risk management and minimisation strategies contextualised to the specific workplace environment
- Environmental hazard identification and minimisation
- State or Territory regulatory requirements for asthma management relevant to workplace contexts
- Signs and symptoms of asthma
- Features that indicate severity of an asthma episode (mild/moderate, severe and life-threatening)
- Differences between an asthma attack and an asthma emergency
- Potential consequences of an asthma episode
- Common asthma triggers
- First aid principles and procedures for the emergency management of asthma; including personal Asthma Action Plans
- Common asthma medication
- Key features, functions and purposes of different types of asthma equipment and devices for adults and children
- Sources of medical assistance, including: designated first aiders, first aid officers, general practitioners, ambulance
- Organisational policies and procedures for workplace defusing following an emergency incident
- Purpose of defusing sessions and sources of further assistance
- State or Territory regulations, first aid codes of practice and workplace requirements for refresher training to maintain currency of competence

**RANGE STATEMENT**

*The range statement relates to the unit of competency as a whole. It allows for different work environments and situations that may affect performance. Bold italicised wording in the Performance Criteria is detailed below. Add any essential operating conditions that may be present with training and assessment depending on the work situation, needs of the candidate, accessibility of the item, and local industry and regional contexts.*

**Identify individuals at risk** through:

- The signs and symptoms of an asthma episode
- The workplace's procedures
- The individual's medical history
- Asthma emergency incident reports

**Risk assessment and emergency management strategies** may include and/or be informed by:

- Workplace asthma emergency policy
- Workplace's Asthma Emergency Management Plan
- Individual's personal Asthma Action Plan
- Asthma First Aid protocol developed by National Asthma Council Australia
- Identification of staff competencies and training requirements
- Identification and risk assessment of avoidable and unavoidable (manageable) asthma triggers, including but not limited to:
  - Allergens
  - Respiratory infections
  - Exercise
  - Drugs
  - Food chemicals and additives
  - Gastro-oesophageal reflux
  - Allergic rhinitis (hay fever)
  - Smoking
  - Air pollutants
  - Occupational factors
  - Temperature change
- Procedures for obtaining up-to-date forecasts and warnings for:
  - Pollen count
  - Air pollution
  - Thunderstorm asthma

**Signs and symptoms** may include:

- Shortness of breath or rapid breathing
- Wheezing
- Chest tightness
- Coughing

**Workplace context** may include:

- On-site:
  - Primary work location
- Off-site:
  - Excursions, field trips, camps
  - Festivals or events
  - Conference or meetings
  - Student placements

**Workplace's Asthma Emergency Management Plan** should include:

- Strategies to identify individuals at risk
- Identification of possible asthma triggers and risk assessment of the identified triggers
- Strategies to identify asthma hazards and minimise risks
- Strategies to raise asthma awareness in the workplace
- For individuals at risk, the location of their personal Asthma Action Plan, their reliever medications and their spacer
- The Asthma First Aid protocol developed by National Asthma Council Australia
- Location of the workplace's emergency first aid kit containing the workplace's reliever medication and single-use spacers
- Strategy for ensuring medications in the workplace's emergency first aid kit are in date and has not expired
- Persons to be notified following an asthma emergency incident
- Staff members to be advised of the workplace's Asthma Emergency Management Plan
- Staff members to be trained in first aid management of an asthma emergency
- The staff member responsible for review of the workplace's Asthma Emergency Management Plan and the frequency, dates, and occasions for review

**Hazards** may include:

- Asthma triggers
- Workplace hazards, including equipment, machinery and substances
- Environmental hazards, including those known to trigger asthma episodes
- Proximity of other people
- Hazards associated with casualty management
- Contamination by bodily fluids
- Risk of further injury to the casualty

**Severity of asthma episode** may be determined by:

- Mild/moderate signs of an asthma episode, including:
  - Minor difficulty breathing
  - Able to talk in full sentences / can finish a sentence in one breath
  - Able to walk or move around
  - May have cough or wheeze
- Severe signs of an asthma episode, including:
  - Obvious difficulty breathing
  - Cannot speak a full sentence in one breath
  - Tugging in of skin between ribs or at base of neck
- Life-threatening signs of an asthma episode, including:
  - Gasping for breath
  - May no longer have cough or wheeze
  - Unable to speak or only able to speak 1-2 words per breath
  - Confused, exhausted or collapsing
  - Skin discolouration or blueness of the lips
  - Tiredness, drowsiness or unconscious

**Appropriate response** may include:

- Seeking immediate assistance from emergency response services (calling 000) where an asthma emergency has been identified
- Applying first aid procedures for an asthma episode
- Ensuring bystander safety
- Enlisting bystander assistance

**Resources and equipment** may include:

- The casualty's personal Asthma Action Plan
- The casualty's own reliever medication and own spacer
- Workplace's emergency first aid kit containing asthma reliever medication and single-use spacers
- The workplace's Asthma Emergency Management Plan
- Face masks for children under 5 years of age

**Appropriate emergency action for an asthma episode** includes:

- Checking and maintaining the casualty's airway and breathing
- AND**
- Following either:
    - The casualty's personal Asthma Action Plan
- OR**
- The Asthma First Aid protocol developed by National Asthma Council Australia (when the



casualty's personal Asthma Action Plan is not available or the casualty is not known to have a history of asthma)

**Signs immediate emergency assistance is required** includes:

- Casualty cannot breathe normally, or is not breathing at all, following administration of asthma reliever medication
- Casualty displays signs of an asthma emergency, including:
  - Severe shortness of breath, can't speak comfortably or lips look blue
  - Symptoms worsening very quickly
  - Casualty receives little or no relief from administration of reliever medication

**Request** may include:

- Enlisting bystander assistance to make emergency call

**Communication equipment** may include:

- Telephone (Landline, mobile and satellite)
- Two-way radio
- Alarm systems

**Additional emergency assistance** may include:

- Doctors
- Nurses
- Designated first aiders or first aid officers
- Other competent persons in the workplace
- Colleague who has rapport with casualty

**Relieving personnel** may include:

- Emergency response services (responders to 000 call)
- Additional emergency assistance personnel available within the organisation or workplace

**Relevant others** may include:

- Parent or guardian
- School principal
- Workplace supervisor

**Required documentation** may include:

- Required Work Safe documentation
- Workplace documents
- Statutory requirements

**Further support** may include:

- Debriefing conducted by skilled professional (e.g. critical incident counsellor)
- Peer Support program
- Professional psychological support
- Employee Assistance Programs (EAP)

- Lifeline
- Beyond Blue

## EVIDENCE GUIDE

*The evidence guide provides advice on assessment and must be read in conjunction with the Performance Criteria, Required Skills and Knowledge and the Range Statement.*

### **Critical aspects for assessment and evidence required to demonstrate competency in this unit**

The evidence required to demonstrate competency in this unit must be relevant to workplace operations and satisfy all of the requirements of the performance criteria, required skills and knowledge and include evidence of the ability to:

- Recognise and respond safely to at least two (2) asthma episodes in accordance with first aid principles and procedures, which includes demonstrating:
  - At least one (1) emergency response in accordance with a personal Asthma Action Plan,

AND

  - At least one (1) emergency response in accordance with the Asthma First Aid protocol developed by National Asthma Council Australia.
- Evaluate emergency response and identify areas for improvement.
- Develop, review, and update risk minimisation and emergency management strategies for asthma episodes within the workplace context.
- Communicate effectively with the casualty, emergency responders, bystanders, and others within the workplace.

### **Context of and specific resources for assessment**

Assessment must involve the practical application of knowledge and demonstration of skills using simulated asthma emergency in a real or simulated workplace.

Assessment must ensure access to:

Placebo asthma reliever medication inhaler device

Single-use spacer

Sample documentation, including:

Incident reporting documents

Personal Asthma Action Plans

Workplace Asthma Emergency Management Plans

A person in the role of a simulated casualty for practical demonstration of skills

Asthma First Aid protocol developed by National Asthma Council Australia

Assessment must be undertaken by trainers and assessors who meet the additional specialist competency requirements identified in Section B, point 6.2 & 7.2 of the course document.

**Method of assessment**

Evidence should be gained through a range of methods to ensure valid and reliable assessment and consistency in performance. The following examples are appropriate to assess practical skills and knowledge for this unit:

Critical incident scenarios involving role playing which includes a person in the role of a simulated casualty requiring the administration of the placebo asthma reliever medication inhaler device with and without a single-use spacer.

Completion of workplace documentation.

Demonstration of skills.

Verbal and written assessment of underpinning knowledge and its application.

Assessment of asthma first aid procedures MUST be undertaken using a person in the role of a simulated casualty with the placebo puffer and spacer placed in their mouth (*not to the side of the face*).