



ASTHMA POLICY

Rationale

Asthma affects up to one in four primary aged children, one in seven teenagers and one in ten adults. It is important therefore for all staff members to be aware of asthma, its symptoms and triggers, and the management of asthma in a school environment. Asthma attacks involve the narrowing of airways making it difficult to breathe. Symptoms commonly include difficulty breathing, wheezy breathing, dry and irritating cough, tightness in the chest and difficulty speaking. Children and adults with mild asthma rarely require medication; however severe asthma sufferers may require daily or additional medication (particularly after exercise). Professional development will be provided for all staff on the nature, prevention and treatment of asthma attacks. Such information will also be displayed on the staffroom wall.

Aims

- *To manage asthma and asthma sufferers as effectively and efficiently as possible at school.*

School Responsibility:

To ensure the welfare and safety of all students affected by Asthma St Justin's Parish School will ensure:

- *Establish and update and Asthma Management Policy in accordance with Asthma Foundation Guidelines 2017 and make this publicly available;*
- *That a current (within 12 months) Asthma Action Plan is provided by parents for any student affected by Asthma;*
- *File the current Asthma Action Plan with the student's enrolment record;*
- *Display individual Asthma Action Plans in the First Aid Room and ensure that they are in close proximity to the reliever medication;*
- *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 school;*
- *The expiry date of all reliever medication is checked regularly and replaced when required, and that spacers and face masks are replaced after every use;*
- *Medication records are kept for each child to whom medication is to be administered by the School;*
- *A sufficient number of staff are formally trained and accredited in 10392NAT Course in Emergency Asthma Management;*
- *All staff members are aware of the Asthma management procedures;*
- *Induction procedures for casual and relief staff include information about children attending the School who have been diagnosed with asthma, and the location of their medication and action plans;*
- *The adequate provision and maintenance of Asthma Emergency Kits (AEK);*
- *Where possible, identify and minimise asthma triggers for students;*
- *That student with asthma can participate in all activities safely and to their full potential;*
- *The immediate communication of any concerns with parents/guardians regarding the management of children with asthma at the School;*
- *The display of Asthma Australia's 'Asthma First Aid' Poster in key locations around the School.*



Staff Member Responsibilities:

St Justin's Parish School staff members will ensure that they:

- *Are aware of the School's Asthma Management Procedure;*
- *Can identify children displaying the symptoms of an asthma attack and locate their personal medication, Asthma Action Plans and the Asthma Emergency Kit (AEK);*
- *Where possible, minimise asthma triggers (refer to Definitions) as outlined in the child's Asthma Action Plan;*
- *Take the asthma first aid kit, children's personal asthma medication and Asthma Action Plans on excursions or other offsite events;*
- *Will administer prescribed asthma medication in accordance with the child's Asthma Action Plan and record this in a medication register, located in the first aid room;*
- *Consult with the parents/guardians of children with asthma with relation to the health and safety of their child, and the supervised management of the child's asthma;*
- *Communicate any concerns to parents/guardians if a child's asthma is limiting his/her ability to participate fully in all activities;*
- *Enable children with asthma can participate in all activities safely and to their full potential.*

Parent, Guardian & Carer (Parents) Responsibilities:

Parents with children affected by Asthma are responsible for ensuring they:

- *Inform the school at either enrolment or on initial diagnosis, that their child has asthma;*
- *Provide a copy of their child's Asthma Action Plan to the School and ensuring it has been prepared in consultation with, and signed by, a medical practitioner;*
- *The Asthma Action Plan should be reviewed and updated at least annually ensuring all details on their child's enrolment form and medication record are completed prior to commencement at the School;*
- *Bring to the immediate attention of the school any change in their child's condition and required response procedures. The student's Asthma Action Plan will need to be renewed in consultation with, and signed by, the student's medical practitioner;*
- *Provide to the school an adequate supply of appropriate asthma reliever medication and a spacer (including a child's face mask, if required) and replenish as needed;*
- *Encourage their child to learn about and understand their asthma, and to communicate with staff immediately if they are unwell or experiencing asthma symptoms.*



Implementation

Parent, Guardians or Carer's (Parents) of students with Asthma are required to access the relevant Asthma Action Plans from the Asthma Australia and complete the Action Plan in consultation with their child's Medical Practitioner. The school will provide a copy of the relevant Asthma Action Plan upon request.

- *Parents are responsible for ensuring an Asthma Action Plan for the child is presented to St Justin's Parish School prior to their enrolment at the school or upon an initial diagnosis. In accordance with Asthma Australia guidelines, Asthma Action Plans and the student's photo should be reviewed and updated every 12 months.*
 - *Parents are required to provide the school with at least one set of any medication prescribed; which will be kept in the First Aid Room (eg Ventolin x 1).*
1. *Parents will be notified of the Asthma Management Policy on the school's website.*
 2. *Asthma Action Plan for each child will be displayed in the First Aid Room and made available to all staff members with responsibility for the student. This includes classroom and specialist teachers, as well as casual relief teachers (CRTs).*
 3. *Reliever medication and a spacer (including a child's face mask, if required) will be labelled with the student's name and date of expiry clearly visible. One set will be located within the First Aid Room and another within the student's classroom.*
 4. *Members of the School's Leadership Team or nominee will ensure the individual student Asthma Action Plans remain current and are clearly communicated to and understood by relevant staff members. To achieve this the school will establish Communication Plans defining strategies directing school staff, students and parents about how to respond to an asthma attack in various environments.*
 5. *The school will ensure a sufficient number of staff are formally trained and accredited in 10392NAT Course in Emergency Asthma Management.*
 6. *St Justin's Parish School will review individual Asthma Action Plans in consultation with the student's parents:*
 - a. *Annually;*
 - b. *Where the student's medical condition changes;*
 7. *Parents are responsible for informing the School in writing of their child's medical condition and must:*
 - a. *Provide the Asthma Action Plan signed by a registered medical practitioner;*
 - b. *Provide the School with any updates of their child's medication prescribed or otherwise;*
 - c. *Ensure all reliever medication is kept within the expiry date;*
 - d. *Ensure any other medication prescribed or otherwise is kept within the expiry date;*
 - e. *Inform the school if their child's medical condition changes and if relevant provide an updated Asthma Medical Management plan signed by a registered medical practitioner.*
 8. *Members of the School's Leadership Team or their nominee will ensure the individual student Asthma Action Plans remain current and are clearly communicated to and understood by relevant staff members.*



Staff Training & Emergency Response:

- *Staff members and administrative personnel who conduct classes which students at risk of asthma attend or who are required to provide First Aid support to these students are required to maintain 10392NAT Course in Emergency Asthma Management accreditation. This training will include strategies for asthma management, risk minimisation, recognition of allergic reactions, emergency treatment and practice with a metered dose inhaler/puffer.*
- *Training will be provided to all identified staff members annually, where practical, in the first preparation days of each school year before students start school. Training will be arranged for staff members who joins the school after this date at the first available opportunity.*
- *Staff members will be provided with a briefing annually on all students affected by Asthma. This will include all students enrolled, or recently diagnosed. This will occur at a predetermined Staff Meeting.*
- *Asthma plans are available to all staff. These are posted in classrooms and in the sick bay.*
- *Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer) with them at school at all times.*
- *The school will provide, and have staff trained in the administering of, reliever puffers (blue canister) such as Ventolin, Airomir, Asmol or Bricanyl and spacer devices in all first-aid kits, including kits on excursions and camps. Clear written instructions on how to use these medications and devices will be included in each first aid kit, along with steps to be taken to treat severe asthma attacks. Kits will contain 70% alcohol swabs to clean devices after use.*
- *A nebuliser pump will not be used by the school staff unless a student's asthma management plan recommends the use of such a device, and only then if the plan includes and complies with the Vic Government School's Reference Guide – Asthma Medication Delivery Devices.*
- *All devices used for the delivery of asthma medication will be cleaned appropriately after each use.*
- *If no plan is available children are to be sat down, reassured, administered 4 puffs of a shaken reliever puffer (blue canister) delivered via a spacer if necessary – inhaling 4 deep breaths per puff, wait 4 minutes, if necessary administer 4 more puffs and repeat the cycle. An ambulance must be called if there is no improvement after the second 4-minute wait period, or if it is the child's first known attack. Parents must be contacted whenever their child suffers an asthma attack.*



Asthma Risk Mitigation Strategies:

St Justin's Parish School will ensure that Asthma Risk Minimisation Strategies are implemented to ensure the welfare and safety of all students affected by Asthma and to reduce the likelihood of an Asthma episode occurring.

Asthma Risk Mitigation Strategies that the school implements include, but are not limited to ensuring:

- *At least one staff member with current 10392NAT Course in Emergency Asthma Management training is accessible and on duty at all times;*
- *Increased the supervision of the child on special occasions such as excursions, incursions or special event days;*
- *Tables and bench tops are washed down regularly after eating;*
- *Restrict the use of food and food containers, boxes and packaging in crafts, cooking and science experiments, depending on the allergens of the particular children;*
- *Students are closely supervised at lunch and snack times and encouraged to consume food in specified areas. To minimise risk, children should not 'wander around' whilst eating;*
- *Discussing outdoor activities as a staff for a risk minimisation e.g. smoke in the air;*
- *With students whose asthma is directly affected by food containing specified allergens or ingredients parents will be asked not to send food containing .*

Evaluation

- *This policy will be reviewed as part of the school's four-year review cycle.*

Appendix 1

Asthma Action Plan

For use with a Puffer and Spacer

Photo

Name: _____

Date of birth: _____

Confirmed Triggers

**Asthma
Foundation VIC**

Child can self administer if well enough.

Child needs to pre-medicate prior to exercise.

Face mask needed with spacer

ALWAYS give adrenaline autoinjector FIRST, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms.

Adrenaline autoinjector prescribed: Y N Type of adrenaline autoinjector: _____

SIGNS AND SYMPTOMS

MILD TO MODERATE

- Minor difficulty breathing
- May have a cough
- May have a wheeze

Other signs to look for:

ASTHMA FIRST AID

For Severe or Life-Threatening signs and symptoms, call for emergency assistance immediately on Triple Zero "000"

Mild to moderate symptoms do not always present before severe or life-threatening symptoms

1. Sit the person upright
 - Stay with the person and be calm and reassuring
2. Give 4 separate puffs of Airomir, Asmol or Ventolin
 - Shake puffer before each puff
 - Put 1 puff into the spacer at a time
 - Take 4 breaths from spacer between each puff
3. Wait 4 minutes
 - If there is no improvement, repeat step 2
4. If there is still no improvement call emergency assistance
 - Dial Triple Zero "000"
 - Say 'ambulance' and that someone is having an asthma attack
 - Keep giving 4 puffs every 4 minutes until emergency assistance arrives

Commence CPR at any time if person is unresponsive and not breathing normally.

SEVERE

- Cannot speak a full sentence
- Sitting hunched forward
- Tugging in of skin over chest/throat
- May have a cough or wheeze
- Obvious difficulty breathing
- Lethargic
- Sore tummy (young children)

LIFE-THREATENING

- Unable to speak or 1-2 words
- Collapsed / Exhausted
- Gasping for breath
- May no longer have a cough or wheeze
- Drowsy/ Confused / Unconscious
- Skin discolouration (blue lips)

Blue/grey reliever medication is unlikely to harm, even if the person does not have asthma

Emergency Contact Name: _____

Work Ph: _____

Home Ph: _____

Mobile Ph: _____

Plan prepared by Medical or Nurse Practitioner: _____

I hereby authorise medications specified on this plan to be administered according to the plan.

Signed: _____

Date prepared: _____

Date of next review: _____

- Assemble Spacer
- Remove cap from puffer
- Shake puffer well
- Attach puffer to end of spacer
- Place mouthpiece of spacer in mouth and ensure lips seal around it
- Breathe out gently into the spacer
- Press down on puffer canister once to fire medication into spacer
- Breathe in and out normally for 4 breaths (keeping your mouth on the spacer)