



Asthma Policy

2017**STRATHAIRD PRIMARY SCHOOL**

Schools must have for each student diagnosed with asthma, a written:

- Asthma Care Plan
- Student Health Support Plan.

Schools should have a whole school policy to manage asthma that addresses staff asthma awareness training, first aid kits content and maintenance, medication storage and management of confidential medical information. Schools should:

- ensure all staff with a duty of care for students are trained to assess and manage an asthma emergency and complete the free one-hour Asthma Education session at least every three years - this can be face-to-face or online.
- ensure those staff with a direct student wellbeing responsibility such as nurses, PE/sport teachers, first aid and camp organisers have completed the Emergency Asthma Management (EAM) course at least every three years
- provide equipment to manage an asthma emergency in their asthma first aid kits, see: Asthma First Aid Kits in Related policies.

Definition

"Asthma is a disease of the airways, the small tubes which carry air in and out of the lungs. When you have asthma symptoms the muscles in the airways tighten and the lining of the airways swells and produces sticky mucus. These changes cause the airways to become narrow, so that there is less space for the air to flow into and out of your lungs" (National Asthma Council 2011)

Symptoms of asthma may include, but are not limited to:

- shortness of breath
- wheezing (a whistling noise from the chest).
- tightness in the chest
- a dry, irritating, persistent cough.

Symptoms vary from person to person.

Triggers

- exercise
- colds/flu
- smoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires)
- weather changes
- dust and dust mites
- moulds
- pollens
- animals
- chemicals
- deodorants (including perfumes, after-shaves, hair spray and deodorant sprays)
- foods and additives
- certain medications (including aspirin and anti-inflammatories)
- emotions.

A detailed description of triggers can be found on the Asthma Foundation of Victoria website, see: Other resources.

Strategies

This table describes how schools manage students with asthma.

Strategy	Description
Developing an asthma care plan	<p>The Asthma Foundation Victoria's Asthma Care Plan for Schools should be:</p> <ul style="list-style-type: none"> completed by the student's medical/health practitioner in consultation with the parents/guardians provided annually by the: <ul style="list-style-type: none"> doctor to the parents/guardian parents/guardians to the school. <p>The plan must include:</p> <ul style="list-style-type: none"> the prescribed medication taken: <ul style="list-style-type: none"> on a regular basis as premedication to exercise if the student is experiencing symptoms. emergency contact details business contact details of the student's medical/health practitioner details about deteriorating asthma including: <ul style="list-style-type: none"> signs to recognise worsening symptoms what to do during an attack medication to be used an asthma first aid section and should: <ul style="list-style-type: none"> specify no less than 4 separate puffs of blue reliever medication, with 4 breaths taken per puff every 4 minutes, using a spacer if possible. <p>Note: It is recommended that if the plan has less than the required number of puffs per minute period it should be sent back to the parent/guardian and doctor for review.</p> <p>For the Asthma Care Plan for Schools, see Asthma Foundation Victoria in Other resources</p>
Training staff	<p>All school staff with a duty of care responsibility for the wellbeing of students should be trained in being able to manage an asthma emergency appropriately. Training should be conducted at least every three years. This can be face-to-face or online.</p> <p>The Asthma Foundation of Victoria provides a free one hour training session to educate school staff on how to manage asthma in the school setting including how to:</p> <ul style="list-style-type: none"> manage asthma in the school setting assess and manage an asthma emergency. <p>The Asthma Foundation also has Asthma First Aid posters available to schools for free which should be displayed in the:</p> <ul style="list-style-type: none"> staff room

Strategy	Description
	<ul style="list-style-type: none"> ▪ sick room ▪ areas where asthma attacks are likely to occur or be treated. <p>See: Other resources</p>
Reducing asthma triggers	<p>To reduce asthma triggers schools can:</p> <ul style="list-style-type: none"> ▪ mow school grounds out of hours ▪ plant a low allergen garden - for a brochure see Asthma Foundation of Victoria in Other resources ▪ limit dust, for example having the carpets and curtains cleaned regularly and out of hours ▪ examine the cleaning products used in the school and their potential impact on students with asthma ▪ conduct maintenance that may require the use of chemicals, such as painting, during school holidays ▪ turn on fans, air conditioning and heaters out of hours when being used for the first time after a long period of non-use.
Providing an asthma first aid kit	<p>Anyone with asthma can have a severe attack, even those with mild asthma. Schools should have at least two asthma emergency first aid kits.</p> <p>See: Asthma First Aid Kits in Related policies</p>
Encouraging camps and special event participation	<p>Schools should ensure:</p> <ul style="list-style-type: none"> ▪ parents provide enough medication for the student if they are going away overnight ▪ enough asthma emergency kits are available for the camp or excursion needs ▪ that parents/guardians to complete the Asthma Foundation's School Camp and Excursion Medical Update Form and the Department's Confidential Medical Information for School Council Approved School Excursions form. <p>See: Related policies for:</p> <ul style="list-style-type: none"> ▪ Health Care Needs ▪ Health Support Planning Forms. <p>For the Asthma Care Plan for Schools, see Asthma Foundation Victoria in Other resources</p>
Managing exercise induced asthma (EIA)	<p>If a student has diagnosed EIA schools should ensure that they allow adequate time for the following procedures; before, during and after exercise</p> <p>Before:</p> <ul style="list-style-type: none"> ▪ reliever medication to be taken by student 5-20 minutes before activity

Strategy	Description
	<ul style="list-style-type: none"> ▪ student to undertake adequate warm up activity <p>During:</p> <ul style="list-style-type: none"> ▪ if symptoms occur, student to stop activity, take reliever, only return to activity if symptom free ▪ if symptoms reoccur, student to take reliever and cease activity <p>After:</p> <ul style="list-style-type: none"> ▪ ensure cool down activity is undertaken ▪ be alert for symptoms <p>If a student has an asthma attack during exercise, follow their Asthma Action Plan if easily accessible, or commence first aid procedure. Always notify parent of any incidents.</p>
Communicating with parents	Regularly communicate with the student's parents about the student's successes, development, changes and any health and education concerns. In particular the frequency and severity of the student's asthma symptoms and use of medication at school.

This policy was last ratified by School Council on 28/03/2017

Martin Shepherd

Principal

Chris Johnstone

School Council President



To find out more about asthma
contact your local Asthma Foundation:

1800 278 462 (office hours)
asthmaaustralia.org.au

This form is to be used by staff to record use of this Kit. It is in addition to the first aid log as required by worksite policies.

This log should be completed whenever the kit is used and kept with the kit until it needs to be replaced.

Completed forms should be stored with the worksite first aid log.

Additional forms can be downloaded at asthmaaustralia.org.au

DATE	TIME	NAME of casualty	DESCRIBE presentation	ACTION TAKEN	PUFFER count (count down from 200)	WORKSITE REPORT COMPLETED (Yes/No)	EMERGENCY CONTACT notified	NAME of person making entry (print name and sign)
Eg. 1/7/11	10:30am	A. Zmah	Short of breath, coughing	Given 4 puffs with a spacer	196	Yes	Called emergency contact	J. Smith

Asthma Australia

[illegible]

Asthma care plan for education and care services

CONFIDENTIAL: Staff are trained in asthma first aid (see overleaf) and can provide routine asthma medication as authorised in this care plan by the treating doctor. Please advise staff in writing of any changes to this plan.

To be completed by the treating doctor and parent/guardian, for supervising staff and emergency medical personnel.

PLEASE PRINT CLEARLY

Photo of student
(optional)

Plan date

___/___/201___

Review date

___/___/201___

Student's name

Date of birth

Managing an asthma attack

Staff are trained in asthma first aid (see overleaf). Please write down anything different this student might need if they have an asthma attack:

Daily asthma management

This student's usual asthma signs

- ☐ Cough
- ☐ Wheeze
- ☐ Difficulty breathing
- ☐ Other (please describe)

Frequency and severity

- ☐ Daily/most days
- ☐ Frequently (more than 5 x per year)
- ☐ Occasionally (less than 5 x per year)
- ☐ Other (please describe)

Known triggers for this student's asthma (eg exercise, colds/flu, smoke) — please detail:*

Does this student usually tell an adult if s/he is having trouble breathing? ☐ Yes

☐ No

Does this student need help to take asthma medication? ☐ Yes

☐ No

Does this student use a mask with a spacer? ☐ Yes

☐ No

*Does this student need a blue reliever puffer medication before exercise? ☐ Yes

☐ No

Medication plan

If this student needs asthma medication, please detail below and make sure the medication and spacer/mask are supplied to staff.

Name of medication and colour	Dose/number of puffs	Time required

Doctor

Name of doctor

Address

Phone

Signature

Date

Parent/Guardian

I have read, understood and agreed with this care plan and any attachments listed. I approve the release of this information to staff and emergency medical personnel. I will notify the staff in writing if there are any changes to these instructions. I understand staff will seek emergency medical help as needed and that I am responsible for payment of any emergency medical costs.

Signature

Date

Name

Emergency contact information

Contact name

Phone

Mobile

Email

Asthma First Aid

1 Sit the person upright

- Be calm and reassuring
- Do not leave them alone



2 Give 4 separate puffs of blue/grey reliever puffer

- Shake puffer
- Put 1 puff into spacer
- Take 4 breaths from spacer

Repeat until 4 puffs have been taken

Remember: Shake, 1 puff, 4 breaths

OR give 2 separate doses of a Bricanyl inhaler (age 6 & over) or a Symbicort inhaler (over 12)



3 Wait 4 minutes

- If there is no improvement, give 4 more separate puffs of blue/grey reliever as above

OR give 1 more dose of Bricanyl or Symbicort inhaler



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 separate puffs every 4 minutes until emergency assistance arrives

OR give 1 dose of a Bricanyl or Symbicort every 4 minutes - up to 3 more doses of Symbicort



Call emergency assistance immediately - Dial Triple Zero (000)

- If the person is not breathing
- If the person's asthma suddenly becomes worse or is not improving
- If the person is having an asthma attack and a reliever is not available
- If you are not sure if it's asthma
- If the person is known to have Anaphylaxis - follow their Anaphylaxis Action Plan, then give Asthma First Aid

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



Asthma Australia

Contact your local Asthma Foundation

1800 ASTHMA Helpline (1800 278 462) asthmaaustralia.org.au

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