

ASTHMA MANAGEMENT

Rationale

To ensure the school supports students diagnosed with asthma. (DEECD – School Policy Advisory Guide)

Purpose

- 1.1 To provide a safe and supportive environment in which students at risk of asthma can participate equally in all aspects of the student's schooling.
- 1.2 To raise awareness about asthma and the school's Asthma Management Policy in the school community.
- 1.3 To engage with parents/carers of students at risk of asthma in assessing risks, develop risk minimisation strategies and management strategies for the student.
- 1.4 To ensure that each staff member has adequate knowledge about asthma and the school's policy and procedures in responding to a student suffering asthma.

Guidelines

- 2.1 Students who have been diagnosed with Asthma require asthma medication and relevant equipment to be available to them at all times at school and during all school activities.
- 2.2 Parents are responsible for ensuring each student who has been diagnosed with asthma will have an individual Asthma Management Plan. The management plan will be located in the school office with a copy in the First Aid Room and copy given to the class teacher.
- 2.3 Students will need to have their medication available to them at any time as they may need to use it without prior warning.
- 2.4 Information about students diagnosed with asthma risk will be communicated to all staff.
- 2.5 All staff must know the emergency procedure in the event of an asthma attack.
- 2.6 Casual replacement staff will be alerted to those students in the class with special medical needs including asthma.
- 2.7 Strategies to reduce risk of exposure to asthma triggers will be discussed with students, staff and parents.
- 2.8 The first aid coordinator will keep all information regarding students at risk up to date and annually review Asthma Management Plans.
- 2.9 All staff will be trained every three years in the management of asthma with regular updates communicated to staff at the beginning of each term and at weekly briefings when necessary.
- 2.10 All staff will be given information about students who have been diagnosed with asthma and what may trigger their asthma.

Implementation:

- 3.1 All school staff will be responsible for the implementation of the Asthma Policy.
- 3.2 Asthma medication must be taken to all school camps, sporting events, excursions and other special events.
- 3.3 The student's parent/carer is responsible for ensuring that the Individual Asthma Management Plan is kept up-to-date.
- 3.4 Parents of students diagnosed with asthma will encourage their child to learn how to manage their asthma including recognising known triggers.

The Asthma Management Plan shall include:

- 4.1 The usual treatment for the student in the event of an asthma incident
- 4.2 A written plan detailing medication in case the student's condition deteriorates
- 4.3 Name, address & telephone number of an emergency contact
- 4.4 Name, address & telephone number (including after hours) of the student's doctor

(see Appendix B - Asthma Management Plan proforma)

Asthma medication and equipment:

- 5.1 Students diagnosed with asthma will always carry or have available in the school office, appropriate medication and/or equipment
- 5.2 Parents/carers are responsible for providing an adequate supply of the appropriate medication at school. If the student carries their own medication parents are responsible for regularly checking the expiry date of that medication.
- 5.3 The school shall have available in the school office a metered dose inhaler of reliever medication (e.g. ventolin) and a spacer device (volumatic) for emergency treatment.
- 5.4 Inhalers of reliever medication and spacers held in the school first aid room will be checked every 6 months by First Aid Co-ordinator.
- 5.5 Parents may provide a nebuliser pump and be prepared to administer this for their child's use when:
 - 5.51 The treating Doctor verifies that medication can only be delivered effectively through a nebuliser.
 - 5.52 Parents provide their own nebuliser, mask, bowl and tubing and are responsible for this equipment.

In extenuating circumstances parents/carers may negotiate with the Principal or First Aid Co-ordinator for Staff to administer asthma medication with a nebuliser providing the parents/guardian supply their own equipment and are responsible for its maintenance.

If medication is to be stored at School

- 6.1 Parents/carers must provide the medication and ensure that it is labelled with the name of the drug, the dosage, frequency of use and the child's name.
- 6.2 Medication stored at school will be renewed when expiry date is reached. The First Aid Coordinator to be responsible for alerting parents to pending expiry date.

Asthma Emergency Plan

- 7.1 Parents must complete an Asthma Emergency Action Plan for all children that have been diagnosed with asthma. There are sections of the plan that will need to be completed by the family doctor.
- 7.2 Staff must follow **the Emergency Procedures – See Appendix** - in the case of an emergency situation
- 7.3 An ambulance will be called for a student experiencing a severe asthma attack.
- 7.4 Parents will be notified will their child experience a severe asthma attack.
- 7.5 All severe asthma attacks will be documented by the school and first aid documentation processes followed – Refer to First Aid Policy
- 7.6 When on yard duty teachers are to wear a fluorescent vest, carry information related to students at high risk.
- 7.7 Regular training and updates will be provided for every staff member in recognising and responding appropriately to asthma.

School Policies which underpin this policy

- 8.1 First Aid Policy
- 8.2 Medication Policy
- 8.3 Student Engagement and Wellbeing Policy
- 8.4 Student Welfare Policy

Glossary – Asthma Trigger - A trigger is something that causes airways to narrow, leading to asthma symptoms. Everyone's asthma is different, and everyone has different triggers.

Date approved by School Council:

Appendix A: Emergency Procedures

EMERGENCY PROCEDURES

EMERGENCY PROCEDURE AS OUTLINED IN THE VICTORIAN SCHOOLS ASTHMA POLICY

- Sit the student down, remain calm and reassure the student.
- Without delay give 4 puffs (1 puff at a time) of a RELIEVER medication (Ventolin, Respolin or Bricanyl), preferably using a spacer. Ask the student to take 4 breaths from the spacer after each puff.
- Wait 4 minutes. If there is no improvement, give another 4 puffs (as before).
- If there is little or no improvement, or a sudden deterioration in condition, **CALL AN AMBULANCE IMMEDIATELY (DIAL 000)**, state that the person is having an asthma attack. Keep giving 4 puffs every 4 minutes until the ambulance arrives.

ASSESSMENT OF ASTHMA

Mild	Short of breath, wheeze, mild cough, able to speak in sentences
Moderate	Difficulty breathing, loud wheeze, persistent cough, able to speak in short sentences of 5 words or less.
Severe	Gasping for breath, distressed, pale and sweaty, blue lips, difficulty in speaking 2 words.

IF SEVERE call an ambulance by dialling 000 state that a person is having an asthma attack

- Remain with child and send two students with the alert card to staff room and/or office to alert a staff member to bring the school's emergency asthma medication (if the child is not carrying their own) or first aid kit (if the situation occurs outside the school).
- A Level 2 first aid trained staff member will give assistance. They will remain with the child until the emergency ambulance arrives.
- Additional staff members will be alerted to support the situation in relation to crowd control.
- Office staff will contact the parents and provide the ambulance with the student's details and Asthma Management Plan.
- A staff member must man the school gate and direct the ambulance when it arrives.
- All severe asthma attacks will be documented by the school and first aid documentation processes followed – Refer to First Aid Policy