



ST. LEONARDS PRIMARY SCHOOL Asthma Policy

Rationale:

Schools should have a whole school policy to manage asthma that addresses staff asthma awareness training, Asthma Emergency Kit content and maintenance, medication storage and management of confidential medical information.

Implementation:

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

- Asthma Care Plan
- Student Health Support Plan.
- 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.
- ensure those staff with a direct student wellbeing responsibility such as nurses, PE/sport teachers, first aid and school staff attending camp have completed an accredited Emergency Asthma Management (EAM) course at least every three years
- provide equipment to manage an asthma emergency in the form for an Asthma Emergency Kit, see: Asthma Emergency Kits in attachments

Definition

Asthma is a long term lung condition. People with asthma have sensitive airways in their lungs which react to triggers, causing a 'flare-up'. In a flare-up, the muscles around the airway squeeze tight, the airways swell and become narrow and there is more mucus. This makes it harder to breathe. An asthma flare-up can come on slowly (over hours, days even weeks) or very quickly (over minutes). A sudden or severe asthma flare-up is sometimes called an asthma attack.

- Symptoms of asthma can vary over time and often vary from person to person. The most common asthma symptoms are; breathlessness: wheezing (a whistling noise from the chest); and a tight feeling in the chest and or a persistent cough. Symptoms often occur at night, early in the morning or during/just after physical activity. If asthma is well controlled, a person should only have occasional asthma symptoms.
- A trigger is something that sets off or starts asthma symptoms. Everyone with asthma has different triggers. For most people with asthma, triggers are only a problem when asthma is not well controlled with medication. Common asthma triggers include: exercise, colds/flu, smoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires), weather changes such as thunderstorms and cold, dry air, house dust mites, moulds, pollens, animals such as cats and dogs, chemicals such as household cleaning products, deodorants (including perfumes, after-shaves, hair spray and aerosol deodorant sprays), certain medications (including aspirin and anti-inflammatories), emotions such as stress and laughter.

Strategy**Description**

The table below describes the tools and steps that the school will use to manage students with asthma.

Communication Plan	<p>A plan developed by the school which provides information to all school staff, students and parents about asthma and the School's Asthma Policy.</p> <p>The Asthma Foundation of Victoria also has Asthma First Aid posters available to schools for free which will be displayed in the</p> <ul style="list-style-type: none"> • staff room • first aid area <p>For Asthma First Aid posters, see Asthma Foundation of Victoria in Other resources</p>
Emergency Response Plan	<p>Procedures which each school develops for an emergency response to a severe / life-threatening asthma attack for all in-school and out-of-school activities.</p> <p>The procedures, which are included in the School's Asthma Policy, differ from the instructions listed on the student's individual Asthma Action Plan.</p>
Individual Asthma Action Plans (for each student diagnosed with asthma)	<p>Parents must provide the school with an Asthma Action Plan completed by the student's medical practitioner. The plan must outline the students known triggers and the emergency procedures to be taken in the event of an asthma flare-up or attack.</p> <p>The Asthma Action Plan for Victorian schools should be completed/reviewed annually for each student with asthma and contain</p> <ul style="list-style-type: none"> • the prescribed medication taken and when it is to be administered e.g.: - on a regular basis - as premedication to exercise - if the student is experiencing symptoms • emergency contact details • contact details of the student's medical/health practitioner • details about deteriorating asthma including:- signs to recognise worsening symptoms - what to do during an attack - medication to be used. <p>For the Asthma Action Plans for Victorian Schools, see Asthma Foundation of Victoria in Other resources.</p>
Student Health Support Plan	<p>An individual plan for each student diagnosed with asthma, developed in consultation with the student's parents. These plans include the Individual Asthma Action Plan..</p> <p>The Student Health Support Plan includes details on how the school will provide support, identify specific strategies and allocate staff to assist the student.</p>
Asthma Training for school staff	<p>All school staff with a direct duty of care responsibility for students should be trained in being able to manage an asthma emergency appropriately.</p> <p>Training should be conducted at least every three years. This can be face-to-face or online. More formal, accredited training should be completed by staff in a direct role of health and wellbeing support.</p>
Asthma Emergency Kits	<p>Anyone with asthma can have a severe attack, even those with mild asthma. Schools should have at least two Asthma Emergency Kits and an additional kit for every 300 students enrolled. See: Asthma Emergency Kits in Related policies</p>
Encourage participation in camps and special events	<p>Schools should ensure:</p> <ul style="list-style-type: none"> parents provide enough medication (including preventer 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 complete the Asthma Foundation's School Camp and Excursion Medical Update Form and the Department's <i>Confidential Medical Information for School Council Approved School Excursions</i> form.
Managing Exercise induced Bronchoconstriction (EIB)	<p>If a student has EIB 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"> blue or blue/grey reliever medication to be taken by student 15 minutes before exercise or activity (if indicated on the students' Asthma Action Plan) student to undertake adequate warm up activity

	<p>During: if symptoms occur, student to stop activity, take blue or blue/grey reliever medication, only return to activity if symptom free if symptoms reoccur, student to take blue or blue/grey reliever medication and cease activity for the rest of the day. This is known as 'two strikes and out'.</p> <p>After: ensure cool down activity is undertaken be alert for symptoms If a student has an asthma attack during or after exercise or activity, follow their Asthma Action Plan if easily accessible, or commence Asthma First Aid. Always notify parent of any incidents or medication usage.</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.

Asthma Emergency Kit

- Asthma Emergency Kits must contain:
- at least 1 blue or blue/grey reliever medication such as Airomir, Asmol, or Ventolin
- at least 2 spacer devices (for single person use only) to assist with effective inhalation of the blue or blue/grey reliever medication (ensure spare spacers are available as replacements)
- clear written instructions on Asthma First Aid, including:
 - how to use the medication and spacer devices
 - steps to be taken in treating an asthma attack
- a record sheet/log for recording the details of a first aid incident, such as the number of puffs administered - record sheets can be downloaded from the Asthma Foundation of Victoria web site.
- Complete Asthma Emergency Kits can be purchased from the Asthma Foundation of Victoria or the components can be purchased through retail pharmacies.

Regular checks

The first aid staff member will be responsible for maintaining the Asthma Emergency Kit/s, including:

- ensuring all contents are maintained and replaced when necessary
- regularly checking the expiry date on the canister of the blue or blue/grey reliever puffer and replacing it if expired or low on doses
- replacing spacers in the Asthma Emergency Kit after each use spacers are single-person use only. Once used, the spacer can be given to that student, or thrown away.
- previously used spacers should be disposed of.

Note: Schools can legally purchase a blue or blue/grey reliever puffer for first aid purposes from a pharmacist on the written authority of the principal.

This policy was ratified by school council - June 2017