Asthma Management Policy

Audience: School Community

Purpose:

This policy will outline the procedures to:

- ensure staff and parents/guardians are aware of their obligations and the best practice management of asthma at St Paul's Anglican Grammar School
- ensure that all necessary information for the effective management of children with asthma enrolled at St Paul's Anglican Grammar School is collected and recorded so that these students receive appropriate attention when required
- respond to the needs of students who have not been diagnosed with asthma and who experience breathing difficulties (suspected asthma attack) at the School.

This Policy is to be read in conjunction with the St Paul's ELC Asthma Policy.

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 an 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.
Responsibilities of individuals

Heads of School will:
- Provide staff with a copy of the school’s asthma management policy and ensure staff are aware of asthma management strategies upon employment at the school
- Provide asthma education and first aid training for staff as required (at least every 3 years).
- Provide parents and carers with a copy of the school’s asthma policy upon enrolment of their child
- Identify students with asthma during the enrolment process and provide parents and carers with a written asthma plan to be completed and signed by the child’s medical practitioner
- Where possible, ensure that all students with asthma have a current written asthma plan (must be updated at least annually)
- Display current asthma plans in the office/sick bay area and staffrooms of each campus. At the Junior Schools the plans are also to be displayed in the student’s main classroom.
- Ensure a School Camp and Excursion Medical Update Form is completed by parents/carers for off-site activities where possible
- Ensure the parents and carers of all students with asthma provide reliever medication and a spacer (and a face mask if required) at all times their child attends the School
- Implement an asthma first aid procedure consistent with current national recommendations and ensure all staff are aware of the asthma first aid procedure
- Ensure adequate provision and maintenance of asthma emergency kits for the school and that each asthma emergency kit contains reliever medication, two spacer devices, instructions outlining the first aid procedure and a record form
- Ensure that reliever medications within the asthma emergency kits are replaced regularly and have not expired, and that spacers are replaced after each use
- Ensure that staff at Junior and Secondary level carry asthma emergency kits while on yard duty.
- Facilitate communication between management, staff, parents and carers and students regarding the school’s asthma management policy and strategies
- Promptly communicate to parents and carers any concerns regarding asthma and students attending the school
- Identify and minimise, where possible, triggers of asthma symptoms for students
- Ensure that students with asthma are not discriminated against in any way
- Ensure that students with asthma can participate in all activities safely and to their fullest abilities

Staff will:
- Be aware of the school’s asthma management policy
- Be aware of the asthma first aid procedure
- Be aware of students with asthma and where their medication and personal spacers are stored
- Participate in Health Support Plan completion as required
- Attend asthma education and training sessions when required
- Be aware of where to access written asthma plans, School Camp and Excursion Medical Update Forms, and asthma emergency kits
- Identify and minimise, where possible, triggers of asthma symptoms for students
- Ensure that students with asthma are not discriminated against in any way
- Ensure that students with asthma can participate in activities safely and to their fullest abilities
- Promptly communicate to the Head of School, parents and carers any concerns regarding asthma and students enrolled in the school

Parents and Carers will:
- Inform the school if their child has asthma upon enrolment
- Read the school’s asthma management policy
- Participate and sign student Health Support Plans as required
- Provide a signed written asthma plan to the school, and ensure that it is updated at least yearly
• Provide a School Camp or Excursion Medical Update form as required
• Provide the school with their child’s reliever medication along with a spacer (required for ‘puffer’ medication) for all times the child is attending the school, unless the child is carrying the medication and spacer for self-management purposes
• Ensure that if their child is self-managing their asthma correctly the child carries their reliever medication and spacer at all times
• Promptly communicate all medical and health information relevant to their child, to the Head of School and staff of the school
• Communicate any changes to their child’s asthma or any concerns about the health of their child

Students will:
• Immediately inform staff if they experience asthma symptoms
• Inform staff if they have self-administered any asthma medication
• Carry asthma medication and a spacer with them at all times (if self-managing their asthma)

**Strategies:**

This table describes how St Paul’s manages students with asthma.

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Description</th>
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</thead>
</table>
| Developing an asthma action plan | The plan must include:  
- the prescribed medication taken:  
  - 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  
- an asthma first aid section and should:  
  - 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.  
  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.  
  See Appendix 1 for Action Plan                                                                                                                                                                                                                                                                                                                                 |
| Training staff                  | All School staff with a duty of care responsibility for the wellbeing of students will be trained in being able to manage an asthma emergency appropriately. Training should be conducted at least every three years.                                                                                                                                                                                                                                                                                        |
| Reducing asthma triggers        | To reduce asthma triggers the school will:  
- mow school grounds out of hours  
- plant a low allergen garden - for a brochure see Asthma Foundation of Victoria  
- 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 | Anyone with asthma can have a severe attack, even those with mild asthma. Each campus will have at least two asthma emergency first aid kits, with an extra kit required for every 300 students in a large school. |
| Encouraging camps and special event participation | Staff must ensure:  
- parents provide enough medication for the student if they are going away overnight  
- that parents/guardians to complete the School Camp and Excursion Medical Update Form  
- enough asthma emergency kits are available for the camp or excursion needs  
- they carry the student’s updated medical forms, from Synergetic, using the report: Student Health Info Medic Alerts (Internal) - STUHLTHNOALTSPW (code)  
- they review and carry the Asthma Action Plan of any identified students  
- they name and outline the intended action in case of an asthma attack on the camps/excursions risk register |
| Managing exercise induced asthma (EIA) | If a student has diagnosed EIA schools should ensure that they allow adequate time for the following procedures; before, during and after exercise.  
**Before:**  
- reliever medication to be taken by student 5-20 minutes before activity  
- student to undertake adequate warm up activity  
**During:**  
- 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  
**After:**  
- ensure cool down activity is undertaken  
- be alert for symptoms  
If a student has an asthma attack during exercise, follow their Asthma Action Plan, if easily accessible, or commence first aid procedure (see Appendix 2) |
| Communicating with parents | Staff will notify parent of any incidents and 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 sample Asthma Action Plan is available for download from The Asthma Foundation of Victoria’s website or from I drive/Student Services (Warragul) or G drive/Student Services (Traralgon).

### USUAL ASTHMA ACTION PLAN

<table>
<thead>
<tr>
<th>Usual signs of student’s asthma</th>
<th>Worsening signs of student’s asthma</th>
<th>What triggers the student’s asthma?</th>
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</thead>
<tbody>
<tr>
<td>Wheeze</td>
<td>Increased signs of:</td>
<td>Exercise</td>
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<tr>
<td>Tightness in chest</td>
<td>Wheeze</td>
<td>Colds/Viruses</td>
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<tr>
<td>Coughing</td>
<td>Tightness in chest</td>
<td>Pollens</td>
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<tr>
<td>Difficulty breathing</td>
<td>Coughing</td>
<td>Dust</td>
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<tr>
<td>Difficulty speaking</td>
<td>Difficulty breathing</td>
<td>Smoke</td>
</tr>
<tr>
<td>Other (please describe)</td>
<td>Other (please describe)</td>
<td>Pets</td>
</tr>
</tbody>
</table>

Does your child need assistance taking their medication? **Yes**  **No**

Is your child on regular preventer medication taken at home? **Yes**  **No**

Does your child communicate when they experience symptoms and/or need medication? **Yes**  **No**

Does your child take any asthma medication before exercise/play? **Yes**  **No**

<table>
<thead>
<tr>
<th>Name of Medication</th>
<th>Method (e.g. puffer &amp; spacer, Turbuhaler)</th>
<th>When and how much?</th>
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</table>
ASTHMA FIRST AID PLAN

Please tick your preferred Asthma First Aid Plan

☐ NATIONALLY RECOMMENDED ASTHMA FIRST AID PLAN

Step 1. Sit the person upright
- be calm and reassuring
- Do not leave them alone.

Step 2. Give medication
- Shake the blue reliever puffer
- Use a spacer and face mask if you have one, (use the puffer alone if a spacer and face mask are not available)
- Give 4 separate puffs into the spacer
- The person is to take 4 breaths from the spacer after each puff

Giving blue reliever medication to someone who doesn’t have asthma is unlikely to harm them

Step 3. Wait 4 minutes
- If there is no improvement, repeat step 2.

Step 4. If there is still no improvement call emergency assistance (DIAL 000).
- Tell the operator the person is having an asthma attack
- Keep giving 4 puffs, 4 breaths per puff, every 4 minutes while you wait for emergency assistance

Call emergency assistance immediately (DIAL 000) if the person’s asthma suddenly becomes worse

OR

☐ CHILD’S ASTHMA FIRST AID PLAN (approved by doctor) (if different from above)

If the child’s condition suddenly deteriorates or if at any time you are concerned — call an ambulance immediately (000).

• In the event of an asthma attack, I agree to my child receiving the treatment described above.
• I authorise children’s services staff to assist my child with taking asthma medication should he/she require help.
• I will notify you in writing if there are any changes to these instructions.
• I agree to pay all expenses incurred for any medical treatment deemed necessary.
• Please notify me if my child has received asthma first aid.

Parent’s/Guardian’s Signature: ___________________________ Date: ___/___/_____

Doctor’s Signature: ___________________________ Date: ___/___/_____
Asthma First Aid Procedure

This Asthma First Aid Procedure has been reproduced from The Asthma Foundation of Victoria’s Asthma & the Child in Care Model Policy, Version 6.4, January 2012.

ASTHMA FIRST AID PROCEDURE
Follow the written first aid instructions on the child’s Asthma Action Plan, if available and signed by a medical practitioner. If no specific and signed instructions are available, the instructions are unclear, or the child does not have an Asthma Action Plan, begin the first aid procedure outlined below. Reliever medication is safe to administer to children, even if they do not have asthma, however if there is no Asthma Action Plan you must also call emergency assistance to attend (000) and notify the parent/carer of the child as soon as possible.

Call emergency assistance immediately (Dial 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 blue reliever puffer is not available
• If you are not sure it is asthma

Step 1. Sit the person upright
• Be calm and reassuring
• Do not leave them alone
(Send someone else to get the asthma first aid kit)
(Sitting the child in an upright position will make it easier for them to breathe)

Step 2. Give 4 puffs of blue reliever puffer medication
• Use a spacer if there is one
• Shake the puffer
• Put 1 puff into the spacer
• Take 4 breaths from spacer
• Repeat until 4 puffs have been taken

Remember: Shake, 1 puff, 4 breaths
(This medication is safe to administer and may be lifesaving)

Step 3. Wait 4 minutes
If there is no improvement, give 4 more puffs as above

Step 4. If there is still no improvement call emergency assistance (000)
• Say ambulance and that someone is having an asthma attack
• Keep giving 4 puffs every 4 minutes until emergency assistance arrives
(If calling Triple Zero (000) doesn’t work on your mobile phone, try 112)

Version 1

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