

Asthma Policy

Monmia Primary School



This policy was presented to School Council in: September, 2022
School Council President: Amanda Deakin

Rationale	To ensure that Monmia Primary School appropriately supports students diagnosed with asthma.
Aim	<p>To explain to parents/guardians, staff and students the processes and procedures in place to support students diagnosed with asthma.</p> <p>This policy applies to:</p> <ul style="list-style-type: none">all staff, including casual relief staff, contractors and volunteersall students who have been diagnosed with asthma or who may require emergency treatment for asthma and their parents/guardians.
Implementation	<p>Asthma</p> <p>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 hard to breathe. An asthma flare-up can come on slowly (over hours, days or even weeks) or very quickly (over minutes). A sudden or severe asthma flare-up is sometimes called an asthma attack.</p> <p>Symptoms</p> <p>Symptoms of asthma can vary over time and often vary from person to person. The most common asthma symptoms are:</p> <ul style="list-style-type: none">breathlessnesswheezing (a whistling noise from the chest)tight feeling in the chestpersistent cough <p>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.</p> <p>Triggers</p> <p>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:</p> <ul style="list-style-type: none">exercisesmoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires)house dust mitespollenschemicals such as household cleaning productsfood chemicals/additiveslaughter or emotions, such as stresscolds/fluweather changes such as thunderstorms and cold, dry airmouldsanimals such as cats and dogsdeodorants (including perfumes, after-shaves, hair spray and aerosol deodorant sprays)certain medications (Including aspirin and anti-inflammatories) <p>Asthma management</p>

If a student diagnosed with asthma enrolls at Monmia Primary School:

1. Parents/guardians must provide the school with an [Asthma Care Plan](#) which has been completed by the student's medical practitioner. The plan must outline:
 - the prescribed medication taken by the student and when it is to be administered, for example as a pre-medication to exercise or on a regular basis
 - emergency contact details
 - the contact details of the student's medical practitioner
 - the student's known triggers
 - the emergency procedures to be taken in the event of an asthma flare-up or attack.
2. Parents/guardians should also provide a photo of the student to be included as part of the student's Asthma Care Plan
3. The School will keep all Asthma Care Plans in the First Aid Room
4. If a student diagnosed with asthma is going to attend a school camp or excursion, parents/guardians are required to provide any updated medical information
5. If a student's asthma condition or treatment requirements change, parent/guardians must notify the school and provide an updated Asthma Care Plan
6. School staff will work with parents/guardians to review Asthma Care Plans once a year, (Nov/Dec) or on a needs basis

Student asthma kit

All students diagnosed with asthma will have a student asthma kit at school which contains:

- their own prescribed reliever medication labelled with the student's name
- their spacer (if they use one)
- Student asthma kits will be stored in first aid room

Asthma emergency response plan

If a student is:

- having an asthma attack
- difficulty breathing for an unknown cause, even if they are not known to have asthma

School staff will follow the Asthma First Aid procedures outlined in the table below. School staff may contact Triple Zero "000" at any time.

STEP	ACTIONS
1.	Sit the person upright <ul style="list-style-type: none">● Be calm and reassuring● Do not leave them alone● Seek assistance from another staff member or reliable student to locate the student's reliever, the Asthma Emergency Kit and the student's Asthma Care Plan (if available).● If the student's action plan is not immediately available, use the Asthma First Aid as described in Steps 2 to 5.
2.	Give 4 separate puffs of blue or blue/grey reliever puffer: <ul style="list-style-type: none">● Shake the puffer● Use a spacer if you have one● Put 1 puff into the spacer● Take 4 breaths from the spacer Remember – Shake, 1 puff, 4 breaths
3.	Wait 4 minutes <ul style="list-style-type: none">● 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 Triple Zero "000" and ask for an ambulance. <ul style="list-style-type: none">● Tell the operator the student is having an asthma attack● Keep giving 4 separate puffs every 4 minutes until emergency assistance arrives (or 1 dose of Bricanyl or Symbicort every 4 minutes – up to 3 doses of Symbicort)
5.	If asthma is relieved after administering Asthma First Aid, stop the treatment and observe the student. Notify the student's emergency contact person and record the incident
6.	Sit the person upright <ul style="list-style-type: none">● Be calm and reassuring● Do not leave them alone● Seek assistance from another staff member or reliable student to locate the student's reliever, the Asthma Emergency Kit and the student's Asthma Care Plan (if available).

	<ul style="list-style-type: none"> If the student's action plan is not immediately available, use the Asthma First Aid as described in Steps 2 to 5.
7.	Sit the person upright <ul style="list-style-type: none"> Be calm and reassuring Do not leave them alone Seek assistance from another staff member or reliable student to locate the student's reliever, the Asthma Emergency Kit and the student's Asthma Care Plan (if available). If the student's action plan is not immediately available, use the Asthma First Aid as described in Steps 2 to 5.
8.	Give 4 separate puffs of blue or blue/grey reliever puffer: <ul style="list-style-type: none"> Shake the puffer Use a spacer if you have one Put 1 puff into the spacer Take 4 breaths from the spacer Remember – Shake, 1 puff, 4 breaths
9.	Wait 4 minutes <ul style="list-style-type: none"> 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)
10.	If there is still no improvement call Triple Zero "000" and ask for an ambulance. <ul style="list-style-type: none"> Tell the operator the student is having an asthma attack Keep giving 4 separate puffs every 4 minutes until emergency assistance arrives (or 1 dose of Bricanyl or Symbicort every 4 minutes – up to 3 doses of Symbicort)
11.	If asthma is relieved after administering Asthma First Aid, stop the treatment and observe the student. Notify the student's emergency contact person and record the incident

Staff will call Triple Zero "000" immediately 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 they are not sure if it is asthma
- if the person is known to have anaphylaxis

Training for staff

The school will arrange the following asthma management training for staff:

Staff	Completed by	Course	Provider	Cost	Valid
Group 1 General Staff	School staff with a direct teaching role with students affected by asthma or other school staff directed by the principal after conducting a risk assessment.	Asthma first aid management for education staff (non-accredited) One hour face-to-face or online training.	The Asthma Foundation of Victoria	Free to all schools	Valid for 3 years
Group 2 Specific Staff	Staff working with high risk children with a history of severe asthma, or with direct student	<i>Course in Management of Asthma Risks and Emergencies in the Workplace 22282VIC</i> (accredited)	Any RTO that has this course in their scope of practice	Paid by the school	Valid for 3 years

	wellbeing responsibility, (including PE/sport teachers, first aid and school staff attending camp)	OR <i>Course in Emergency Asthma Management 10392NAT</i> (accredited)			
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The school will also conduct an annual briefing for staff on: the procedures outlined in this policy

- the causes, symptoms and treatment of asthma [as referred to the introductory information at the start of this policy]
- identities of the students diagnosed with asthma
- how to use a puffer and spacer
- the location of:
 - the Asthma Emergency Kits
 - asthma medication which has been provided by parents for student use.

The school will also provide this policy to casual relief staff and volunteers who will be working with students, and may also provide a briefing if the principal decides it is necessary depending on the nature of the work being performed.

Asthma Emergency Kit

The school will provide and maintain **two** Asthma Emergency Kits. One kit will be kept on school premises in first aid room and one will be a mobile kit for activities such as:

- yard duty
- camps and excursions

The Asthma Emergency Kit will contain:

- at least 1 blue or blue/grey reliever medication such as Ventolin
- at least 2 spacer devices (for single person use only) to assist with effective inhalation of the blue or blue/grey reliever medication . The school will ensure spare spacers are available as replacements). Spacers will be stored in a dust proof container
- 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 an asthma first aid incident, such as the number of puffs administered

The First Aid Coordinator will monitor and maintain the Asthma Emergency Kits. They will:

- ensure all contents are maintained and replaced where necessary
- regularly check the expiry date on the canisters of the blue or blue/grey reliever puffers and place them if they have expired or a low on doses
- replace spacers in the Kits after each use (spacers are single-person use only)
- dispose of any previously used spaces.

The blue or blue/grey reliever medication in the Asthma Emergency Kits may be used by more than one student as long as they are used with a spacer. If the devices come into contact with someone's mouth, they will not be used again and will be replaced.

After each use of a blue or blue/grey reliever (with a spacer):

- remove the metal canister from the puffer (do not wash the canister)
- wash the plastic casing
- rinse the mouthpiece through the top and bottom under running water for at least 30 seconds
- wash the mouthpiece cover
- air dry then reassemble
- test the puffer to make sure no water remains in it, then return to the Asthma Emergency Kit.

Management of confidential medical information

Confidential medical information provided to the school to support a student diagnosed with asthma will be:

- recorded on the student's file
- shared with all relevant staff so that they are able to properly support students diagnosed with asthma and respond appropriately if necessary.

Communication plan

This policy will be available on school's website so that parents/guardians and other members of the school community can easily access information about the school's asthma management procedures.

Epidemic Thunderstorm Asthma

The school will be prepared to act on the warnings and advice from the Department of Education and Training when the risk of epidemic thunderstorm asthma is forecast as high.

FURTHER INFORMATION AND RESOURCES

- Asthma Foundation Victoria: [Resources for schools](#)
- School Policy and Advisory Guide:
 - [Asthma](#)
 - [Asthma Attacks: Treatment](#)
 - [Asthma Emergency Kits](#)

Policy Last
Reviewed

September 2022

Approved By

Principal

Consultation

September, 2022

Next Scheduled
Review Date

September 2024, every 2 years