



Asthma Policy

Rationale:

Asthma affects up to one in four primary aged children, one in seven teenagers and one in ten adults. It is important therefore for all staff members to be aware of asthma, its symptoms and triggers, and the management of asthma in a school environment.

Aims:

To manage asthma and asthma sufferers as effectively and efficiently as possible at school.

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; or
- a dry, irritating, persistent cough.

Symptoms may vary from person to person.

Triggers may include:

- 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); or
- emotions.

Implementation:

- Children and adults with asthma may require daily or additional medication (particularly after exercise).
- Professional development will be provided for all staff at least every 3 years on the nature, prevention and treatment of asthma attacks. Such information will also be displayed appropriately around the school.
- All students with asthma must provide to the school a fully completed up to date (annual) Asthma Foundation Victoria's School Asthma Action Plan developed by their treating practitioner and parents.
- Asthma plans will be provided to classroom teachers and stored in the first aid room for reference.

- Using the information from the Action Plan, an individual management plan will be developed by the First Aid Officer and stored in the first aid room and with the classroom teacher.
- Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer if required) with them at school at all times.
- The school will provide, and have staff trained at least every 3 years in the effective management of asthma including the administering of reliever puffers (blue canister) such as Ventolin, Airomir, Asmol or Bricanyl and spacer devices. At least 2 Asthma First Aid Kits will be located around the school and an additional Kit will be taken on excursions and camps. Clear written instructions on how to use these medications and devices will be included in each first aid kit, along with steps to be taken to treat severe asthma attacks. Asthma First Aid posters will be displayed appropriately around the school.
- The delegated first aid staff member will be responsible for checking reliever puffer expiry dates and the date of Action Plans.
- Spacers are to be used for one student only and are not to be cleaned and reused for multiple students to align with infection control procedures.
- Care must be provided immediately for any student who develops signs of an asthma attack.

Children suffering asthma attacks should be treated in accordance with their asthma plan.

If no plan is available:

Student	Staff member
Sit upright:	<ul style="list-style-type: none"> • Be calm and reassuring. • Do not leave them alone. • Seek assistance from another teacher (or reliable student) to locate the student's action plan and first aid kit if required. <p>Note: Breathing is easier sitting rather than lying down.</p> <p>Call for another staff member for assistance.</p>
Give medication:	<ul style="list-style-type: none"> • Shake the blue reliever puffer. • Use a spacer if you have one. • Give 4 separate puffs into the spacer, shaking the puffer between each puff. • Ensure student takes 4 breaths from the spacer after each puff. <p>Important:</p> <ul style="list-style-type: none"> • If a spacer is not available use the puffer on its own. • A Bricanyl Turbuhaler may be used if a puffer and spacer is unavailable. <p>If the student's own blue reliever puffer is not readily available immediately get one from:</p> <ul style="list-style-type: none"> • the asthma emergency first aid kit; • another student or staff member (only as a last resort and if the reliever medication is not prescribed); or • all blue reliever puffers are safe, when used as directed. The student may experience harmless side effects such as

Student	Staff member
	shakiness, headache, a tremor or a 'racing' heart.
Wait 4 minutes.	<ul style="list-style-type: none"> • If there is no improvement, repeat step 2.
If there is still no improvement call an ambulance (000).	<ul style="list-style-type: none"> • Tell the operator the person is having an asthma attack. • Keep giving 4 puffs, getting the student to take 4 breaths per puff, every 4 minutes while you wait for emergency assistance.
If asthma is relieved after administering the 4x4x4 procedure, stop the treatment and observe the student. Notify the student's emergency contact person and record the incident.	

- In time, our school will register as an asthma friendly school – <http://www.asthmaaustralia.org.au/vic/home>
- The school will reduce asthma triggers by mowing grass, limiting dust and high allergen plants, maintaining air conditioners etc, ensuring students with Exercise Induced Asthma have a chance to warm up and cool down, to take a reliever medication before exercise, and to stop activity and take reliever medication if symptoms occur.

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.
- Parents/Guardians will be notified of any incidents.

Evaluation:

This policy will be reviewed as part of the school's three-year review cycle.

Approval:

This policy was approved by the School Council on 13 September 2016.