

# 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.

## **Aim:**

We aim to manage asthma, and persons with asthma, as effectively and efficiently as possible at school.

## **Definition:**

Asthma episodes involve the narrowing of airways making it difficult to breathe. Symptoms commonly include difficulty breathing, wheezy breathing, dry and irritating cough, tightness in the chest and difficulty speaking.

## **Implementation:**

- Children and adults with mild asthma rarely require medication; however a person with asthma may require daily or additional medication (particularly after exercise). Students who have exercise induced asthma should have their preventative inhaler prior or after play or exercise, as detailed in their asthma/medical response plan.
- Professional development is required periodically according to the Asthma Australia recommendations. Information will be provided for all staff on the nature, prevention and treatment of asthma episodes. Such information will also be displayed on the staffroom wall.
- All students with asthma must have an up to date (annual) written Asthma Management Plan consistent with Asthma Victoria's requirements completed by their doctor or paediatrician. Appropriate asthma plan proformas are available at [www.asthma.org.au](http://www.asthma.org.au). The student's Asthma Management Plan will be attached to the student's records for reference. The First Aid Officer will provide specialist teachers with grade lists indicating those students who have Asthma Management Plans. This process will be updated as new students enrol throughout the year.
- Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer) with them at school at all times.
- The school will provide, and have staff trained in the administering of, reliever puffers (blue canister) such as Ventolin, Airomir, Asmol or Bricanyl and spacer devices in all first-aid kits, including kits 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 episodes.
- Disposable units must now be used to administer medicine at school e.g. disposable spacers must be discarded after the individual student has used it.
- The delegated first aid staff member will be responsible for checking reliever puffer expiry dates.
- A nebuliser pump will not be used by the school staff unless a student's asthma management plan recommends the use of such a device, and only then if the plan includes and complies with the Vic Government School's Reference Guide – Asthma Medication Delivery Devices.
- Care must be provided immediately for any student who develops signs of an asthma episode.
- Children having asthma episodes should be treated in accordance with their Asthma Management Plan.
- If no plan is available, as asthma may be undiagnosed, children are to be sat down, reassured, administered 4 puffs of a shaken reliever puffer (blue canister) delivered via a spacer if necessary – inhaling 4 deep breaths per puff, wait 4 minutes, if necessary administer 4 more puffs and repeat the cycle. An ambulance must be called if there is no improvement after the second 4-minute wait period, or if it is the child's first known attack. Parents must be contacted whenever their child has an asthma episode.
- Our school is registered as an asthma friendly school – [www.asthmafriendlyschools.org.au](http://www.asthmafriendlyschools.org.au)

## **Evaluation:**

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

Ratified by School Council: May 2017