

Murtoa College

ASTHMA POLICY



Rationale:

Asthma is a chronic health condition, which affects 1 in 6 children and 1 in 9 adults. It is the most common reason for hospital admission in children under 12 years of age and the leading cause of school absenteeism (Asthma Foundation of Australia). 8 Australians die from asthma each week and more than half of these asthma deaths can be prevented. With appropriate management the impact of asthma on school absenteeism and deaths can be minimized.

Aim:

- To provide a policy of asthma management that focuses upon prevention as the priority.
- To provide a process for the proper asthma management of students and staff within the school.

Scope and Development:

This policy applies to children enrolled at Murtoa College, their parents/guardians, the staff and Council.

This policy was correct at the time of publication and developed in accordance with:

- The Asthma Foundation of Victoria – The Victorian Schools Asthma Policy
- The Asthma Foundation of Australia.

Implementation:

Our Asthma Friendly Strategies are:

Education:

- An information session will be held annually to update all school staff on asthma and its management. This will ensure that the Asthma Friendly Schools Program standards are being met.
- Parents will be kept informed about asthma and related topics through regular newsletter inserts developed by the Asthma Foundation of Victoria.
- The Asthma First Aid poster will be displayed wherever appropriate including in the first aid room, staff room and school office.

Asthma Management:

- School management will identify children with asthma during the enrolment process and convey this information to all school staff where and when appropriate.
- Asthma Action Plans:
 - The Welfare Co-ordinator or school nurse will distribute Asthma Action Plans to the parents of all students with asthma (as indicated on their enrolment form) (Appendix 1). The person responsible will follow-up these plans until all have been returned.
 - The Welfare Co-ordinator will ensure that an Asthma First Aid poster is displayed in each key location.
- Medications:
 - Students are able to bring appropriate asthma medications to school provided:
 - The parent/carer has completed and returned the Asthma Action Plan form.
 - All medications are labelled clearly and properly.
 - It is the parents' responsibility to ensure that the medication is not out of date. However, in the even of the medication being past it's use by date the school puffer

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must be used and the parents informed of its use and the need to purchase another puffer for their child.

- A spacer (to assist with the delivery of blue reliever medication (Ventolin, Asmol) during an acute asthma attack)), blue reliever puffer, alcohol swabs and asthma first aid steps card shall be kept in all first aid kits, the first aid room and with staff on excursions or sporting events. The First Aid Person is responsible for checking expiry dates on this medication and replacing when required.

- Emergency Management:

All students judged to be having a severe asthma attack require emergency medical treatment. The following procedure will be followed:

- Call 000 or ambulance. Clearly state that the student is having an asthma attack. Carry out asthma first aid whilst waiting for the ambulance to arrive (Appendix 2). Have another staff member contact the parents as the child should not be left alone, even if there is complete recovery. If the student has an asthma action plan, follow the steps immediately.
 - If no individual action plan is available, normal asthma protocol should be used immediately (Appendix 2). These steps are clearly displayed in poster format in the First Aid Room, school office and staff rooms.
 - If the student's own reliever puffer is not readily available, a reliever puffer should be used from the first aid kit.
 - Regardless of the severity of the attack, asthma first aid needs to commence immediately.
 - In the situation of a first time asthma attack, asthma first aid must be followed immediately (Appendix 2).
- School Camps/Excursions:
- A minimum of one staff member capable of managing an acute asthma attack shall be present.
 - Parents/Carers will be notified of their responsibility to ensure that their child has an adequate supply of appropriate medication and this medication has been added to a Camp/Excursion Asthma Action Plan which is returned to the school office along with other camp permission documentation. This Asthma Action Plan will be taken to camp by camp staff.
 - An asthma first aid kit will be carried by staff.
 - Catering staff will be provided with a record of students known to have food allergies or have their asthma triggered by food or food additives.
- School Activities/Physical Education:
- Students with asthma will be encouraged to participate in all school activities.
 - Staff responsible for Physical Education/Activity will know and understand the steps involved in managing exercised induced asthma

Evaluation:

This policy will be reviewed as part of the school policy review cycle, and as required by the Asthma Foundation, to maintain accreditation as part of the Asthma Friendly School program.

References:

Asthma Foundation of Australia

Evaluation

This policy was last ratified by School Council in....

June 2017

SCHOOL ASTHMA ACTION PLAN



This record is to be completed by parents/carers in consultation with their child's doctor. Please tick the appropriate box and print your answers clearly in the blank spaces where indicated. This school is collecting information on your child's asthma so we can better manage asthma while your child is in our care. The information on this Plan is confidential. All staff that care for your child will have access to this information. It will only be distributed to them to provide safe asthma management for your child at school. The school will only disclose this information to others with your consent if it is to be used elsewhere. Please contact the school at any time if you need to update this Plan or you have any questions about the management of asthma at school. If no Asthma Action Plan is provided by the parent/carer, the staff will treat asthma symptoms as outlined in the Victorian Schools Asthma Policy (Section 4.5.10.3 of the Department of Education and Early Childhood Development Victorian Government Schools' Reference Guide).



Student's Name _____

Gender M F **Age** _____ **Date of birth** ____/____/____ **Form/Class** _____

Emergency Contact (e.g. Parent/Carer) _____ **Relationship** _____

Phone: (H) _____ (W) _____ (M) _____

Doctor's Name _____ **Phone** _____

Ambulance Subscriber Yes No **Subscriber number** _____

PHOTO
(optional)

Does this student have any other health plans? Yes No **If so what are they?** _____

USUAL ASTHMA ACTION PLAN

Usual signs of student's asthma	Worsening signs of student's asthma	What triggers the student's asthma?
Wheeze _____	Increased signs of:	Exercise _____
Tightness in chest _____	Wheeze _____	(refer to managing EIA)
Coughing _____	Tightness in chest _____	Colds/Viruses _____
Difficulty breathing _____	Coughing _____	Pollens _____
Difficulty speaking _____	Difficulty breathing _____	Dust _____
Other (please describe) _____	Difficulty speaking _____	Other Triggers (please describe) _____
Other (please describe) _____	Other (please describe) _____	

Managing Exercise Induced Asthma (EIA)

Students with asthma are encouraged to take part in school based exercise and physical activity to contribute to their cardiovascular fitness and general wellbeing. Most individuals with EIA can exercise to their full potential if the following steps are taken:

1. Students should take their blue reliever medication 5-10 minutes before warm up, then warm up appropriately.
2. If the student presents with asthma during the activity the student should stop the activity, take their blue reliever medication and wait 4 minutes. If the symptoms improve, they may resume activity. If their symptoms reoccur, recommence treatment. THE STUDENT SHOULD NOT RETURN TO THE ACTIVITY UNDER ANY CIRCUMSTANCES and the parent/carer should be informed of any incident.
3. Cool down at the end of activity and be alert for asthma symptoms after exercise.

Does the student need assistance taking their medication? Yes No If yes, how? _____

Asthma medication requirements usually taken: (Including relievers, preventers, symptom controllers, combination)		
Name of Medication (e.g. Flixotide, Ventolin)	Method (e.g. puffer & spacer, dry powder inhaler)	When and how much? (e.g. at home, 1 puff in morning and 1 at night, before exercise)

SCHOOL ASTHMA ACTION PLAN



Asthma First Aid Plan



Please tick preferred Asthma First Aid Plan

Victorian Schools Asthma Policy for Asthma First Aid

(Section 4.5.10.3 of the Department of Education and Early Childhood Development Victorian Government Schools' Reference Guide)

1. Sit the student down and remain calm to reassure them. Do not leave the student alone.
2. Without delay shake a blue reliever puffer (*Airomir, Asmol, or Ventolin*)* and give 4 separate puffs through a spacer (use the puffer alone if a spacer is not available). Use one puff at a time and ask the student to take 4 breaths from the spacer after each puff.
3. Wait 4 minutes. If there is no improvement, repeat steps 2 and 3.
4. If there is still no improvement after a further 4 minutes – call an ambulance immediately (dial 000) and state that the student is having breathing difficulties. Continuously repeat steps 2 and 3 while waiting for the ambulance.

* A *Bricanyl* Turbuhaler may be used in First Aid treatment if a puffer and spacer is unavailable
 If at any time the student's condition suddenly worsens, or you are concerned, call an ambulance immediately.

OR

Student's Asthma First Aid Plan (if different from above)

- Please notify me if my child regularly has asthma symptoms at school.
- Please notify me if my child has received Asthma First Aid.
- In the event of an asthma attack, I agree to my son/daughter receiving the treatment described above.
- I authorise school staff to assist my child with taking asthma medication should they 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.

Parent's/Guardian's Signature: _____

Date ___/___/___

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Doctor's Signature: _____ Date ___/___/___

For further information about the Victorian Schools Asthma Policy, the Asthma Friendly® Schools Program or asthma management please contact The Asthma Foundation of Victoria on (03) 9326 7088, toll free 1800 645 130, or www.asthma.org.au or www.asthmafriendlyschools.org.au.

Appendix Two:

asthma first aid



step 1

Sit the student upright, remain calm and provide reassurance.
Do not leave the student alone.



step 2

Give 4 puffs of a blue reliever puffer (*Airmax, Asmol, Epaq or Ventolin*), one puff at a time, preferably through a spacer device*. Ask the student to take 4 breaths from the spacer after each puff.
*If no spacer is available, use a blue reliever puffer on its own.



step 3

Wait 4 minutes.



step 4

If there is little or no improvement, repeat steps 2 and 3.



If there is still little or no improvement, call an ambulance immediately (Dial 000).
Continue to repeat steps 2 and 3 while waiting for the ambulance.

What if it is a first attack of asthma?
If a student has difficulty breathing and is not known to have asthma, call an ambulance immediately and follow the Asthma First Aid Plan. No harm is likely to result from giving a blue reliever puffer to someone without asthma. A Bricanyl Turbuhaler may be used in first aid treatment if a puffer and spacer are unavailable.

For more information about asthma, contact your local Asthma Foundation on 1800 645 130

Disclaimer: The information in this poster is not intended to replace individual medical advice. © Asthma Foundations of Australia 2007.

ASTHMA FOUNDATIONS AUSTRALIA

 **Australian Government**
Department of Health and Ageing