



SANDRINGHAM EAST PRIMARY SCHOOL Asthma Management Policy

Rationale:

Asthma is a chronic health condition affecting approximately 10% of Australian children and teenagers. Asthma is one of the most common reasons for child admissions to hospital and missed days of school. Asthma exacerbations can commonly occur while attending schools, particularly in February and May.

In order to meet the duty of care obligations and to ensure the health and wellbeing of our students, Sandringham East Primary School recognises the importance of staff education and the implementation of an asthma policy. The school recognises the importance of involvement and engagement with parents and carers of students and the ability of students to self-manage their asthma where appropriate.

Aims:

- To ensure staff are aware of students with asthma and the school's policy and procedures in responding to a reaction.
- To ensure the whole school community (principals, staff, volunteers, parents and carers and students) are aware of their obligations and best practice management of asthma in the school setting
- To provide the necessary information to effectively manage episodes of asthma within the school according to best practice

Implementation:

The 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
- Ensure all staff with a duty of care for students are trained to assess and manage an asthma emergency and complete an Asthma Education session at least every three years
- Ensure those staff with a direct student wellbeing responsibility such as nurses, PE/sport teachers, first aid and camp organisers have completed the Asthma Training at least every three 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 blank asthma plan to be completed and signed by the child's medical practitioner and returned to the school **See Appendix 1**
- Where possible, ensure that all students with asthma have a current written asthma plan (must be updated at least annually)
- Asthma plans will be provided to classroom teachers and also stored in the first aid room for reference.
- Ensure a School Camp and Excursion Medical Update Form is completed by parents/carers for off-site activities where possible **See Appendix 2**

- 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
- Ensure adequate provision and maintenance of asthma emergency kits for the school
- Ensure staff are aware that there is a heightened risk of students suffering from asthma throughout hay fever season (typically during the months of October to December).
- Ensure staff are aware of the heightened risk of asthma incidents when thunderstorms are imminent.

Epidemic thunderstorm asthma

In the lead up to a thunderstorm, wind activity can increase the prevalence of asthma inducing pollen. The number of potential asthma emergencies can increase greatly across the general population.

Those at increased risk of thunderstorm asthma include:

- People with asthma
- People with a past history of asthma
- Those with undiagnosed asthma
- People with seasonal hay fever who have not ever had asthma

What the school will do when prevailing conditions may induce asthma

There is a heightened risk of students suffering from asthma over the Spring and Summer period.

During this time, the school will:

- Monitor pollen count (as reported by monitoring services such as melbournepollen.com.au or via local news sources).
- Ensure children with an asthma plan remain indoors on high risk days (ie. where high pollen count, windy conditions and/or predicted thunderstorm activity is forecast).
- Advise all other students that they should also shelter indoors on high risk days should they have any concerns about feeling unwell/asthmatic symptoms.
- Ensure all students seeking shelter on high risk days are supervised by an adult with first aid training.

The student asthma plan must include:

- the prescribed medication taken on a regular basis and as premedication to exercise if the student is experiencing symptoms.
- emergency contact details
- business 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.

Asthma emergency first aid kits must contain:

- blue/grey reliever medication such as Airomir, Asmol, or Ventolin
- at least 2 spacer devices to assist with effective inhalation of the blue/grey reliever medication (ensure spare spacers are available as replacements)
- clear written instructions on:
 - how to use these medications and devices
 - steps to be taken in treating a severe asthma attack
- a record sheet/log for recording the details of a first aid incident, such as the number of puffs administered - record sheets can be downloaded from the Asthma Foundation of Victoria web site.
- Please note that spacers and face masks are single-person use only³. It is essential to have at least two spacers (and two face masks if necessary) contained in each first aid kit and that spacers and face masks are replaced each time they are used.

- Asthma First Aid Kits will be located in the First Aid room with additional kit available to be taken on excursions and camps

- Ensure that reliever medications within the asthma emergency kits are replaced regularly and have not expired, and that spacers are replaced after each use the principal will delegate a staff member to regularly check the asthma emergency kits

- 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. This includes:

- mowing school grounds out of hours
- planting of a low allergen garden
- limit dust Eg: having the carpets and curtains cleaned regularly and out of hours
- examine the cleaning products used in the school and consider 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.

- 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 are to:

- 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
- Be aware that some students may experience asthma (even when previously undiagnosed) during hay fever season and prior to/during thunderstorm activity.
- 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 principal, parents and carers any concerns regarding asthma and students enrolled in the school
- Parents will be contacted whenever their child experiences an asthma attack.

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 principal 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)

FIRST AID MANAGEMENT

Follow the written first aid instructions on the student's Asthma Action/Care Plan.

If no specific and signed instructions are available, the instructions are unclear, or the person does not have an Asthma Action/Care Plan, **begin the first aid procedure immediately (as authorised by the Department of Education and Training).**

Call emergency assistance to attend (000) IF:

- **the person's asthma symptoms are severe**
- **the person suddenly stops breathing**
- **the person's asthma symptoms continue to worsen**
- **there is no Asthma Action/Care Plan for the person**
- **blue/grey reliever medication is not available**
- **you are unsure what is causing the breathing difficulty**
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Recognising an asthma attack

Mild	Moderate	Severe
Talk in sentences	Shortened sentences	Few words per breath
Cough	Persistent cough	Persistent cough
Soft wheeze	Loud wheeze	Wheeze may be absent
Minor difficulty breathing	Difficulty breathing	Gasping for breath/distress
Tightness in chest		Pale, sweaty, blue lips
Young children may complain of a "sore tummy"		Muscle exertion

Asthma First Aid

1 Sit the person upright

- Be calm and reassuring
- Do not leave them alone



2 Give 4 puffs of blue reliever puffer medication

- Use a spacer if there is one
 - **Shake** puffer
 - Put **1 puff** into spacer
 - Take **4 breaths** from spacer
- Repeat** until **4 puffs** have been taken

Remember: Shake, 1 puff, 4 breaths



3 Wait 4 minutes

- If there is no improvement, give **4 more puffs** as above



4 If there is still no improvement call emergency assistance (DIAL 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) does not work on your mobile phone, try 112



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 puffer is not available
- If you are not sure if it's asthma

Blue reliever medication is unlikely to harm, even if the person does not have asthma



To find out more contact your local Asthma Foundation
1800 645 130 | asthmaaustralia.org.au

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Translating and
Interpreting Service
131 450

Evaluation:

This policy will be reviewed as part of the school's three-year review cycle, or earlier if asthma treatment changes.

Approved by School Council May 2018

Appendices

Appendix 1:

http://www.asthmaaustralia.org.au/uploadedFiles/Content/About_Asthma_2/Resources/AF-Childcare-Plan-0412.pdf

Appendix 2:

<http://www.asthma.org.au/Portals/0/doc/Forms%20and%20Documents/Schools/2013%20School%20Camp%20and%20Excursion%20Medical%20Update%20Form%202013.pdf>

References

School Policy and Advisory Guide, Department of Education and Early Childhood Development (2011), www.education.vic.gov.au/management/governance/spag/default.htm
Australian Guidelines for the Prevention and Control of Infection in Healthcare (2010), National Health and Medical Research Council, www.nhmrc.gov.au/_files_nhmrc/publications/attachments/cd33_infection_control_healthcare_0.pdf

2013 Victorian Schools Model Policy| Version 3 , Asthma Foundation Victoria,
[http://www.asthma.org.au/Portals/0/doc/Resources%20Schools/Victorian-Schools-Model-Policy-\(V3\).pdf](http://www.asthma.org.au/Portals/0/doc/Resources%20Schools/Victorian-Schools-Model-Policy-(V3).pdf)