

Asthma Policy 2017

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 provide, as far as practical, a safe and supportive environment in which students at risk of asthma can participate equally in all aspects of the student's schooling.
- To raise awareness about asthma and the school's asthma management policy in the school community
- To ensure that each staff member has adequate knowledge about asthma and to the school's policy and procedures in responding to asthma attack.
- To ensure that staff members respond appropriately to an asthma attack by initiating appropriate treatment.

Implementation:

- Asthma attacks 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.
- Children and adults with mild asthma rarely require medication, however severe asthma sufferers may require daily or additional medication (particularly after exercise).
- Professional development will be provided annually for all staff on the nature, prevention and treatment of asthma attacks. 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
- Asthma plans will be attached to the student's records for reference.
- 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 attacks. Kits will contain 70% alcohol swabs to clean devices after use.
- The staff member in charge of first aid 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 section 4.5.7.3 of the SOTF Reference Guide – Asthma Medication Delivery Devices.
- All devices used for the delivery of asthma medication will be cleaned appropriately after each use.
- 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:

Emergency Asthma Plan if no other plan is available Step 1 Sit the person upright, stay calm and offer reassurance. Do not leave the person alone.

Date: April 2017

Ratified:

Review: April 2020

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Step 2 Without delay, give four separate puffs of a blue reliever* (Aiomir, Asmol, Epaq or Ventolin), shaking the blue reliever between each puff to reactivate it. The medication is best given one puff at a time via a spacer device. Ask the person to take four breaths from the spacer after each puff of medication. Shake the puffer between each puff and four breaths to reactivate it (and thus make it more effective). If a spacer is not available simply use the puffer itself.

Step 3 Wait four minutes.

If the person's condition suddenly deteriorates or you are very concerned, call an ambulance immediately (Dial 000).

Step 4 If there is little or no improvement repeat steps two and three.

If there is still no improvement call an ambulance immediately (Dial 000).

Continue to repeat steps two and three while waiting for the ambulance.

Evaluation:

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