

### ASTHMA POLICY

#### **1. Rationale:**

- 1.1 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.
- 1.2 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.
- 1.3 Children and adults with mild asthma rarely require medication; however severe asthma sufferers may require daily or additional medication (particularly after exercise).

#### **2. Aims:**

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

#### **3. Implementation:**

- 3.1 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.
- 3.2 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)
- 3.3 Asthma plans will be attached to the student's records for reference and classroom teachers will have a copy.
- 3.4 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.
- 3.5 The school will train staff in the administering of reliever puffers (blue canister) such as Ventolin, Airomir, Asmol or Bricanyl. Ventolin and spacer devices will be provided in all first-aid kits, including kits on excursions and camps and each classroom (Ventolin to be kept on the back of the sink ledge in Learning Centres). 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.
- 3.6 The first aid staff member will be responsible for checking reliever puffer expiry dates. Classroom teachers are to inform the staff member responsible for first aid if their classroom Ventolin is out of date or missing.
- 3.7 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 it is provided by the parents.
- 3.8 All devices used for the delivery of asthma medication will be cleaned appropriately after each use. Cleaning Guidelines:  
<http://www.education.vic.gov.au/school/principals/spag/health/Pages/asthma.aspx>
- 3.9 Care must be provided immediately for any student who develops signs of an asthma attack.
- 3.10 Children suffering asthma attacks should be treated in accordance with their asthma plan.

3.11 If no plan is available:

**Step 1:** Sit the child upright

**Step 2:** Without delay give 4 separate puffs of a blue reliever puffer – give one puff at a time via a spacer device. Ask the child to take 4 breaths from the spacer after each puff of medication.

**Step 3:** Wait 4 minutes – if there is no or little improvement repeat step 2

**Step 4:** If there is still no improvement call an ambulance immediately **DIAL 000**

#### **4. Evaluation:**

4.1 This policy will be reviewed as part of the school's three-year review cycle. This policy was passed by School Council on 17<sup>th</sup> June 2013.