

## ASTHMA POLICY 5C.5

### 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 manage asthma and asthma sufferers as effectively and efficiently as possible at school.

### Implementation

- Asthma attacks involve the narrowing of airways making it difficult to breathe. Symptoms commonly include difficulty breathing, wheezing, dry and irritating cough, tightness in the chest and difficulty speaking. Triggers include exercise, colds, smoke, pollens, cold air, deodorants, dusts etc.
- Children and adults with asthma may require daily or additional medication (particularly after exercise).
- Professional development will be provided for all staff at least **every 3 years** on the nature, prevention and treatment of asthma attacks. Such information will also be displayed appropriately around the school.
- All students with asthma must provide to the school a fully completed up to date **(annual)** Asthma Foundation Victoria's School Asthma Action Plan developed by their treating practitioner and parents.
- A summary of Asthma plans will be provided to classroom teachers and a full copy stored in the first aid room for reference.
- Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer if required) with them at school at all times.
- The school will provide, and have staff trained at least every year in the effective management of asthma including the administering of reliever puffers (blue canister) such as Ventolin, Airomir, Asmol or Bricanyl and spacer devices. At least 3 Asthma First Aid Kits will be located in a central, secure, easily accessible location and an additional Kit will be taken 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. Asthma First Aid posters will be displayed appropriately around the school.
- The delegated first aid staff member will be responsible for checking reliever puffer expiry dates and the date of Action Plans.
- All student personal asthma 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 children are to be sat down, reassured, administered 4 separate puffs of a shaken reliever puffer (blue canister) delivered via a spacer – inhaling 4 deep breaths, wait 4 minutes, if necessary administer 4 more puffs and repeat the cycle. **(As per 4 by 4 by 4 plan)** 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 suffers a first asthma episode or a severe or life-threatening asthma attack.
- The school will reduce asthma triggers by mowing grass, limiting dust and high allergen plants, maintaining air conditioners etc, ensuring students with Exercise Induced Asthma have a chance to warm up and cool down, to take a reliever medication before exercise, and to stop activity and take reliever medication if symptoms occur.

### **Evaluation**

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

This policy was last reviewed in March 2022