Wales Street Primary School

ASTHMA POLICY

Policy No. 3.7

Preamble
With 1 in 9 children and 1 in 10 adults currently diagnosed with Asthma in Australia (2009), chances are we will all come across someone with asthma in our everyday life. It is important therefore for all staff members in a school environment to be aware of asthma, its symptoms, triggers, diagnosis as well as the consequent assessment and management of an attack.

"Asthma is a disease of the airways, the small tubes which carry air in and out of the lungs. When you have asthma symptoms the muscles in the airways tighten and the lining of the airways swells and produces sticky mucus. These changes cause the airways to become narrow, so that there is less space for the air to flow into or out of your lungs" (National Asthma Council 2011)

Asthma attacks involve the narrowing of the airways, making it difficult to breathe. Symptoms of asthma commonly include cough, tightness in the chest, shortness of breath, rapid breathing, wheeze and difficulty speaking.

Many children have mild asthma with minor problems and rarely require preventative medication. However some students will need medication on a daily basis and may require additional medication at school, particularly before or after vigorous exercise.

Wales Street Primary School is proud to be an “Asthma Friendly School” that has, and is, fulfilling all criteria required to be recognised as such by the Asthma Foundation of Victoria.

Purpose
To provide efficient and effective management of asthma as is possible within the school setting.

Guidelines for Implementation:

Action Plans

All students with asthma must have an up to date (annual) written Asthma Action Plan consistent with the Asthma Foundations requirements, completed by their doctor or paediatrician. It is to be signed and dated by both doctor and parents. (A copy of these plans can be found at www.asthma.org.au)

As per School Policy advisory Guide: The Asthma Foundation Victoria’s Asthma Care Plan for Schools should be:

- completed by the student’s medical/health practitioner in consultation with the parents/guardians
• provided annually by the:
  - doctor to the parents/guardian
  - parents/guardians to the school.

The plan must include:

• the prescribed medication taken:
  - on a regular basis
  - 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.

The Office Manager will provide an annually updated list of students with asthma action plans on record to staff including specialist, aides and class teachers. Plans will also be copied for excursions such as camps and sports events.

The School Nurse will send out a request via the newsletter for an Asthma Action Plan, to the families of all known asthmatic students who do not yet present a plan to the school, after the commencement of the school year.

The Asthma Action Plans are stored in a file in the First Aid Room.

**Parental responsibility**

• Communicate any changes to their child’s asthma, or any concerns about the health of their child

• Parents of children diagnosed with Asthma are required to provide a copy of their child’s Asthma Action Plan to the School Nurse, on enrolment, at the commencement of the school year or when the diagnosis has been made

• Parents are responsible for ensuring their children are provided with their own spacer/ventolin set for use whilst the child is at school, this set is stored in first aid and utilised for any asthma attacks and brought to all excursion/camps.

**Excursions/Camps**

• Students attending school camps will be required to have a special asthma management plan (pro forma provided) for the duration of the camp.

• Students will be required to bring their own spacer/ventolin set for use at camp/excursions if not previously supplied to the school for individual use.
• First Aid Kits, will be carried on all buses travelling to and from excursions and camps. An asthma emergency kit card will also be provided for clear instructions in the management of an asthma attack, and the use of spacers and medications. Kits will contain 70% alcohol swabs for cleaning post use.

Staff education

• Professional development sessions will continue to be provided to all staff on the nature, prevention, assessment and treatment of asthma attacks, as per the Asthma Friendly Schools Program.
• The general school, student and parent community will continue to be regularly briefed re asthma education and recommendations via the weekly school newsletter, by the School Nurse.
• Posters detailing asthma First Aid are prominent about the school.

First Aid

• The first aid room provides and maintains 4 asthma first aid emergency kits, and supplies ventolin/spacer sets in all their general first aid bags used for any excursion/camps.
• Spacer sets that are provided by the school for use in emergencies are once only usage - they cannot be shared between students.
• Children’s individual ventolin/spacer sets are stored, clearly labelled and accessible in the First aid room.
• The School nurse will be responsible for checking all reliever expiry dates on the child’s own spacer/ventolin set and in all first aid kits.
• Children suffering asthma will be treated immediately according to their asthma action plan.
• If no Action Plan is available for the student then the recommended First Aid for Asthma, re the Asthma Foundation, shall be followed.
• Parents will be contacted if their child suffers an asthma attack that requires more than one cycle of ventolin (4puffs by 4 breaths) . If one cycle is required only and if the child is stable and asthma free, a written note will be sent home with the child. All ventolin given is noted in the Medication Log book and the Injury/Illness Record book.

Evaluation:

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