

ASTHMA POLICY

PURPOSE

To ensure that Hawthorn West Primary School appropriately supports students diagnosed with asthma.

OBJECTIVE

To explain to Hawthorn West Primary School parents/carers, staff and students the processes and procedures in place to support students diagnosed with asthma.

SCOPE

This policy applies to:

- all staff, including casual relief staff, contractors and volunteers
- all students who have been diagnosed with asthma or who may require emergency treatment for asthma and their parents/carers.

POLICY

Asthma

Asthma is a long term lung condition. People with asthma have sensitive airways in their lungs which react to triggers, causing a 'flare-up'. In a flare-up, the muscles around the airway squeeze tight, the airways swell and become narrow and there is more mucus. This makes it hard to breathe. An asthma flare-up can come on slowly (over hours, days or even weeks) or very quickly (over minutes). A sudden or severe asthma flare-up is sometimes called an asthma attack.

Symptoms

Symptoms of asthma can vary over time and often vary from person to person. The most common asthma symptoms are:

- breathlessness
- wheezing (a whistling noise from the chest)
- tight feeling in the chest
- persistent cough

Symptoms often occur at night, early in the morning or during/just after physical activity. If asthma is well controlled, a person should only have occasional asthma symptoms.

Triggers

A trigger is something that sets off or starts asthma symptoms. Everyone with asthma has different triggers. For most people with asthma, triggers are only a problem when asthma is not well controlled with medication. Common asthma triggers include:

- exercise
- colds/flu

- smoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires)
- house dust mites
- pollens
- chemicals such as household cleaning products
- food chemicals/additives
- laughter or emotions, such as stress
- weather changes such as thunderstorms and cold, dry air
- moulds
- animals such as cats and dogs
- deodorants (including perfumes, aftershave, hair spray and aerosol deodorant sprays)
- certain medications (including aspirin and anti-inflammatories)

Asthma management

If a student diagnosed with asthma enrolls at Hawthorn West Primary School:

1. Parents/carers must provide the school with an [Asthma Action Plan](#) which has been completed by the student's medical practitioner. The plan must outline:
 - the prescribed medication taken by the student and when it is to be administered, for example as a pre-medication to exercise or on a regular basis
 - emergency contact details
 - the contact details of the student's medical practitioner
 - the student's known triggers
 - the emergency procedures to be taken in the event of an asthma flare-up or attack.
2. Parents/carers should also provide a photo of the student to be included as part of the student's Asthma Action Plan.
3. Hawthorn West Primary School will keep all Asthma Action Plans:
 - In the First aid room, in classrooms
4. School staff may also work with parents/carers to develop a Student Health Support Plan which will include details on:
 - how the school will provide support for the student
 - identify specific strategies
 - allocate staff to assist the student

Any Student Health Support Plan will be developed in accordance with Hawthorn West Primary School's Healthcare Needs Policy.]

5. If a student diagnosed with asthma is going to attend a school camp or excursion, Hawthorn West Primary School parents/carers are required to provide any updated medical information.
6. If a student's asthma condition or treatment requirements change, parent/carers must notify the school and provide an updated Asthma Action Plan.
7. School staff will work with parents/carers to review Asthma Action Plans (and Student Health Support Plans) once a year.

Student asthma kit

All students diagnosed with asthma are required to have a student asthma kit at school which contains:

- their own prescribed reliever medication labelled with the student's name
- their spacer

Student asthma kits will be stored in the First Aid room. Some senior students keep their asthma medication in their school bags.

Asthma emergency response plan

If a student is:

- having an asthma attack
- difficulty breathing for an unknown cause, even if they are not known to have asthma

School staff will endeavour to follow the Asthma First Aid procedures outlined in the table below. School staff may contact Triple Zero “000” at any time.

Step	Action
1.	<p>Sit the person upright</p> <ul style="list-style-type: none"> • Be calm and reassuring • Do not leave them alone • Seek assistance from another staff member or reliable student to locate the student’s reliever, the Asthma Emergency Kit and the student’s Asthma Care Plan (if available). • If the student’s action plan is not immediately available, use the Asthma First Aid as described in Steps 2 to 5.
2.	<p>Give 4 separate puffs of blue or blue/grey reliever puffer:</p> <ul style="list-style-type: none"> • Shake the puffer • Use a spacer if you have one • Put 1 puff into the spacer • Take 4 breaths from the spacer <p>Remember – Shake, 1 puff, 4 breaths</p>
3.	<p>Wait 4 minutes</p> <ul style="list-style-type: none"> • If there is no improvement, give 4 more separate puffs of blue/grey reliever as above (or give 1 more dose of Bricanyl or Symbicort inhaler)
4.	<p>If there is still no improvement call Triple Zero “000” and ask for an ambulance.</p> <ul style="list-style-type: none"> • Tell the operator the student is having an asthma attack • Keep giving 4 separate puffs every 4 minutes until emergency assistance arrives (or 1 dose of Bricanyl or Symbicort every 4 minutes – up to 3 doses of Symbicort)
5.	<p>If asthma is relieved after administering Asthma First Aid, stop the treatment and observe the student. Notify the student’s emergency contact person and record the incident</p>

Staff will call Triple Zero “000” immediately 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 reliever is not available
- if they are not sure if it is asthma
- if the person is known to have anaphylaxis

Training for staff

Hawthorn West Primary School will arrange the following asthma management training for staff:

Staff	Completed by	Course	Provider	Cost	Valid for
Group 1 General Staff	School staff with a direct teaching role with students affected by asthma or other school staff directed by the principal after conducting a risk assessment.	Asthma first aid management for education staff (non-accredited) One hour face-to-face or online training.	Asthma Australia	Free to all schools	3 years
Group 2 Specific Staff	Staff working with high risk children with a history of severe asthma, or with direct student wellbeing responsibility, (including nurses, PE/sport teachers, first aid and school staff attending camp)	<i>Course in Management of Asthma Risks and Emergencies in the Workplace 22282VIC</i> (accredited) OR <i>Course in Emergency Asthma Management 10392NAT</i> (accredited)	Any RTO that has this course in their scope of practice	Paid by Hawthorn West Primary School	3 years

Hawthorn West Primary School will also conduct an annual briefing for staff on: the procedures outlined in this policy

- the causes, symptoms and treatment of asthma
- identities of the students diagnosed with asthma
- how to use a puffer and spacer
- the location of:
 - the Asthma Emergency Kits
 - asthma medication which has been provided by parents for student use.

Hawthorn West Primary will also provide this policy to casual relief staff and volunteers who will be working with students, and may also provide a briefing if the principal decides it is necessary depending on the nature of the work being performed.

Asthma Emergency Kit

Hawthorn West Primary will provide and maintain at least two Asthma Emergency Kits. One kit will be kept on school premises in the First Aid room and one will be a mobile kit for activities such as:

- yard duty
- camps and excursions.

Hawthorn West Primary School has additional kits.

The Asthma Emergency Kit will contain:

- at least 1 blue or blue/grey reliever medication such as Airomir, Admol or Ventolin
- at least 2 spacer devices (for single person use only) to assist with effective inhalation of the blue or blue/grey reliever medication (Hawthorn West Primary will ensure spare spacers are available as replacements). Spacers will be stored in a dust proof container.
- clear written instructions on Asthma First Aid, including:
 - how to use the medication and spacer devices
 - steps to be taken in treating an asthma attack
- A record sheet/log for recording the details of an asthma first aid incident, such as the number of puffs administered [see template record sheet in “additional resources”].

Millie Angliss the First Aid Officer will monitor and maintain the Asthma Emergency Kits. They will:

- ensure all contents are maintained and replaced where necessary
- regularly check the expiry date on the canisters of the blue or blue/grey reliever puffers and place them if they have expired or a low on doses
- replace spacers in the Kits after each use (spacers are single-person use only)
- Used spacers are kept for use at the school by the child that has used them

The blue or blue/grey reliever medication in the Asthma Emergency Kits may be used by more than one student as long as they are used with a spacer. If the devices come into contact with someone’s mouth, they will not be used again and will be replaced.

After each use of a blue or blue/grey reliever (with a spacer):

- remove the metal canister from the puffer (do not wash the canister)
- wash the plastic casing
- rinse the mouthpiece through the top and bottom under running water for at least 30 seconds
- wash the mouthpiece cover
- air dry then reassemble
- test the puffer to make sure no water remains in it, then return to the Asthma Emergency Kit.

Management of confidential medical information

Confidential medical information provided to Hawthorn West to support a student diagnosed with asthma will be:

- recorded on the student’s file
- shared with all relevant staff so that they are able to properly support students diagnosed with asthma and respond appropriately if necessary.

Communication plan

This policy will be available on Hawthorn West Primary School’s website so that parents and other members of the school community can easily access information about Hawthorn West Primary School’s asthma management procedures.

Epidemic Thunderstorm Asthma

Hawthorn West Primary School will be prepared to act on the warnings and advice from the Department of Education and Training when the risk of epidemic thunderstorm asthma is forecast as high.

FURTHER INFORMATION AND RESOURCES

- Asthma Australia: [Resources for schools](#)
- School Policy and Advisory Guide:
 - [Asthma](#)
 - [Asthma Attacks: Treatment](#)
 - [Asthma Emergency Kits](#)

REVIEW CYCLE AND EVALUATION

This policy was last updated in 2019 and is scheduled for review in 2020.

Hawthorn West Primary Asthma Trigger Minimisation

Triggers	
Cigarette Smoke	<p>From 13 April 2015, smoking is banned within four metres of an entrance to all primary and secondary schools in Victoria, and within the school grounds, under an amendment to the <i>Tobacco Act 1987</i>.</p> <p>It is a legislative requirement that each school installs suitable 'No smoking' signs at all entrances to the school grounds.</p> <p>The smoking ban applies to:</p> <ul style="list-style-type: none"> • anyone present on school premises during and after school hours including students, teachers, contractors, parents/guardians or the wider community, such as sporting groups. • all activities that take place on school premises including pre-schools, kindergartens, outside school hours care, cultural, sporting or recreational activities and school fetes.
Animal Allergens (dander and urine)	<p>Classrooms where animals are kept especially birds and furred animals should be cleaned regularly including the animal's housing.</p> <p>Furred animals should be regularly bathed, unless frequent bathing puts the animal's health at risk; ie ferrets and native animals.</p> <p>Urine, faeces and saliva should be removed and cleaned immediately.</p> <p>Consider only having low risk animals for class room pets, such as; Fish, lizards and turtles.</p> <p>Animals in classrooms with highly sensitive students should be rehomed within the school.</p>
Dust and Dust Mites	<p>Carpets and curtains should be vacuumed regularly and outside of school hours.</p> <p>Turn on fans, air conditioning and heaters out of hours when being used for the first time after a long period of non-use.</p>

Moulds	<p>Clean all bathrooms and wet rooms regularly and air out to dry any moisture in the air.</p> <p>In areas with high humidity, schools could invest in purchasing a dehumidifier, or moisture collectors.</p> <p>Remove any rugs, leaves or fabric that contain mould or mildew.</p>
Pollens and grasses	<p>Lawns mowed outside of school hours, and plant low allergen gardens.</p> <p>During pollen season, the principal should nominate someone to check the pollen count, available on The Asthma Foundation of Victoria website, and students sensitive to pollen should be encouraged to stay indoors.</p>
Pollution	<p>The principal should nominate a staff member to monitor newspapers and news outlets for daily outdoor air quality reports.</p> <p>Students with asthma should stay indoors on smoggy and dusty days; air conditioners should be used to filter the air.</p>
Chemicals	<p>Avoid using products that can irritate the airways – cleaning products, paints, varnishes, pesticides, and chemical based soaps.</p> <p>Maintenance that may require the use of chemicals, such as painting, should be conducted during school holidays.</p>
Aerosols	<p>Encourage the use of roll on deodorants for staff and students and encourage staff and students not to wear perfume and cologne.</p> <p>Use non aerosol based pest control products, for example insect tape, Venus fly traps.</p>
Smoke (any, including; bushfire, vegetation reduction)	<p>Schools should make sure all heaters and gas appliances are vented correctly and inspected every year.</p> <p>Students should stay indoors with windows closed and vents blocked if hazard-reduction burns or bushfire smoke is in the school area and avoid physical activity on high-pollution days or if smoke is in the air.</p>

Medications	<p>Schools should not store or administer analgesics such as aspirin and paracetamol as a standard first aid strategy as they can mask signs and symptoms of serious illness or injury.</p> <p>Staff members should be advised and instructed not to give students any medication including; ibuprofen, aspirin and naproxen from their personal supply.</p>
Food Chemicals / Additives	<p>Make sure food product sold in the canteen or cooked in cooking classes at school do not contain the below additives;</p> <ul style="list-style-type: none"> • sulphites – 220–228 • tartrazine – 102 • other food colourings – 107, 110, 122–129, 132, 133, 142, 151, 155 • monosodium glutamate – 620–625.
Exercise	<p>Students with exercise induced asthma should follow the below management plan prior to any physical activity:</p> <p>Before Exercise:</p> <ul style="list-style-type: none"> • Blue or blue/grey reliever medication to be taken by student 15 minutes before exercise or activity(if indicated on the students' Asthma Action Plan) • student to undertake adequate warm up activity <p>During Exercise:</p> <ul style="list-style-type: none"> • if symptoms occur, student to stop activity, take blue or blue/grey reliever medication, only return to activity if symptom free • if symptoms reoccur, student to take blue or blue/grey reliever medication and cease activity for the rest of the day. This is known as 'two strikes and out'. <p>After Exercise:</p> <ul style="list-style-type: none"> • ensure cool down activity is undertaken • be alert for symptoms <p>Students should not be pressured to exercise when they are unwell.</p>

Colds and Flu	<p>Encourage staff and parents of students, not to attend school when they have a cold or flu. Students should be encouraged to cover their mouth when sneezing or coughing and wash their hands.</p> <p>Where children with asthma have a cold or the flu and attend school, their reliever medication should be stored close to the student.</p> <p>Students should not be pressured to exercise when they are unwell.</p>
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In-school settings

Classrooms	
1.	Keep a copy of the student's Individual Asthma Risk Minimisation Plan in the classroom. Be sure the Asthma Action Plan is easily accessible even if the student's reliever medication is kept in another location.
2.	An Admin. staff member should inform casual relief teachers, specialist teachers and volunteers of the names of any students diagnosed with asthma, the location of each student's Individual Asthma Risk Minimisation Plan and reliever medication, the school's Asthma Management Policy, and each individual person's responsibility in managing an incident. ie seeking a trained staff member.
3.	Limit dust, for example having the carpets and curtains cleaned regularly and out of hours
4.	Examine the cleaning products used in the school and their potential impact on students with asthma.
5.	Conduct maintenance that may require the use of chemicals, such as painting, during school holidays
6.	Turn on fans, air conditioning and heaters out of hours when being used for the first time after a long period of non-use.
7.	Make teachers aware of the importance of not providing students, whose asthma is triggered by certain medications, with medication, particularly; ibuprofen, naproxen and aspirin.

Yard	
1.	Sufficient school staff on yard duty must be trained in the administration of reliever medication to be able to respond quickly to an asthma attack if needed.
2.	The reliever medication and each student's Individual Asthma Risk Minimisation Plan are easily accessible from the yard, and staff should be aware of their exact location.
3.	Schools must have a Communication Plan in place so the student's medical information and medication can be retrieved quickly if an asthma attack occurs in the yard. This may include options of all yard duty staff carrying emergency cards in yard-duty bags. All staff on yard duty must be aware of the school's Emergency Response Procedures and how to notify the general office/first aid team of an asthma attack in the yard.
5.	Students with asthma triggered by pollens should be encouraged to stay away from flowering plants.
6.	Mow school lawns out of hours.
7.	Plant a low allergen garden.

Special events (e.g. sporting events, incursions, class parties, etc.)	
1.	Sufficient school staff supervising the special event must be trained in the administration of an reliever medication to be able to respond quickly to an asthma attack if required.

Out-of-school settings

Field trips/excursions/sporting events	
1.	Sufficient school staff supervising the special event must be trained in the administration of reliever medication and be able to respond quickly to an asthma attack if required.
2.	A school staff member or team of school staff trained in the recognition of asthma and the administration of reliever medication must accompany any student diagnosed with asthma on excursions.

3.	The reliever medication and a copy of the Individual Asthma Risk Minimisation Plan for each student diagnosed with asthma should be easily accessible and school staff must be aware of their exact location.
4.	For each excursion etc, a risk assessment should be undertaken for each individual student attending who is diagnosed with asthma. The risks may vary according to the number of students with asthma attending, the nature of the excursion/sporting event, size of venue, distance from medical assistance, the structure of excursion and corresponding staff-student ratio. All school staff members present during the excursion need to be aware of the identity of any students attending who are diagnosed with asthma and be able to identify them by face.
5.	The school should consult parents of students with asthma in advance to discuss issues that may arise.
6.	Parents may wish to accompany their child on excursions. This should be discussed with parents as another strategy for supporting the student who is diagnosed with asthma.
7.	Prior to the excursion taking place school staff should consult with the student's parents and medical practitioner (if necessary) to review the student's Individual Asthma Risk Minimisation Plan to ensure that it is up to date and relevant to the particular excursion activity.

Camps and remote settings

	Conduct a risk assessment and develop a risk management strategy for students diagnosed with asthma. This should be developed in consultation with parents of students diagnosed with asthma and camp owners/operators prior to the camp dates.
	Parents should provide the school with a completed School Camp and Excursion Medical Update Form, outlining any additional asthma medication the student needs to take in the prevention of asthma, including; <ul style="list-style-type: none"> • Dose • Time to be take.
	Parents to provide enough medication (including preventer medication) for the student to last the period of the camp.

	<p>Consult with parents of students diagnosed with asthma and the camp owner/operator to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an asthma attack should it occur. If these procedures are deemed to be inadequate, further discussions, planning and implementation will need to be undertaken.</p>
	<p>The student's reliever medication, Individual Asthma Risk Minimisation Plan, including the Asthma Action Plan and a mobile phone must be taken on camp. If mobile phone access is not available, an alternative method of communication in an emergency must be considered, e.g. a satellite phone. All staff attending camp should familiarise themselves with the students' Individual Asthma Risk Minimisation Plans AND plan emergency response procedures for asthma prior to camp.</p>
	<p>Prior to the camp taking place school staff should consult with the student's parents to review the students Individual Asthma Risk Minimisation Plan to ensure that it is up to date and relevant to the circumstances of the particular camp.</p>
	<p>School staff participating in the camp should be clear about their roles and responsibilities in the event of an asthma attack. Check the emergency response procedures that the camp provider has in place. Ensure that these are sufficient in the event of an asthma attack and ensure all school staff participating in the camp are clear about their roles and responsibilities.</p>
	<p>Take a Asthma Emergency Kit on a school camp, even if there is no student diagnosed with asthma, as a back-up device in the event of an emergency.</p>
	<p>Reliever medication to be kept in the first aid kit and including this as part of the Emergency Response Procedures.</p>
	<p>The reliever medication should remain close to the students and school staff must be aware of its location at all times.</p>
	<p>The reliever medication should be carried in the school first aid kit; however, students, particularly adolescents, to carry their own medication on camp. Remember that all school staff members still have a duty of care towards the student even if they do carry their own reliever medication.</p>