Maryborough Education Centre



KINDNESS RESPECT

Asthma Policy

PURPOSE

To ensure that Maryborough Education Centre (MEC) appropriately supports students diagnosed with asthma.

OBJECTIVE

To explain to MEC 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
- 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

- colds/flu
- weather changes such as thunderstorms and cold, dry air
- moulds
- animals such as cats and dogs
- deodorants (including perfumes, aftershaves, hair spray and aerosol deodorant sprays)
- certain medications (including aspirin and anti-inflammatories).

Asthma management

If a student diagnosed with asthma enrols at MEC:

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. MEC will keep all Asthma Action Plans:
 - in sickbay
 - recorded on XUNO
- 3. 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
 - identified specific strategies
 - allocated staff to assist the student.

Any Student Health Support Plan will be developed in accordance with MEC's Healthcare Needs Policy.

- 4. If a student diagnosed with asthma is going to attend a school camp or excursion, parents/carers are required to provide any updated medical information.
- 5. If a student's asthma condition or treatment requirements change, parent/carers must notify the school and provide an updated Asthma Action Plan.
- 6. 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 (if they use one).

Student asthma kits will be stored in the classroom or on their person while at school, as age and ability appropriate.

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.	Sit the person upright:
	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 Action 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.	Give 4 separate puffs of blue or blue/grey reliever puffer:
	Shake the puffer.
	Use a spacer if you have one.
	Put 1 puff into the spacer.
	 Take 4 breaths from the spacer.
	Remember – Shake, 1 puff, 4 breaths.
3.	Wait 4 minutes:
	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.	If there is still no improvement call Triple Zero "000" and ask for an ambulance:
	 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.	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.

Staff will call Triple Zero "000" immediately if:

- the person is not breathing
- the person's asthma suddenly becomes worse or is not improving
- the person is having an asthma attack and a reliever is not available
- they are not sure if it is asthma
- the person is known to have anaphylaxis.

Training for staff

MEC will arrange the following asthma management training for staff:

Staff	Completed by	Course	Provider	Cost	Valid for
Group 1	School staff with a	Asthma first aid	Asthma	Free to all	3 years.
General	direct teaching role with		Australia.	schools.	
Staff	students affected by	education staff			
	asthma or other school	(non-accredited)			
	staff directed by the	One hour face-			
	principal after	to-face or online			
	conducting a risk	training.			

	assessment.				
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).	Course in Management of Asthma Risks and Emergencies in the Workplace 22282 VIC (accredited) OR Course in Emergency Asthma Management 10392NAT (accredited).	Any RTO that has this course in their scope of practice.	Paid by MEC.	3 years.

MEC 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
 - o asthma medication which has been provided by parents for student use.

MEC 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

MEC will provide and maintain at least two Asthma Emergency Kits. Kits will be kept on school premises at sickbay and staff rooms and one will be a mobile kit for activities such as:

- yard duty
- camps and excursions.

The Asthma Emergency Kit will contain:

- at least 1 blue or blue/grey reliever medication such as Airomir, Admol or Ventolin
- at least 1 spacer devices to assist with effective inhalation of the blue or blue/grey reliever medication. 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.

The First aid Coordinator 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).

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 MEC to support a student diagnosed with asthma will be:

- recorded on the student's file
- shared with 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 MEC's website so that parents and other members of the school community can easily access information about MEC's asthma management procedures.

Epidemic Thunderstorm Asthma

MEC 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: <u>Resources for schools</u>
- School Policy and Advisory Guide:
 - o Asthma
 - Asthma Attacks: Treatment
 - o Asthma Emergency Kits

REVIEW PERIOD

This policy was last updated on Wednesday 29th July 2020 and is scheduled for review as part of the school's 3-year review cycle.

This policy was last ratified by School Council on Wednesday 29th July 2020.

Signed:

Paul Rumpff

School Council President

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Date 1/08/2020