



ASTHMA POLICY

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).
- All students with asthma must provide to the school a fully completed up to date Asthma Foundation Victoria's School Asthma Action Plan developed by their treating practitioner and parents.
- Asthma plans will be provided to classroom teachers and 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 in the effective management of asthma including the administering of reliever puffers (blue canister) such as Ventolin, Airomir, Asmol or Bricanyl and spacer devices. First Aid Kits will have additional reliever puffers and spacers and will be taken on excursions and camps.
- 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 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 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. 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 an asthma attack.
- Our school has registered as an asthma friendly school in the past and is in the process of renewing registration – www.asthmafriendlyschools.org.au
- 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 four year policy review cycle. (Ratified: Dec 2012)