

## 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 make, as far as possible, Wantirna Primary School a safe and supportive environment in which students with asthma can participate equally in all aspects of schooling.
- To provide competent and timely support and care to students with asthma while in the care of the school.
- To ensure students with asthma have a written asthma management plan in place and it is kept updated.
- To clarify the respective roles and responsibilities of parents/carers and staff

### **Implementation:**

- Asthma attacks involve the narrowing of airways making it difficult to breathe. Symptoms commonly include difficulty breathing, wheezy breathing, dry and irritating cough, tightness in the chest and difficulty speaking.
- Children and adults with mild asthma rarely require medication, however severe asthma sufferers may require daily or additional medication (particularly before or after exercise)
- Professional development will be provided for all staff on the nature, prevention and treatment of asthma attacks. Such information will also be displayed on the staffroom and classroom walls.
- All students with asthma must have an up to date (annual) written asthma management plan consistent with Asthma Victoria's requirements completed by their doctor or paediatrician. The Asthma plans will be maintained in the school's asthma register. Appropriate asthma plan proformas are available at [www.asthma.org.au](http://www.asthma.org.au)
- Asthma plans will be displayed in the First Aid Room, Staff Room and Office.
- Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including spacer) with them at school at all times. Disposable spacers will be kept for emergencies both at school and in the first aid kits used for camps and excursions.
- All staff should ideally be trained in the administering of, reliever puffers such as Ventolin, Airomir, Asmol or Bricanyl and the effective use of spacer devices. 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. The delegated first aid staff member will be responsible for checking reliever puffer expiry dates.
- A nebuliser pump will not be used by the school staff unless a student's asthma management plan recommends the use of such a device, and only then if the plan includes and complies with the DET's Reference Guide – Asthma Medication Delivery Devices.
- 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 delivered via a spacer – inhaling 4 deep breaths per puff, 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.

**Evaluation**

Evaluation of this policy will be carried out by the Education Committee as part of the cyclic review process in three years’ time or beforehand if a significant need arises.

<b>Date Implemented</b>	2017
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<b>Approved By</b>	School Council
<b>Approval Authority (Signature &amp; Date)</b>	<i>Sue Ferg</i> <i>ADGrisold</i>
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<b>Responsible for Review</b>	
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