

Asthma Management Policy

Asthma

Asthma is a chronic health condition affecting approximately 10% of Australian children and teenagers. Asthma is one of the most common reasons for child admissions to hospital and days missed at school. Asthma is a narrowing of the small air passages in the lungs. The narrowing happens because the air passages become swollen and inflamed, causing wheezing, coughing and problems with breathing. 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)
- changes in the weather such as thunderstorms and cold, dry air
- house dust mites
- moulds
- animals such as cats and dogs
- pollens
- deodorants including perfumes, aftershaves, hairspray and aerosol sprays
- fragrance products including candles, air fresheners, incense etc
- chemical products such as household cleaners
- food/chemical additives
- certain medications (aspirin & anti-inflammatory)
- laughter or emotions, such as stress

The two types of medication used by people with asthma are:

- Relievers such as Ventolin (most common), Bricanyl, Asmol and Airomir. These help during an attack and act quickly.
- *Preventers* such as Becotide, Intal, Becloforte, Flixotide, Tilade, Pulmicort. These help prevent attacks from happening and are usually inhaled.

Thunderstorm Asthma

Thunderstorm asthma is a form of asthma that is triggered by an uncommon combination of high pollens (usually late spring to early summer) and a certain kind of thunderstorm.

The College will be aware of forecast thunderstorms in the pollen season particularly on days with a HIGH or EXTREME pollen count. Students will be advised to remain indoors with doors and windows closed until the storm front has passed. On days of HIGH or EXTREME pollen counts, asthma and hay fever sufferers will be advised to remain indoors during recess and lunch.

Asthma Management

Parents and Carers will:

- Inform the school if their child has been diagnosed with asthma upon enrolment.
- Read the school's Asthma Management Policy.
- Read the school's Asthma Health Support and Risk Minimisation Plan.
- Provide the school with an Asthma Action Plan which has been completed by the student's medical practitioner and ensure that it is updated annually and that it is uploaded to their child's medical profile.
- Ensure that their child's medical profile is up to date prior to excursions and camps.
- Ensure that their child is self-managing their Asthma correctly and that the child carries their reliever medication and spacer at all times.
- Promptly communicate all medical and health information relevant to their child, to the Health Centre Coordinator and staff of the school.
- Communicate any changes to their child's asthma, or any concerns about the health of their child.

The Principal/Health Centre Coordinator will:

- Provide Asthma education and first aid training for staff as required.
- Direct parents and carers of students with Asthma to the College website to access a copy of the school's Asthma Management Policy.
- Identify students with Asthma during the enrolment process and provide parents and carers with a blank Asthma plan to be completed and signed by the child's medical practitioner and returned to the school.
- Where possible, ensure that all students with Asthma have a current written Asthma plan (must be updated at least annually) and uploaded to their medical profile.
- Ensure that all staff are aware of the Asthma first aid procedure which is outlined at the twice-yearly briefings.
- Ensure adequate provision and maintenance of Asthma emergency kits for the school. Each Asthma emergency kit contains reliever medication, two spacer devices, and instructions outlining the first aid procedure.
- Ensure that reliever medications within the Asthma emergency kits are replaced regularly and have not expired, and that disposable spacers are replaced after use.
- Identify and minimize, where possible, triggers of Asthma symptoms for students.
- Ensure that students with Asthma are not discriminated against in any way.
- Ensure that students with Asthma can participate in all activities safely and to their fullest abilities.

• Ensure that the College's Asthma Health Support and Risk Minimisation Plan is reviewed regularily.

Staff will:

- Be aware of the school's Asthma Management Policy.
- Be aware of the school's Asthma Health Support and Risk Minimisation Plan.
- Be aware of the asthma first aid procedure.
- Be aware of how to locate a list of students with Asthma.
- Attend the staff briefing on Asthma twice a year. Staff are briefed on
 - the procedures outlined in this policy
 - the causes, symptoms and treatments of Asthma
 - the students that are diagnosed with Asthma
 - how to use a puffer and spacer
 - the location of the Asthma Emergency Kits
- Attend Asthma education and training sessions when required.
- Be aware of where to locate Asthma emergency kits. Spacers are a single use device and must be disposed of once used.
- Identify and minimize, where possible, triggers of Asthma symptoms for students.
- Ensure that students with Asthma are not discriminated against in any way.
- Ensure that students with Asthma can participate in activities safely and to their fullest abilities.
- Promptly communicate to the Principal, parents and carers any concerns regarding Asthma and students enrolled in the school.
- Ensure that they have reviewed students medical profiles prior to any excursion or camp.
- Avoid using fragrance products in classrooms or office spaces. Fragrance products include candles, air fresheners including plug in devices, incense and essential oils.

Students will:

- Immediately inform staff if they experience Asthma symptoms.
- Inform staff if they have self-administered any Asthma medication.
- Carry Asthma medication and a spacer with them at all times (if self-managing their Asthma).
- Avoid using aerosol sprays, perfumes etc in confined spaces.

Asthma Emergency Response Plan

If a student:

- is having an Asthma attack
- is having difficulty breathing for an unknown cause, even if they are not known to have Asthma
- doesn't have a Asthma Action Plan

School staff will endeavour to follow the Asthma First Aid procedures outlined 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 Repeat so 4 puffs have been given in total
3.	Wait 4 minutes If there is no improvement, given 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 give 1 more 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 preson 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.

Asthma Emergency Kits

Sacred Heart Collge will provide and maintain Asthma Emergency Kits. The kits are located

• All staff areas (28 locations around the College)

- All Yard Duty Bags
- All portable First Aid Kits

The Asthma Emergency Kit will contain:

- a blue/grey reliever medication such as Asmol, Zempreon or Ventolin
- at least two spacer devices (for single person use only) to assist with effective inhalation of the reliever medication. Reliever medication and spacers are stored in Blue Medical pouches.
- Asthma Australia's 4 steps of Asthma First Aid Instruction Sheet.

The Health Centre Coordinator or First Aid Officers will monitor and maintain the Asthma Emergency Kits. They will:

- ensure all contents are maintained and replaced when necessary
- regularly check the expiry date on the canisters of the reliever puffers and replace them if they have expired or are low on doses.
- replace spacers in the kits after each use (spacers are single person use only)
- dispose of any previously used spacers

The reliever medication in the Asthma Emergency Kits may be used by more than one student as long as they are used with a spacer. The plastic canister is cleaned between students. If the device comes into contact with someone's mouth, they will not be used again and will be replaced.

After each use of a 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.

Ratified By: Principal – Dr Darren Egberts

Signature:

Date:

Version	Comments	Date	Next	Author	Approved
		Released	Review		
1		Dev 2000			
2		Sept 2022	Aug 2023	Health	DP
				Centre	Wellbeing
				Coordinator	
3	Updated to reflect need for staff to be	May 2023	May 2024	Health	Director
	aware of using aerosols and fragranced			Centre	of Staff
	candles etc			Coordinator	