RATIONALE:
Asthma affects up to one in four primary aged children, one in seven teenagers and one in ten adults. It is important for all staff members to be aware of asthma, its symptoms and triggers, and the management of asthma in a school environment.

AIM:
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, wheezy breathing, dry and irritating cough, tightness in the chest and difficulty speaking.
- Care must be provided immediately for any student who develops signs of an asthma attack.
- Children and adults with mild asthma rarely require medication; however severe asthma sufferers may require daily or additional medication (particularly 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 first aid room wall.
- 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. Appropriate Asthma Plan pro formas are available at www.asthma.org.au
- Children suffering asthma attacks should be treated in accordance with their asthma plan.
- Parents/care givers are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer) with them at school at all times.
- The school will provide and have staff trained in the administering of, reliever puffers (blue canister) such as Ventolin, Asmol and spacer devices in all first aid kits, including kits on excursions and camps. 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. Kits will contain 70% alcohol swabs.
- 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 Victorian Government School’s Reference Guide – Asthma Medication Delivery Devices.
- All devices used for the delivery of asthma medication will be cleaned appropriately after each use and routinely each month including student’s own devices.
- All spacers are individually used for only the specific student. Once a school supplied spacer has been used by a student it must be labelled with their name and parents/care givers must replace or pay for a new device.
- 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 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.
- Dust is kept to a minimum through the daily cleaning and regular dusting process as undertaken by our cleaning contractors.
- The mowing of lawns will be undertaken in consideration of weather conditions and will occur whilst students are in class.
- Camp Asthma forms will be sent out 2 weeks prior to any camp. These need to be returned to school by the due date before camp. Any student with Asthma that does not return the completed Camp Asthma form will not be able to attend the camp. These forms provide us with the most current health information of the child with asthma prior to leaving for camp.
EVALUATION:

This policy shall be reviewed as part of the ongoing policy and process review.

REFERENCES:
The Victorian Schools Asthma Policy’ revised January 2010
School Asthma Action Plan
Camp Asthma form
Asthma Management Plan
Findon First Aid Policy
Findon Medication Policy
www.asthma.org.au