RATIONAL

- 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, 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 after exercise).
- Professional development will be provided annually for all staff on the nature, prevention and treatment of asthma attacks. Such information will also be displayed in the First Aid room and within classrooms.
- 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 Management Plans proformas are available at www.asthma.org.au or from the First Aid room.
- Asthma plans will be:
  - stored in a folder in the First Aid room;
  - placed within the Attendance Roll in case of an attack in the classroom and
  - Placed within the yellow folder in the classroom.
- Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer) with them at school at all times.
- 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 Management Plan.
- If no plan is available:
  - every effort must be made to contact the parent / guardian
  - children are to be sat down and reassured
  - If the child continues to show symptoms then the Staff member administers 4 puffs of the child’s 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.
- Parents will be contacted whenever their child suffers an asthma attack.

**EVALUATION**

This policy will be reviewed in accordance with the school improvement plan and policy timeline.
References: Asthma Australia