

Asthma Policy



Help for non-English speakers

If you need help to understand this policy, please contact the school on 9393 5800

Purpose

- To ensure Bayside P-12 College supports students diagnosed with asthma.
- To ensure the school complies with DET policy and guidelines in the management of asthma.

Definition

"Asthma is a disease of the airways, the small tubes which carry air in and out of the lungs. When you have asthma symptoms the muscles in the airways tighten and the lining of the airways swells and produces sticky mucus. These changes cause the airways to become narrow, so that there is less space for the air to flow into an out of your lungs." (National Asthma Council 2011)

Symptoms of asthma may include, but are not limited to shortness of breath, wheezing (a whistling noise from the chest), tightness in the chest, a dry, irritating, persistent cough. Symptoms vary from person to person.

Triggers can include exercise, colds/flu, smoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires), weather changes, dust and dust mites, moulds, pollens, animals, chemicals, deodorants (including perfumes, after-shaves, hair spray and deodorant sprays), foods and additives, certain medications (including aspirin and anti-inflammatories) and emotions.

Implementation

- The school has developed a mandatory prerequisite Health Care Needs Policy.
- For each student diagnosed with asthma, a written Asthma Care Plan and a Student Health Support Plan must be completed by the student's medical/health practitioner in consultation with the parents/guardians and provided to the school annually.
- The Care Plan must include:
 - the prescribed medication taken:
 - on a regular basis
 - as premedication to exercise if the student is experiencing symptoms
 - emergency contact details
 - business and after hours contact details of the student's medical/health practitioner
 - details about deteriorating asthma including:
 - signs to recognise worsening symptoms
 - what to do during an attack
 - medication to be used
 - an asthma first aid section and should specify no less than four separate puffs of blue reliever medication, with four breaths taken per puff every four minutes, using a spacer if possible

Note: If the plan specifies less than the required number of puffs (i.e. four) per minute period, it will be sent back to the doctor for review.

- The school will ensure that all staff with a duty of care for students are trained to assess and manage an asthma emergency and complete the free one-hour Asthma Education session at least every three years – this can be face-to-face or online.
- Staff with a direct student wellbeing responsibility such as PE/Sport teachers, camp organisers, first aiders will complete the Asthma Foundation's free one-hour Emergency Asthma Education course at least every three years.



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- Staff will complete the Asthma Foundation's free one-hour Emergency Asthma Education course at least every three years.
- The school also will display the asthma first aid posters in the first aid room, staff room or other areas of the school where asthma attacks are likely to occur.
- The school will provide at least two asthma emergency kits amongst the first aid supplies. Please refer to Asthma First Aid Kits in the related policies referenced below. Parent supplied asthma medication will be stored separately from the kits.
- A nominated staff member will be responsible for maintaining the asthma emergency kits and replacing contents when necessary (e.g. after use or if the puffer has expired).
- The school will endeavour to reduce asthma triggers by:
 - mowing school grounds out of hours
 - planting a low allergen garden
 - limiting dust, for example by having the carpets and curtains cleaned regularly and out of hours
 - examining the cleaning products used in the school and their potential impact on students with asthma
 - conducting maintenance that may require the use of chemicals, such as painting, during school holidays
 - turn on fans, air conditioning and heaters out of hours when being used for the first time after a long period of non-use.
- The school will ensure that parents/guardians complete the Asthma Foundation's School Camp and Excursion Medical Update Form in addition to DET's confidential medical information form.
- The school will request parents to provide sufficient asthma medication for students when attending school camps or other overnight activities.
- If a student is diagnosed with Exercise Induced Asthma (EIA), staff will ensure adequate time (5 – 20 minutes) is allowed for reliever medication before the activity and cooling down after the activity. If a student has an asthma attack during exercise, the student will cease the activity and the Student's Asthma Action Plan will be followed. The student may return to the activity only if symptom free. A cool down activity will be undertaken and staff will be alert for symptoms.
- If a student has an asthma attack during exercise, the Asthma Action Plan if easily accessible, will be followed and parents notified.
- The school will regularly communicate with parents about the student's development, successes, changes and any health concerns and if an attack occurs. In particular, the frequency and severity of the student's systems and use of medication will be communicated.
- If a person who is not a known asthma sufferer has an asthma attack, the use of a puffer could be lifesaving.
- In such circumstances the school will also immediately call an ambulance and state a person is having an asthma attack.
- Please refer also to the school's Duty of Care Policy, the Parental Responsibilities (Decisions about Children) Policy, the Health Care Needs Policy and the Swimming Instruction/Water Safety Policy

Policy and Approval |

Consultation | College Council & Student Representative Group

Date of approval by College Council |

Review Date | Oct 25

