

ASTHMA MANAGEMENT POLICY

PURPOSE

To ensure that the Northern School for Autism appropriately supports students diagnosed with asthma.

OBJECTIVE

To explain to the Northern School for Autism parents/carers, staff and students the processes and procedures in place to support students diagnosed with asthma.

SCOPE

This policy applies to:

- all staff, including casual relief staff, contractors and volunteers
- all students who have been diagnosed with asthma or who may require emergency treatment for asthma and their parents/carers.

POLICY

Asthma

Asthma is a long term lung condition. People with asthma have sensitive airways in their lungs which react to triggers, causing a 'flare-up'. In a flare-up, the muscles around the airway squeeze tight, the airways swell and become narrow and there is more mucus. This makes it hard to breathe. 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
- smoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires)
- house dust mites
- pollens
- chemicals such as household cleaning products
- food chemicals/additives
- laughter or emotions, such as stress

- colds/flu
- weather changes such as thunderstorms and cold, dry air
- moulds
- animals such as cats and dogs
- deodorants (including perfumes, aftershaves, hair spray and aerosol deodorant sprays)
- certain medications (including aspirin and anti-inflammatories)

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Asthma management

If a student diagnosed with asthma enrols at the Northern School for Autism:

- 1. Parents/carers must provide the school with an Asthma Action Plan which has been completed by the student's medical practitioner. The plan must outline:
 - the prescribed medication taken by the student and when it is to be administered, for example as a premedication to exercise or on a regular basis
 - emergency contact details
 - the contact details of the student's medical practitioner
 - the student's known triggers
 - the emergency procedures to be taken in the event of an asthma flare-up or attack.
- 2. Parents/carers should also provide a photo of the student to be included as part of the student's Asthma Action Plan.
- 3. NSA will keep all Asthma Action Plans:
 - In each classroom
 - The First Aid Room
 - Staff area Noticeboards
- 4. School staff may also work with parents/carers to develop a Student Health Support Plan which will include details on:
 - how the school will provide support for the student
 - identify specific strategies
 - allocate staff to assist the student
- 5. If a student diagnosed with asthma is going to attend a school camp or excursion, NSA parents/carers are required to provide any updated medical information.
- 6. If a student's asthma condition or treatment requirements change, parent/carers must notify the school and provide an updated Asthma Action Plan.
- 7. School staff will work with parents/carers to review Asthma Action Plans (and any Student Health Support Plans) once a year at the beginning of the school year.

Student asthma kit

All students diagnosed with asthma are required to have a student asthma kit at school which contains:

- their own prescribed reliever medication labelled with the student's name
- their spacer (if they use one)

Student asthma kits will be stored in their classrooms

Asthma emergency response plan

If a student is:

- having an asthma attack
- difficulty breathing for an unknown cause, even if they are not known to have asthma

School staff will endeavour to follow the Asthma First Aid procedures outlined in the table 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				

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	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					
3.	Wait 4 minutes					
	If there is no improvement, give 4 more separate puffs of blue/grey reliever as					
	above					
	(or give 1 more dose of Bricanyl or Symbiocort 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 1 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 person 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

Training for staff

NSA will arrange the following asthma management training for staff:

Staff	Completed by	Course	Provider	Cost	Valid for
Group 1 General Staff	School staff with a direct teaching role with students affected by asthma or other school staff directed by the principal after conducting a risk assessment.	Asthma first aid management for education staff (non-accredited) One hour face-to-face or online training.	Asthma Australia	Free to all schools	3 years
Group 2 Specific Staff	Staff working with high risk children with a history of severe asthma, or with direct student wellbeing responsibility, (including First Aid staff)	Course in Asthma Awareness 10760NAT OR Course in the management of Asthma Risks and Emergencies in the Workplace 22556VIC (accredited)	Any RTO that has this course in their scope of practice	Paid by NSA	3 years

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NSA will also conduct an annual briefing for staff on:

- the procedures outlined in this policy
- the causes, symptoms and treatment of asthma
- identities of the students diagnosed with asthma
- how to use a puffer and spacer
- the location of:
 - o the Asthma Emergency Kits
 - o asthma medication which has been provided by parents for student use.

NSA will also provide this policy to casual relief staff and volunteers who will be working with students, and may also provide a briefing if the principal decides it is necessary depending on the nature of the work being performed.

Asthma Emergency Kit

NSA will provide and maintain at least two Asthma Emergency Kits. One kit will be kept on school premises at the First Aid Room at each campus and one will be a mobile kit for activities such as:

- yard duty
- camps and excursions.

The Asthma Emergency Kit will contain:

- at least 1 blue or blue/grey reliever medication such as Airomir, Admol or Ventolin
- at least 2 spacer devices (for single person use only) to assist with effective inhalation of the blue or blue/grey reliever medication (NSA will ensure spacers are available as replacements). Spacers will be stored in a dust proof container.
- clear written instructions on Asthma First Aid, including:
 - o how to use the medication and spacer devices
 - o steps to be taken in treating an asthma attack
- A record sheet/log for recording the details of an asthma first aid incident, such as the number of puffs administered.

Administration/ OHS Nominee will monitor and maintain the Asthma Emergency Kits. They will:

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

The blue or blue/grey reliever medication in the Asthma Emergency Kits may be used by more than one student as long as they are used with a spacer. If the devices come into contact with someone's mouth, they will not be used again and will be replaced.

After each use of a blue or blue/grey 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.

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Management of confidential medical information

Confidential medical information provided to NSA to support a student diagnosed with asthma will be:

- recorded on the student's file
- shared with all relevant staff so that they are able to properly support students diagnosed with asthma and respond appropriately if necessary.

Communication plan

This policy will be available on NSA's website so that parents and other members of the school community can easily access information about NSA's asthma management procedures.

This policy will also be included in:

- Staff Handbook
- CRT Induction Manual
- Volunteer Manual
- Staff portal; Sharepoint
- Hard copy available from school administration upon request

Epidemic Thunderstorm Asthma

NSA will be prepared to act on the warnings and advice from the Department of Education and Training when the risk of epidemic thunderstorm asthma is forecast as high.

COMMUNICATION

This policy will be communicated to our school community in the following ways:

- Available publicly on our school's website
- Included in staff induction processes and staff training
- Included in staff handbook/manual
- Discussed at annual staff briefings/meetings
- Hard copy available from school administration upon request

FURTHER INFORMATION AND RESOURCES

- Asthma Australia: Resources for schools
- Policy and Advisory Library:
 - o <u>Asthma</u>
 - o Treating an asthma attack

Appendix A: Asthma Care Plan for Education and Care Services

Appendix B: Asthma First Aid Plan

POLICY REVIEW AND APPROVAL

Policy last reviewed	April 2025
Approved by	Principal
Next scheduled review date	April 2026– noting that the recommended minimum review
	cycle for this policy is 1 year

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	ASTHMA A	ACTION PLAN	ASTHMA AUSTRALIA
	Name:		EMERGENCY CONTACT
	Plan date:	Review date:	Name:
Photo (optional)	Doctor details:		Phone:
✓ needing no more ✓ no asthn ✓ no asthn ✓ can do a Flate-low res FLARE-l • needing resthan usua • woke up o • had asthm	IP Asthma symptoms getting worse such as any of these IOR more than 2 days/week vernight with asthma when I woke up II my activities	morning night putts/inhi • Use my preventer, even when well control TAKE reliever Harms	
• reliever m	ding (if used) between and	TAKE preventer	alations for days then back to well concrelled dose puffs/inhalations as needed see my doctor TODAY
reliever m can't spea extreme d feel asthn lips turnin	ENCY is any of these edicine not working at all like a full sentence ifficulty breathing ha is out of control g blue	Dial Tri	L AMBULANCE NOW iple Zero (000) RT ASTHMA FIRST AID age for Asthma First Aid

If you are using a dual purpose reliever, your doctor will discuss the correct plan for you.

v18 Updated 16 May 2023

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ASTHMA FIRST AID

Blue/Grey Reliever

Airomir, Asmol, Ventolin or Zempreon and Bricanyl

Blue/grey reliever medication is unlikely to harm, even if the person does not have asthma



DIAL TRIPLE ZERO (000) FOR AN AMBULANCE IMMEDIATELY IF THE PERSON:

- is not breathing
- · suddenly becomes worse or is not improving
- . is having an asthma attack and a reliever is not available
- . is unsure if it is asthma
- has a known allergy to food, insects or medication and has SUDDEN BREATHING DIFFICULTY, GIVE ADRENALINE AUTOINJECTOR FIRST (if available), even if there are no skin changes, then use a reliever





SIT THE PERSON UPRIGHT

- Be calm and reassuring
- Do not leave them alone





GIVE 4 SEPARATE PUFFS OF RELIEVER

- Shake puffer
- Put 1 puff into spacer
- Take 4 breaths from spacer
 - Repeat until 4 puffs have been taken



If using Bricanyl, give 2 separate inhalations (5 years or older)

If you don't have a spacer handy in an emergency, take <u>1 puff</u> as you take <u>1 Slow, deep breath</u> and hold breath for as long as comfortable. **Repeat** until all puffs are given





WAIT 4 MINUTES If breathing does not return to normal, give
 4 more separate puffs of reliever as above



Bricanyl: Give 1 more inhalation

IF BREATHING DOES NOT RETURN TO NORMAL





DIAL TRIPLE ZERO (000)

- Say 'ambulance' and that someone is having an asthma attack
- Keep giving 4 separate puffs every 4 minutes until emergency assistance arrives



Bricanyl: Give 1 more inhalation every 4 minutes until emergency assistance arrives









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