



Kinross Primary School

Asthma Policy



RATIONALE

Kinross Primary School is committed to: The care, safety and protection of all students attending government schools. Kinross Primary School is an Asthma Friendly School. All children suffering from Asthma will require the following guidelines, procedures and/or actions to be put in place to ensure their safety.

GUIDELINES AND PROCEDURES

School Responsibilities:

- Photos of the child with Medical Emergency Action Plans to be placed in; medical room, all duty folders, student's classroom (made available to relief teachers, all specialist teachers folders.)
- Risk Management Plan to be completed and signed by Principal/Deputy Principal, Parent, Classroom Teacher, School Psychologist, and Education Assistant (if there is one) Plan is to be kept in medical room and classroom.
- Any medication provided be kept in medical room with instructions, teacher's desk or in child's possession (older children)
- All staff to be trained in use of spacer, puffer or spray medications and given information on the individuals condition
- New staff in-serviced on condition and action plan
- Medication to be taken on excursions and PE/Sports sessions if required

Staff Responsibilities:

Promotion of good health outcomes:

- promoting health practices that maintain good health for all students in the school environment;
- monitoring the health needs of all students and meeting duty of care obligations by recognising and responding to changing health needs or accidents involving students;
- implementing agreed school procedures and practices to promote good health outcomes and maintain safety for all students;
- addressing health learning outcomes, community health promotion priorities or activities within the learning and teaching program; and
- providing essential health care for a student in an emergency situation if professional assistance cannot be promptly accessed.

Parents share responsibility with the school to:

Ensure the provision of appropriate health care for their child. This includes:

- providing accurate and relevant information about their child's health history, any medical condition or health care needs at the time of enrolment and throughout their child's attendance at the school;
- advising staff if their child is bringing any medication to school and completing a Health Care Authorisation;
- providing advice about their child's health from a health professional when requested by the principal;
- providing written permission for a principal or identified staff member to be able to directly contact a health professional.

What Should I Do in an Asthma Emergency?

Everybody with asthma should have their own 'action plan', or you can follow the Asthma First Aid Plan. If their condition suddenly deteriorates or, if at any time you are concerned, call an ambulance immediately and proceed with the Asthma First Aid Plan.

Asthma First Aid Plan

1. Sit the person upright and give reassurance.
2. Without delay give 4 puffs of a **blue** Reliever inhaler (Aiomir, Ventolin, Asmol, Bricanyl or Epaq). The inhalation is best given using a puffer and spacer. Ask the person to take 4 breaths from the spacer after each puff of medication.
3. Wait 4 minutes. If there is little or no improvement, repeat steps 2 and 3.
4. If there is still little or no improvement – call an ambulance immediately (Dial 000) and state that someone is having an asthma attack. Continuously repeat steps 2 to 3 whilst waiting for the ambulance.



ASTHMA FACTS

One in six children is currently diagnosed with asthma. It is important for school staff to be aware of the symptoms, triggers and management of asthma in the school environment. Asthma is the most common reason for school non-attendance and hospital admission in school age children.

People with asthma have sensitive airways in their lungs. When they are exposed to certain “triggers”, their airways become narrow and inflamed making it hard for them to breathe.

Asthma triggers

- Viral infections – e.g. colds and ‘flu
- Exercise (this can be managed)
- Inhaled allergens – e.g. pollens, moulds, dust mite, animal saliva and skin flakes
- Cigarette smoke
- Changes in temperature and weather
- Certain drugs – e.g. aspirin and some blood pressure medications
- Chemicals and strong smells
- Some foods and food preservatives, flavourings and colourings.
- Some occupations – e.g. baking, carpentry
- In some people it can be difficult to know what triggers asthma!

Main symptoms of asthma

Coughing
Shortness of breath / rapid breathing
Chest tightness
Wheezing (noisy breathing)

Asthma medications

There are four groups of asthma medications:

1. Preventers
2. Relievers
3. Symptom controllers
4. Combination medications

Parents are responsible for ensuring that their children have an adequate supply of the appropriate medication at school.

EXERCISE

Exercise is important for health and development. Students with asthma should be encouraged to be active. With good management, most students with asthma can exercise normally.

Students known to have asthma symptoms during exercise (EIA) should:

1. Take their blue reliever medication 5-10 minutes before exercise or take medication as prescribed
2. Start exercise with a warm-up program
3. Finish exercise with a cool-down session

Exercise should only be avoided when the student is unwell or when symptoms of asthma are present. To improve overall control of their asthma, students should take Preventer medication as prescribed.

Policy composed by Chris Byrne 2007

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