



ASTHMA

POLICY

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 | • colds/flu |
| • smoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires) | • weather changes such as thunderstorms and cold, dry air |
| • house dust mites | • moulds |
| • pollens | • animals such as cats and dogs |
| • chemicals such as household cleaning products | • deodorants (including perfumes, after-shaves, hair spray and aerosol deodorant sprays) |
| • food chemicals/additives | • certain medications (including aspirin and anti-inflammatories) |
| • laughter or emotions, such as stress | |

Asthma management

If a student diagnosed with asthma enrolls at Mortlake College:

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 pre-medication 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. Mortlake College will provide a photo of the student to be included as part of the student's Asthma Action Plan.
3. Mortlake College will keep all Asthma Action Plans:
 - First Aid Room
 - Asthma First Aid Bag taken on all excursions/camps
 - P.E. Asthma First Aid bag located in the Activity Centre and taken on sports activities
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

Any Student Health Support Plan will be developed in accordance with Mortlake College's Healthcare Needs Policy.

5. If a student diagnosed with asthma is going to attend a school camp or excursion, Mortlake College 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 as stated by medical practitioner Plans and Student Health Support Plans annually.

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)

Students will be required to keep their asthma kits with them while at school or will be kept in the locked cupboard in the First Aid Room.

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.	<p>Sit the person upright</p> <ul style="list-style-type: none"> • Be calm and reassuring • Do not leave them alone • Seek assistance from another staff member or reliable student to locate the 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.	<p>Give 4 separate puffs of blue or blue/grey reliever puffer:</p> <ul style="list-style-type: none"> • Shake the puffer • Use a spacer if you have one • Put 1 puff into the spacer • Take 4 breaths from the spacer <p>Remember – Shake, 1 puff, 4 breaths</p>
3.	<p>Wait 4 minutes</p> <ul style="list-style-type: none"> • If there is no improvement, give 4 more separate puffs of blue/grey reliever as above <p>(or give 1 more dose of Bricanyl or Symbicort inhaler)</p>
4.	<p>If there is still no improvement call Triple Zero "000" and ask for an ambulance.</p> <ul style="list-style-type: none"> • 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.	<p>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</p>

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

Mortlake College 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 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 nurses, PE/sport teachers, first aid and school staff attending camp)	<i>Course in Asthma Awareness 10760NAT</i> (accredited)	Any RTO that has this course in their scope of practice	Paid by Mortlake College	3 years

Mortlake College will also conduct a briefing when required 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:
 - the Asthma Emergency Kits
 - asthma medication which has been provided by parents for student use.

Mortlake College 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

Mortlake College will provide and maintain at least four Asthma Emergency Kits. One kit will be kept on school premises in the First Aid Room at all time and the other will be a mobiles kit for activities such as:

- PE Events
- 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 (Mortlake College will ensure spare spacers are available as replacements). Spacers will be stored in a dust proof container.
- clear written instructions on Asthma First Aid, including:
 - how to use the medication and spacer devices
 - 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 .

First Aid Officers: Dot Jenkins, Carmel Bourke & Cherie Robertson 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.

Management of confidential medical information

Confidential medical information provided to Mortlake College 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 Mortlake College's website so that parents and other members of the school community can easily access information about Mortlake College's asthma management procedures.
- All students diagnosed with asthma will have a copy sent home annually with their Student Health Support Plans

Epidemic Thunderstorm Asthma

Mortlake College 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
- Included in transition and enrolment packs
- Discussed at parent information nights/sessions
- Reminders in our school newsletter
- Hard copy available from school administration upon request
- Hard copy given to parents annually with Student Health Support Plans

FURTHER INFORMATION AND RESOURCES

- Asthma Australia: [Resources for schools](#)
- Policy and Advisory Library:
 - [Asthma](#)
 - [Treating an asthma attack](#)
- Mortlake College website: [Mortlake College Policies](#)

REVIEW CYCLE AND EVALUATION

This policy will be reviewed as part of the school's **ANNUAL** review cycle or earlier if required.

Policy last reviewed	March 2023
Approved by	Principal - Sean Fitzpatrick
Next scheduled review date	March 2024

ASTHMA EMERGENCY KIT LOG

This log should be completed whenever the kit is used and kept with the kit until it needs to be replaced.

Completed forms should be stored with the worksite first aid log.

Additional forms can be downloaded at asthma.org.au

Important: Check medication expiry date.

[illegible]

For more information, contact Asthma Australia on **1800 ASTHMA** (1800 278 462) or visit **asthma.org.au**

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**

1



SIT THE PERSON UPRIGHT

- Be **calm** and reassuring
- **Do not leave** them alone

2



GIVE 4 SEPARATE PUFFS OF RELIEVER PUFFER

- **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 **1 puff** as you take **1 slow, deep breath** and hold breath for as long as comfortable. **Repeat** until all puffs are given

3



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

4



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



ASTHMA AUSTRALIA

1800 ASTHMA
(1800 278 462)
asthma.org.au

Supported by:



Translating and
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131 450

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APPENDIX B

FOR USE WITH PUFFER AND SPACER

ASTHMA ACTION PLAN

VICTORIAN SCHOOLS

Student's name:

DOB:

Confirmed triggers:

PHOTO



**ASTHMA
AUSTRALIA**

- ☐ Child can self-administer if well enough
- ☐ Child needs to pre-medicate prior to exercise
- ☐ Face mask needed with spacer

ALWAYS give adrenaline autoinjector **FIRST**, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms.

Adrenaline autoinjector prescribed: ☐ Y ☐ N Type of adrenaline autoinjector: -

ASTHMA FIRST AID

For Severe or Life-Threatening signs and symptoms, call for emergency assistance immediately on Triple Zero "000"
Mild to moderate symptoms do not always present before severe or life-threatening symptoms

1. Sit the person upright
Stay with the person and be calm and reassuring
2. Give - separate puffs of Airomir, Asmol or Ventolin
Shake the puffer before each puff
Puff 1 puff into the spacer at a time
Take 4 breaths from spacer between each puff
3. Wait 4 minutes
If there is no improvement, repeat step 2
4. If there is still no improvement call emergency assistance
Dial Triple Zero "000"
Say 'ambulance' and that someone is having an asthma attack
Keep giving - puffs every 4 minutes until emergency assistance arrives

Commence CPR at any time if person is unresponsive and not breathing normally.

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

SIGNS AND SYMPTOMS

MILD TO MODERATE

- Minor difficulty breathing
- May have a cough
- May have a wheeze
- Other signs to look for:



SEVERE

- Cannot speak a full sentence
- Sitting hunched forward
- Tugging in of skin over chest/throat
- May have a cough or wheeze
- Obvious difficulty breathing
- Lethargic
- Sore tummy (young children)

LIFE-THREATENING

- Unable to speak or 1-2 words
- Collapsed/exhausted
- Gasping for breath
- May no longer have a cough or wheeze
- Drowsy/confused/unconscious
- Skin discolouration (blue lips)

Emergency contact name:

Work ph:

Home ph:

Mobile ph:

Plan prepared by Dr or Nurse Practitioner:

Signed:

Date prepared:

Date of next review:



- Assemble spacer.
- Remove cap from puffer.
- Shake puffer well.
- Attach puffer to end of spacer.

- Place mouthpiece of spacer in mouth and ensure lips seal around it.
- Breathe out gently into the spacer.
- Press down on puffer canister once to fire medication into spacer.
- Breathe in and out normally for 4 breaths (keeping your mouth on the spacer).