



Asthma Policy

Purpose:

To ensure that Alphington Grammar School appropriately supports students diagnosed with asthma.

1. Objective:

- 1.1. To explain to Alphington Grammar School students, parents/parent liaison, and staff the processes and procedures in place to support students diagnosed with asthma.

2. Scope:

- 2.1. 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/parent liaison.

3. Asthma:

- 3.1. 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.
- 3.2. 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; and
 - persistent cough.
- 3.3. 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.
- 3.4. 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 (thunderstorms and cold, dry air);
 - house dust mites;
 - pollens;
 - moulds;
 - animals (i.e. cats and dogs);
 - chemicals (i.e. household cleaning products);
 - deodorants (including perfumes, aftershaves and hairspray);
 - food chemicals/additives;
 - certain medications (i.e. aspirin and anti-inflammatories); and
 - laughter or emotions (i.e. stress).



4. Responsibilities:

- 4.1. The Principal and/or Principal's nominee will:
- ensure that the School develops, implements and routinely reviews this policy in accordance with the Guidelines;
 - ensure that relevant school staff have successfully completed approved asthma training and that their accreditation is current;
 - ensure that there are sufficient numbers of trained staff available to supervise students diagnosed with asthma while they are under the care or supervision of the School, including excursions, yard duty, camps and special event days; and
 - encourage ongoing communication between parents/parent liaison and school staff about the current status of the student's asthma, the School's policies and their implementation.
- 4.2. The School Nurse will:
- have current asthma management training and ensure they have a higher level of knowledge relating to asthma management;
 - provide asthma education and first aid training for staff and volunteers as required;
 - actively seek information to identify students with asthma, either at enrolment or at the time of diagnosis (whichever is earlier);
 - ensure that parents/parent liaison provide an Asthma Action Plan which has been signed by the student's medical practitioner and that contains an up-to-date photograph of the student;
 - ensure that all students have a current Asthma Action Plan, and that it is updated annually;
 - ensure that parents/parent liaison provide the School with reliever medication and a spacer device, if reliever is a puffer, for their child that is not out-of-date and replace reliever medication when requested to do so;
 - facilitate communication between senior management, staff, parents/parent liaison, and students regarding the School's asthma management policy and strategies;
 - inform staff including casual relief teachers, specialist teachers and volunteers about this policy, the names of any students diagnosed with asthma, the location of each student's Asthma Action Plan and reliever medication, and each individual person's responsibility in managing an incident;
 - lead the annual asthma school briefing;
 - identify and minimise where possible, triggers of asthma symptoms for students;
 - work with parents/parent liaisons on how the School will provide support for the student, and identification of specific strategies; and
 - arrange to purchase and maintain an appropriate number of Asthma Emergency Kits for general use to be part of the School's first aid kit.
- 4.3. The School Staff will:
- know and understand the requirements of this policy;
 - know the identity of students who are diagnosed with asthma and know their face;
 - understand the causes, symptoms, and treatment of asthma;
 - obtain regular in how to recognise and respond to an asthma attack, including administering reliever medication;



- know where to find a copy of each student's Asthma Action Plan quickly, and follow it in the event of an asthma flare-up/attack;
 - know the School's general first aid and emergency response procedures, and understand their role in relation to responding to an asthma attack;
 - know where students' reliever medication and the Asthma Emergency Kits for general use are kept;
 - plan ahead for special class activities (e.g. cooking, art and science classes), or special occasions (e.g. excursions, incursions, sport days, camp, cultural days, fetes and parties), either at the School, or away from the School;
 - be aware of the possibility of hidden triggers in art supplies, traces of triggers when using items such as paint cleaning chemicals in art or food additives in cooking classes, or students being at risk of an asthma attack when they experience extreme emotions induced at school (e.g. stress during exams); and
 - raise student awareness about asthma and the importance of their role in fostering a school environment that is safe and supportive for their peers.
- 4.4. Parents/parent liaison of students diagnosed with asthma will:
- inform the School in writing, either at enrolment or diagnosis, of the student's asthma;
 - obtain and provide the School with an Asthma Action Plan from the student's medical practitioner that details their condition, and any medications to be administered, and other emergency procedures;
 - communicate any changes to the student's health and medical condition;
 - provide the School with an up-to-date photo for the student's Asthma Action Plan and when the plan is reviewed (annually);
 - provide the School with reliever medication and spacer device, where the medication is administered by a puffer, that are current and not expired;
 - replace the student's reliever medication as needed, before their expiry date or when used; and
 - assist school staff in planning and preparation for the student prior to camps, field trips, incursions, excursions or special events (e.g. class parties, cultural days, or sport days).
- 5. Student asthma kit:**
- 5.1. 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; and
 - their spacer (if they use one).
- 5.2. Primary student asthma kits will be stored in their classroom and an additional asthma kit accessible in the School Nurse Office supplied by parents/parent liaison.
- 5.3. Secondary student asthma kits will be stored with them while at school and an additional asthma kit accessible in the School Nurse Office supplied by parents/parent liaison.



6. Asthma emergency response plan:

- 6.1. School staff will endeavour to follow the Asthma First Aid procedures outlined in the table below, if a student is:
- having an asthma attack; or
 - difficulty breathing for an unknown cause, even if they are not known to have asthma.
- 6.2. School staff may contact Triple Zero “000” at any time.

Step	Action
1	Sit the person upright <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 plan is not immediately available, use the Asthma First Aid as described in steps 2 to 5.
2	Administer 4 separate puffs of blue/grey reliever puffer: <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.• Repeat until 4 puffs have been taken. Remember – Shake, 1 puff, 4 breaths
3	Wait 4 minutes <ul style="list-style-type: none">• If there is no improvement, give 4 more separate puffs of blue/grey reliever as above.
4	If there is no improvement call Triple Zero “000” <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.
5	If asthma is relieved after administering Asthma First Aid, stop the treatment and observe the student. Notify the student’s parents/parent liaison and record the incident.

- 6.3. 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; or
 - if the person is known to have anaphylaxis.

7. Asthma Emergency Kit:

- 7.1. Blue/grey reliever medication such as Ventolin/Asmol and at least 2 spacer devices (for single person use only) have been added to all Alphington Grammar School’s First Aid Kits.
- 7.2. The School Nurse will monitor and maintain the Asthma Kits and regularly check the expiry date and replace them if they are expired or are low on doses.



8. Staff training:

- 8.1. Alphington Grammar School staff and volunteers should undertake non-accredited training in asthma first aid management for education staff through Asthma Australia <https://asthmaonline.org.au/product/asthma-first-aid-for-schools/>. Staff and volunteers should complete the free 1 hour asthma education session at least every 3 years.
- 8.2. The following school staff should undertake accredited training in Management of Asthma Risks and Emergencies in the Workplace (22556VIC) by a Registered Training Organisation:
 - staff with a direct student wellbeing responsibility such as School Nurse, and camp organisers;
 - staff working with high-risk children with a history of severe asthma;
 - staff in high-risk teaching areas, such as Physical Education, STEM, or Art.
- 8.3. Staff are also required to attend a briefing on asthma management and this policy annually, facilitated by a staff member who has successfully completed an asthma management course within the last 2 years (i.e. Principal, Assistant Principal/s, or School Nurse). Each briefing will address:
 - the School's asthma management policy;
 - causes, symptoms and treatment of asthma;
 - the identities of students diagnosed with asthma and where their medication is located;
 - how to use a puffer and spacer;
 - the School's general first aid and emergency response procedures; and
 - the location of, and access to, reliever medication that have been provided by parents/parent liaison or purchased by the School for general use.

9. Epidemic Thunderstorm Asthma:

- 9.1. Alphington Grammar School will be prepared to act on the warnings and advice when the risk of epidemic thunderstorm asthma is forecast as high.