

### 1. Objective

The objective of this Policy is to:

- Ensure that all children enrolled at Cheshire School who have medically diagnosed asthma receive appropriate medical attention as required;
- Ensure that all children who have not been diagnosed with asthma who suffer an attack whilst in the care of Cheshire School receive appropriate medical attention as required.

#### 2. Scope

This Policy applies to all students enrolled at Cheshire School, their parents and carers, and Cheshire staff.

#### 3. Context and Guiding Principles

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, burnoffs 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, after-shaves, hair spray and aerosol deodorant sprays)
- certain medications (including aspirin and anti-inflammatories)

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#### 4. Definitions

Word	Definition
Asthma	<ul> <li>Asthma is a long-term health condition which affects the airways in the lungs. People with asthma have sensitive airways that narrow in response to a trigger.</li> </ul>
Trigger	<ul> <li>Trigger is the term used to describe something that may cause an asthma flare-up, or make existing asthma symptoms worse.</li> </ul>
Asthma attack	<ul> <li>An asthma attack is a sudden worsening of asthma symptoms.</li> <li>All asthma attacks are life-threatening</li> </ul>
Asthma flare-up	<ul> <li>An asthma flare-up is a worsening of asthma symptoms. A flare-up can develop slowly, (over hours to days) or can get worse very quickly (in seconds to minutes). A sudden or severe asthma flare-up is also called an asthma attack.</li> </ul>
Asthma Action Plan	<ul> <li>An asthma action plan helps the person with asthma and/or their carer recognise worsening asthma and gives clear instructions on what to do in response.</li> </ul>
Asthma First Aid	<ul> <li>Asthma First Aid is the nationally recognised four-step procedure used to manage a person experiencing a suspected asthma flare-up or attack.</li> </ul>
Asthma Emergency Kit	<ul> <li>A specific first aid kit for asthma designed to be portable in an emergency.</li> </ul>
Reliever medication	<ul> <li>Reliever medications work quickly to relax the muscles that have tightened around the airways, enabling the airways to open, making it easier to breathe. Blue/grey reliever medications are used to treat an asthma emergency through the national Asthma First Aid procedure.</li> </ul>
Spacer	<ul> <li>A spacer is a plastic or cardboard device used with a puffer.</li> <li>Spacers assist with administering asthma medication.</li> </ul>

## 5. Policy

#### Implementation:

- Asthma education is provided for all school staff.
- Asthma Action Plans for each student with an asthma diagnosis are on display in the staffroom.
- Asthma First aid posters are on display in the staffroom.
- Students with asthma are encouraged to have their medications readily available and are safely stored at all times. These are clearly labelled with the student's name.
- A plan is in place for managing asthma during sporting activities, excursions and camps.
- A blue reliever puffer and spacer device are available for emergency use at School and are always taken on excursion by class teachers in the first aid backpack.
- The school's policy is to require students to use a spacer device when taking their asthma medication.

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### The **Head of School** is responsible for:

- Ensuring that the School develops, implements and reviews its school *Asthma Management Policy*.
- Actively seeking information to identify students with severe life-threatening asthma or those who have been diagnosed with asthma, either at enrolment or at the time of diagnosis (whichever is earlier).
- Ensuring that parents and carers provide an Asthma Action Plan which has been completed by the student's medical practitioner and that contains an up-to-date photograph of the student.
- Ensuring that a Communication Plan is developed to provide information to all school staff, students and parents and carers about asthma and the school's Asthma Management Policy.
- Ensuring that parents and carers 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 replacement reliever medication when requested to do so.
- Ensuring there are procedures in place for providing volunteers and casual relief staff of students diagnosed with asthma and their role in responding to a student having an asthma attack in their care.
- Implementing an Asthma First Aid procedure consistent with current national recommendations and all staff are aware of the Asthma First Aid procedure.
- Facilitating communication between management, staff, parents and carers and students regarding the school's *Asthma Management Policy* and strategies.
- Promptly communicating to parents and carers any concerns regarding asthma and students attending the school.
- Identifying and minimising, where possible, triggers of asthma symptoms for students.
- Encouraging ongoing communication between parents and school staff about the current status of the student's asthma, the school's policies and their implementation.
- Arranging to purchase and maintain an appropriate number of Asthma Emergency Kits for general use to be part of the school's first aid kit.
- Ensuring that reliever medications within the asthma emergency kits are replaced regularly and have not expired, and that spacers are replaced after each use.
- Ensuring that relevant school staff have successfully completed approved asthma training in the three years prior.

#### Cheshire School Staff are responsible for:

- Knowing and understand the school's Asthma Management Policy.
- Knowing the identity of students who are diagnosed with asthma. Knowing the students by face.
- Understanding the causes, symptoms, and treatment of asthma.
- Obtaining regular training in how to recognise and respond to an asthma attack, including administering reliever medication.

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- Knowing where to find a copy of each student's Asthma Action Plan quickly, and following it in the event of an asthma flare-up/attack.
- Knowing the school's general first aid and emergency response procedures, and understanding their role in relation to responding to a severe or life-threatening asthma attack.
- Knowing where students' reliever medication and the Asthma Emergency Kits for general use are kept.
- Knowing and following the prevention and risk minimisation strategies in the Schools Asthma Management Plan.
- Planning 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 school, or away from school.
- Being aware of the possibility of hidden triggers in art supplies or traces of triggers when using items such as paint cleaning chemicals in art or food additives in cooking classes.
   Students may also be at risk of an asthma attack when they experience extreme emotions induced at school; e.g. stress during exams.
- Raising student awareness about asthma and the importance of their role in fostering a school environment that is safe and supportive for their peers.
- Promptly communicating to the Head of School, parents and carers any concerns regarding asthma and students enrolled in the school.

### The **School Anaphylaxis Supervisor** is responsible for:

- Advising Cheshire staff during the biannual Anaphylaxis Briefings each year of students who have Asthma Action Plans.
- Updating the student register to identify students with asthma.
- Maintaining a register of the child's medication including expiry dates and following up with parents and carers one month prior to the expiry date of replacement medication.

### Parents and Carers of a child with asthma are responsible for:

- Informing the school in writing, either at enrolment or diagnosis, of the student's asthma.
- Reading the school's Asthma Management Policy.
- Obtaining an Asthma Action Plan from the student's medical practitioner that details their condition, and any medications to be administered, and other emergency procedures and provide this to the school.
- Informing school staff in writing of any changes to the student's medical condition and, if necessary, provide an updated Asthma Action Plan.
- Providing the school with an up to date photo for the student's Asthma Action Plan and when the plan is reviewed.
- Providing the school with reliever medication and spacer device, where the medication is administered by a puffer, that are current and not expired.

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- Replacing the student's reliever medication as needed, before their expiry date or when used.
- Assisting school staff in planning and preparing for excursions, incursions or special events.
- Ensuring that if their child is self-managing their asthma correctly the child carries their reliever medication and spacer at all times.
- Promptly communicating all medical and health information relevant to their child, to the Head of School and staff of the School
- Communicating any changes to their child's asthma or any concerns about the health of their child, including changes to the student's emergency contact details.

#### **Students** are responsible for:

- Immediately informing staff if they experience asthma symptoms
- Informing staff if they have self-administered any asthma medication
- Carrying asthma medication and a spacer with them at all times (if self-managing their asthma)

### Asthma Emergency Kits will include:

- A blue reliever puffer
- A spacer
- Clear written instructions in how to use these medications and devices, plus the steps to be taken in treating an acute asthma attack
- Alcohol swabs to clean devices after use
- Record form

#### 6. Associated Procedures

### 6.1. Signs and Symptoms of an Asthma Attack

MILD/MODERATE	SEVERE	LIFE-THREATENING
Minor difficulty breathing	Obvious difficulty breathing	Gasping for breath
May have a cough	May have a cough	May no longer have a cough
May have a wheeze	May have a wheeze	May no longer have a wheeze
SIGNS OF SEVERITY		
Able to talk in full sentences Able to walk / move around	Cannot speak in a full sentence in one breath	Unable to speak 1 or 2 words per breath
	Tugging in of the skin between ribs or at the base of the neck	Confused or exhausted Collapsing
	Sore tummy (young children)	Turning blue (skin discolouration)
	Reliever medication not lasting as long as usual	Not responding to reliever medication
ACTION	ACTION	ACTION
Follow instructions on student's asthma plan, or commence asthma first aid	1. Call Triple Zero (000) 2. Commence asthma first aid	1. Call Triple Zero (000) 2. Commence asthma first aid

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### 6.2. Asthma First Aid Procedure for students with a known asthma condition

Staff will follow the child's Asthma Action Plan. If the child's Asthma Action Plan is NOT available, staff will immediately commence the following Asthma First Aid procedure:

Steps	Actions
Step 1 – Sit the person upright	<ul> <li>Be calm and reassuring.</li> <li>Do not leave them alone.</li> <li>Seek assistance from another staff member to locate the student's Asthma Action Plan and an asthma emergency kit if required.</li> <li>If the student's Asthma Action Plan is not immediately available, use asthma first aid as described below.</li> </ul>
Step 2 – Give 4 separate puffs of blue or blue-grey reliever puffer	<ul> <li>Shake the puffer</li> <li>Put one puff into the spacer.</li> <li>Take 4 breaths from the spacer</li> <li>Repeat until 4 puffs have been taken.</li> </ul>
Step 3 – Wait 4 minutes	<ul> <li>If there is no improvement, give 4 more separate puffs of blue/grey reliever as per Step 2 and wait 4 minutes.</li> </ul>
Step 4 – Dial Triple Zero (000)	<ul> <li>Say 'ambulance' and that someone is having an asthma attack.</li> <li>Keep giving 4 separate puffs, every 4 minutes until emergency assistance arrives.</li> </ul>
Step 5 – If asthma is relieved after administering asthma first aid stop the treatment and observe the student	Notify the student's parent or carer and record the incident

## 6.3. Asthma First Aid Procedure for students without a known asthma condition

Staff will follow the child's Asthma Action Plan. If the child's Asthma Action Plan is NOT available, staff will immediately commence the following Asthma First Aid procedure:

Steps	Actions
Step 1 – Sit the person	Be calm and reassuring.
upright	Do not leave them alone.
	Seek assistance from another staff member to locate the
	student's Asthma Action Plan and an asthma emergency kit

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	<ul> <li>if required.</li> <li>If the student's Asthma Action Plan is not immediately available, use asthma first aid as described below.</li> </ul>
Step 2 – Give 4 separate puffs of blue or blue-grey reliever puffer	<ul> <li>Shake the puffer</li> <li>Put one puff into the spacer.</li> <li>Take 4 breaths from the spacer</li> <li>Repeat until 4 puffs have been taken.</li> </ul>
Step 3 – Wait 4 minutes	If there is no improvement, dial Triple Zero (000)
Step 4 – Dial Triple Zero (000)	<ul> <li>Say 'ambulance' and that someone is having an asthma attack.</li> <li>Keep giving 4 separate puffs, every 4 minutes until emergency assistance arrives.</li> </ul>
Step 5 – If asthma is relieved after administering asthma first aid stop the treatment and observe the student	Notify the student's parent or carer and record the incident

#### 6.4 Asthma or Anaphylaxis?

Sometimes students experiencing anaphylaxis can present with symptoms similar to those of an asthma attack.

If the student is known to be at risk of anaphylaxis and you are unsure whether they are experiencing anaphylaxis or an asthma attack, give the adrenaline auto-injector FIRST, following the student's Anaphylaxis Action Plan and then administer the student's reliever medication.

#### 7. Relevant Legislation Sources

- Education and Training Reform Act 2006
- Education and Training Reform Regulations 2007
- Education and Training Reform Regulations 2017
- Asthma Australia: Asthma Guidelines for Australian

#### 8. Associated Policies and References

- Parent Handbook
- 05.001 Anaphylaxis Management Policy
- 05.001a Responding to Anaphylaxis Procedure
- 05.002d Illness and Emergency Care Policy
- 05.003e Asthma Action Plan

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