

ASTHMA

POLICY

Policy

This policy informs schools about their responsibilities for supporting students with asthma.

Summary

- Schools have a responsibility to support students diagnosed with asthma by:
 - having a local school level asthma policy
 - having an [Asthma Action Plan](#) and [Student Health Support Plan](#) for each student diagnosed with asthma
 - providing their staff with the appropriate level of training (see below for details) regarding asthma management
 - providing and maintaining an asthma emergency kit with equipment to manage asthma emergencies
- Schools should follow advice and warnings from the Department's Emergency Management Division associated with a potential thunderstorm asthma event.

Details

For each student diagnosed with asthma, schools must have a written:

- Asthma Action Plan provided by the student's parents or carers
- Student Health Support Plan

If any student enrolled at the school has been diagnosed with asthma, schools are required to have a local asthma policy that addresses:

- staff asthma awareness training
- asthma emergency kit content and maintenance
- medication storage
- management of confidential medical information

A downloadable [Asthma Policy Template](#) for Victorian government schools is available on the [School Policy Templates Portal](#) (login required). Schools can modify the template to suit their local circumstances.

Schools should also undertake the following actions:

- ensure that staff are provided with training to assess and manage an asthma emergency. Refer to the 'Staff training' section below for further information

References: School Policy and Advisory Guide
Anaphylaxis Management in Schools
Anaphylaxis Guidelines for Victorian Schools

- ensure those staff with a direct student wellbeing responsibility such as nurses, physical education or sport teachers, first aid and school staff attending camp have completed an accredited Emergency Asthma Management (EAM) course at least every 3 years
- follow advice and warnings from the Department associated with a potential thunderstorm asthma event
- provide and maintain an asthma emergency kit with the equipment required for managing an asthma attack

Asthma attack

Important — if a student is experiencing an asthma attack.

Immediately call **000** and ask for an ambulance and state a student is having an asthma attack if:

- the student is not breathing
- the student is having a severe or life threatening attack
- the student is having an asthma attack and a reliever is not available
- you are concerned
- at any time the student's condition suddenly worsens, or is not improving
- the student is known to have anaphylaxis – follow their Anaphylaxis Action Plan, then give asthma first aid

Further information is included in the [Guidance](#) tab with a procedure for how to treat a student for an asthma attack

Where a student is diagnosed with asthma, the student is required to bring their own prescribed reliever medication to school. This should be stored in their asthma kit with a copy of their Asthma Action Plan and their spacer.

Strategies

Communication

Schools should provide information to all school staff, students and parents or carers about asthma and the School's Asthma Policy.

[Asthma Australia](#) also has [Asthma First Aid posters](#) available to schools for free, which should be displayed in the following places:

- staff room
- sick room
- areas where asthma attacks are likely to occur or be treated

Regularly communicate with the student's parents or carers about the student's asthma or any changes in health. In particular, the frequency and severity of the student's asthma symptoms and use of medication at school.

Emergency response plan

Procedures which each school develops for an emergency response to a severe or life threatening asthma attack for all in-school and out-of-school activities.

The procedures, which are included in the School's Asthma Policy, differ from the instructions listed on the student's individual Asthma Action Plan.

Individual Asthma Action Plans (for each student diagnosed with asthma)

Parents or carers must provide the school with an Asthma Action Plan completed by the student's medical practitioner. The plan must outline the student's known triggers and the emergency procedures to be taken in the event of an asthma flare-up or attack.

Parents or carers and the student's general practitioner (GP) should annually complete or review each student's Asthma Action Plan. The Asthma Action Plan should contain:

- the prescribed medication taken and when it is to be administered (for example, on a regular basis, as premedication to exercise or it if the student is experiencing symptoms)
- emergency contact details
- contact details of the student's medical or health practitioner
- details about deteriorating asthma including signs to recognise worsening symptoms, what to do during an attack or medication to be used

Visit [Asthma Australia](#) for the Asthma Action Plans for Victorian Schools.

Student Health Support Plan

An individual plan for each student diagnosed with asthma, developed in consultation with the student's parents or carers. These plans include the Individual Asthma Action Plan.

The Student Health Support Plan includes details on how the school will provide support, identify specific strategies and allocate staff to assist the student.

Epidemic thunderstorm asthma

Be prepared to follow advice from the Department, when the risk of epidemic thunderstorm asthma is forecast as high including:

- act on advice and warnings from the Department's Emergency Management Division associated with a potential thunderstorm asthma activity, and implement a communication strategy to inform the school community and parents or carers
- implement procedures to avoid exposure, such as staying indoors with windows and doors closed
- implement emergency response procedures and follow individual Asthma Action Plans as needed

Refer to the [Resources](#) tab for further information.

Annual asthma briefing for all staff

Schools may wish to conduct an annual asthma briefing at the beginning of the school year on:

- 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
- the location of, and access to, reliever medication that has been provided by parents or carers or the asthma emergency kits

References: School Policy and Advisory Guide
Anaphylaxis Management in Schools
Anaphylaxis Guidelines for Victorian Schools

Reducing asthma triggers

To reduce asthma triggers schools can:

- mow school grounds out of hours
- plant a low allergen garden
- limit dust, for example, having the carpets and curtains cleaned regularly and out of hours
- examine the cleaning products used in the school and their potential impact on students with asthma
- conduct maintenance that may require the use of chemicals, such as painting, during school holidays
- turn on fans, air conditioning and heaters out of hours when being used for the first time after a long period of non-use

Student asthma kit

Where an enrolled student is diagnosed with asthma, the child is required to bring their own prescribed reliever medication. This should be stored in their asthma kit with a copy of their Asthma Action Plan and their spacer.

The student's personal spacer should be washed monthly or cleaned as required:

- wash the spacer in warm soapy water
- do not rinse the spacer
- leave it to air dry
- wipe the mouthpiece before use

The student's spacer should be replaced if contaminated with blood or vomit.

Encourage participation in camps and special events

Schools should ensure:

- parents or carers provide enough medication (including preventer medication) for the student if they are going away overnight
- enough asthma emergency kits are available for the camp or excursion needs
- that parents or carers complete the [Asthma Australia's School Camp and Excursion Medical Update Form](#) and the Department's [Confidential Medical Form for Excursions](#).

Managing Exercise Induced Bronchoconstriction

If a student has Exercise Induced Bronchoconstriction (EIB), schools should ensure that they allow adequate time for the following procedures before, during and after exercise.

Before:

- blue or blue-grey reliever medication to be taken by student 15 minutes before exercise or activity (if indicated on the students' Asthma Action Plan)
- student to undertake adequate warm up activity

During:

References: School Policy and Advisory Guide
Anaphylaxis Management in Schools
Anaphylaxis Guidelines for Victorian Schools

- if symptoms occur, student to stop activity, take blue or blue-grey reliever medication, only return to activity if symptom free
- if symptoms reoccur, student to take blue or blue-grey reliever medication and cease activity for the rest of the day. This is known as ‘two strikes and out’

After:

- ensure cool down activity is undertaken
- be alert for symptoms

If a student has an asthma attack during, or after exercise or activity, follow their Asthma Action Plan if easily accessible, or commence asthma first aid. Always notify parents or carers of any incidents or medication usage.

Staff training

General school staff training

All school staff should undertake non-accredited training in asthma first aid management for education staff through Asthma Australia. Staff should complete the free 1 hour asthma education session at least every 3 years — this can be through a school visit or online through the [Asthma Community and Health Professional e-Learning Hub](#).

The training should be conducted every 3 years. The following training is available to all schools for access:

- [Supporting People Live Well with Asthma](#) — a 1 hour face-to-face training session for school staff, paid by each school
- [Asthma First Aid for Schools](#) — a 1 hour online training module for individual school staff, at no cost to schools

Targeted school staff training

The following school staff should undertake accredited training in asthma management by a Registered Training Organisation:

- staff working with high-risk children with a history of severe asthma
- staff with a direct student wellbeing responsibility such as nurses, first aid and camp organisers
- staff in high-risk teaching areas, such as physical education or sports teachers, home economics or cooking teachers

The following accredited asthma management courses are recognised for Victorian schools:

- [Course in Management of Asthma Risks and Emergencies in the Workplace \(Code: 22556VIC\)](#)
- 10760NAT Course in Asthma Management

Training is face-to-face and accredited for 3 years, paid by each school.

If a staff member has not yet completed training, the principal is responsible for developing an interim Student Health Support Plan that includes the student’s Asthma Action Plan in consultation with the student’s parents or carers. Training should take place as soon as practicable after the student diagnosed with asthma enrolls, preferably before the student’s first day at school.

Asthma emergency kits

Schools must provide and maintain at least 2 asthma emergency kits:

- 1 to keep at the school
- 1 to take as a mobile kit for activities such as excursions and camps

References: School Policy and Advisory Guide
Anaphylaxis Management in Schools
Anaphylaxis Guidelines for Victorian Schools

It is recommended that large schools have an additional kit for every 300 students, see the Locations section below for further advice regarding placement of asthma emergency kits.

Contents

Asthma emergency kits must contain:

- at least 1 blue or blue-grey reliever medication such as Airomir, Asmol, or Ventolin
- at least 2 spacer devices (for single person use only) to assist students to inhale the blue or blue-grey reliever medication (ensure spare spacers are available as replacements)
- clear written instructions on asthma first aid, including how to use the medication and spacer devices, and steps to be taken in treating an asthma attack (see the Guidance tab for further information)
- a record sheet or log for recording the details of a first aid incident, such as the number of puffs administered. Record sheets can be downloaded from the Asthma Australia website

Note: If schools are using the Lite-Aire Disposable Cardboard spacer in their asthma emergency kits, the school needs to be aware that the imagery is printed in refined soy ink. Although the risk of developing an allergic reaction to refined soy ink is low, there is still a risk and the risk should be taken into account when developing Individual Anaphylaxis Management Plans for students diagnosed with soy allergy and asthma.

Schools are not required to provide a nebuliser for students. If a student is prescribed a nebuliser, they should bring their own to school. Parents or carers can obtain information on the use of nebulisers from the manufacturer (all nebulisers are labelled with the manufacturer's name)

Complete asthma emergency kits can be purchased from Asthma Australia or the components through retail pharmacies.

Regular checks

A nominated staff member should be responsible for maintaining the asthma emergency kits, including:

- ensuring all contents are maintained and replaced when necessary
- regularly checking the expiry date on the canister of the blue or blue-grey reliever puffer and replacing it if expired or low on doses
- replacing spacers in the asthma emergency kit after each use (spacers are single person use only). Once used, the spacer can be given to that student or thrown away
- previously used spacers should be disposed of

Note: Schools can legally purchase a blue or blue-grey reliever puffer for first aid purposes from a pharmacist on the written authority of the principal

Cleaning requirements

Asthma spacers are single person use only. To avoid infection transmission via mucus, spacers and masks must only be used by the 1 student. They should be stored in a dustproof container.

Blue or blue-grey reliever medication 'puffers' in the asthma emergency kit may be used by more than 1 student, as long as they are used with a spacer. If the medication delivery device (for example, puffer) comes into contact with someone's mouth it cannot be reused by anyone else and must be replaced.

A guide to cleaning puffers is available on the Guidance tab.

Locations

Asthma emergency kits should be located strategically around the school and readily available in an asthma emergency. Mobile asthma emergency kits are also required for:

- the office or administration area
- yard duty
- excursions or sports days
- camps

Definitions

Asthma

Asthma is a long-term lung condition. For further information on asthma, refer to the Resources tab.

Asthma Action Plan

A plan completed by a student's medical practitioner which outlines the student's known triggers and the emergency procedures to be taken in the event of an asthma flare-up or attack.

Blue-grey reliever medication

This is usually Airomir, Asmol, or Ventolin.

Nebuliser

A machine that converts liquid medicine into a fine mist that can then be inhaled.

Puffer

A pressurised metered dose inhaler (pMDI). The medicine contained in the inhaler is in a fine mist. When you press the canister, this mist is released, and you breathe in to deliver the medicine to your airways.

Spacer

A holding chamber device that makes it easier to take asthma medication from the type of puffer. A spacer can also make it easier to coordinate breathing in and pressing your puffer.

Related policies

- [Decision Making Responsibilities for Students](#)
- [Excursions](#)
- [Health Care Needs](#)

This Policy was last ratified by School Council

August 2023

References: School Policy and Advisory Guide
Anaphylaxis Management in Schools
Anaphylaxis Guidelines for Victorian Schools