Rationale
St Patrick’s School is committed to raising the awareness of asthma amongst those involved with the school community. Approximately 1 in 8 children have currently been diagnosed asthmatic. It is a common cause for school absenteeism and is a major cause of childhood admissions to hospital. People die from asthma and more than half of these asthma deaths are preventable. With appropriate management the impact of asthma can be minimised.

Scriptural Context
“Help carry one another’s burdens and in this way you will obey the law of Christ.”
Galatians 6:2

Aims
The aim of this policy is to document strategies for implementation of best practice asthma management within a school’s setting so that:

• All staff are aware of which individuals are asthmatic
• All individuals who have asthma can receive appropriate attention as required
• We can respond to the needs of those who have not been diagnosed with asthma and who have an asthma attack or difficulty breathing

Guidelines
Asthma management is the co-responsibility of the school and family. This Policy outlines measures that need to be implemented to ensure the safety of all students. It is the responsibility of the Principal or delegated person to ensure that these guidelines are followed and practised. Management, staff and families each have a role in the effective control of asthma. This is outlined in the indicators.

• Recognising that asthma is widespread and can be serious and we welcome anybody with asthma
• Raising the awareness of asthma amongst those involved with our school
• Providing the opportunity for staff to receive training in recognising and responding to an asthmatic attack
• Keeping a record of all individuals with asthma when this information is provided to us
• Providing the necessary procedures to ensure the health and safety of all persons with asthma involved with our school
• Recognising that people with asthma need immediate access to their reliever medication at all times
• Providing an environment in which children with asthma can participate in all activities to their full potential
• Ensuring asthma emergency kits are available during all onsite and offsite activities

Guideline Indicators
Asthma management should be viewed as a shared responsibility. To this end each of the key groups within St Patrick’s Primary School gives the following undertakings:

The Management will:
• Identify children with asthma during the enrolment process.
• Ensure a copy of the Asthma Policy is available to parents through the school’s website.
• Provide all staff with a copy of the Asthma Policy and brief them on asthma procedures upon their appointment to the school.
• Provide opportunity & encouragement for staff to attend regular asthma training and ensure that at least one staff member responsible for first aid who has completed asthma training (Emergency Asthma Management) is on duty whenever children are being cared for or educated, including off site excursions.
• Provide an Asthma Record to all families of children with asthma upon enrolment.
• Ensure that all staff are informed of the children with asthma in their care.
• Formalise and document the internal procedures for Asthma First Aid, for both children with a diagnosis of asthma, and those with no known diagnosis of asthma (first attack).
• Ensure that an Asthma First Aid poster is displayed in a key location. See Appendix One.
• Ensure that the Asthma Emergency Kit contains a blue reliever puffer (e.g. Airomir, Asmol, Epaq or Ventolin), a spacer device and child mask if necessary and concise written instructions on Asthma First Aid procedures.
• Authorised staff member checks expiry dates.
• Promptly communicate any concerns to families should it be considered that a child’s asthma is limiting his/her ability to participate fully in all activities.

**Staff will:**
- Ensure that they maintain current Asthma First Aid training.
- Ensure that they are aware of the children in their care with asthma.
- In consultation with the family, optimise the health and safety of each child through supervised management of the child’s asthma.
- Ensure that all regular prescribed asthma medication is administered in accordance with the information on the Child’s Asthma Record.
- Administer emergency asthma medication if required according to the child’s Asthma Record. If no Asthma Record is available the Standard Asthma First Aid Plan should be followed immediately.
- Promptly communicate, to management and families, if they are concerned about the child’s asthma limiting his/her ability to participate fully in all activities.
- Encourage children to carry their reliever medication and use their medication as soon as symptoms develop.

**Families will:**
- Inform the school, either upon enrolment or on initial diagnosis, that their child has a history of asthma.
- Provide all relevant information regarding the child’s asthma via the Asthma Record as provided by the child’s doctor.
- Notify the staff, in writing, of any changes to the Asthma Record during the year.
• Ensure that their child has an adequate supply of appropriate medication (reliever) and spacer device clearly labeled with the child’s name including expiry dates.
• Communicate all relevant information and concerns with staff as the need arises e.g. if asthma symptoms were present during the night.

Strategies
School/ Community Health Education Curriculum
• Asthma awareness sessions during assemblies.
• Parent Information via Newsletter
• Students with asthma are encouraged to take part in normal sporting activities.

School Indoor Environment
• Pods with carpet will be vacuumed weekly.
• Ceiling fans and heating/cooling vents will be cleaned regularly.
• Low allergy / irritant cleaning agents will be used for cleaning.
• No smoking is allowed within the school grounds.

School Outdoor Environment
• Any insect sprays or weed sprays will be used on weekends or school holidays.

Excursions:
For every school sporting day, excursion or camp:
• A minimum of one staff member capable of managing an acute asthma attack will be present.
• Parents/ carers will be notified of their responsibility to ensure that their child has an adequate supply of appropriate medication.
• Students will be encouraged to continue taking usual medications and to always carry their blue reliever puffer. (Airomir, Bricanyl or Ventolin)
• A large volume spacer and blue reliever puffer will be carried in the school First Aid Kit/ Asthma First Aid Kit.
• A copy of the Asthma First Aid steps will be carried in the Offsite School First Aid Kit/ Asthma First Aid Kit.

Reflective Materials
• St. Patrick’s Vision Statement
• St. Patrick’s School Pastoral Care and Student Management Policy
• The Asthma Friendly Children’s Services Guidelines
• The Asthma Foundation of NSW’s Policies
• Occupational Health and Safety Act

This policy was last ratified by St. Patrick’s School Board in... September, 2006
Revised in... March, 2011
               November, 2015
Appendix One

1 How to assess an asthma attack

Mild Attack
• Soft wheeze
• Minor difficulty breathing
• No difficulty speaking in sentences
• Cough

Severe Attack
(Dial 000 for an ambulance)
• Very distressed and anxious
• Gasping for breath
• Unable to speak more than a few words in one breath
• Pale and sweaty
• May have blue lips
• Wheeze may be absent

Moderate Attack
• Loud wheeze
• Obvious difficulty breathing
• Able to speak in short sentences only
• Persistent cough

If a person has an asthma attack, follow the Asthma First Aid Plan.

If you assess an attack as severe, or in any doubt, call an ambulance (dial 000) immediately while following the Asthma First Aid Plan. Emergency contact should be notified.

Asthma Foundation

2 4 step Asthma First Aid Plan

Step 1
Sit the person upright. Be calm and reassuring. Do not leave the person alone.

Step 2
Without delay give 4 separate puffs of a blue reliever puffer eg, Aironir, Astmol, Epsol or Ventolin. One puff at a time via a spacer.* Ask the person to breathe in and out 4 times after each puff.

Step 3
Wait 4 minutes (observe and reassure)

Step 4
If there is little or no improvement repeat steps 2 & 3.

If still no improvement, severe breathing difficulty at any time or blueness around the mouth, call an ambulance (dial 000) immediately & state that the person is having an asthma attack.

Continue to follow steps 2 & 3 while waiting for an ambulance.

*If there is no spacer use the reliever puffer on its own.

3 How to use a spacer

1. Remove cap from the blue reliever puffer.
2. Hold puffer upright & shake it.
3. Fit puffer into the socket end of the spacer opposite the mouthpiece/spacer end.
4. Place spacer mouthpiece in the person’s mouth or mask over the nose and mouth.

One puff 4 breaths in & out through spacer
One puff 4 breaths in & out through spacer
One puff 4 breaths in & out through spacer
One puff 4 breaths in & out through spacer
TOTAL OF 4 PUFFS ALTOGETHER

When you’ve finished using the spacer, remove puffer from spacer and replace cap.

4 What to do next
(Including cleaning and storing of Asthma Emergency Kit)

Record the incident
Notify emergency contact

Cleaning (Must be carried out after each use)
1. Remove the metal canister from the plastic casing of the puffer.
2. Disassemble the spacer and clean mask/spacer and the plastic casing of the puffer in hot soapy water.
3. DO NOT RINSE. Allow to air dry.
4. When dry wipe mouthpiece of both the puffer and spacer with a 70% alcohol swab.
5. Put puffer, spacer (and mask) back in Asthma Emergency Kit (not in a plastic bag).

Remember...
• Check the expiry date of the puffer regularly and store below 30°C.
• Ensure the devices are stored in a dustproof container, as hygienically as possible.
• If blood contamination occurs - replace spacer