



# ALBANY RISE PRIMARY SCHOOL

## Asthma School Policy

RATIFIED BY SCHOOL COUNCIL: March 21<sup>st</sup> 2018

REVIEW DATE: 2021

### BACKGROUND:

Asthma affects up to one in four primary aged children, one in seven teenagers and one in ten adults. It is important therefore for all staff members to be aware of asthma, its symptoms and triggers, and the management of asthma in a school environment.

Asthma attacks involve the narrowing of airways making it difficult to breathe. Symptoms commonly include difficulty breathing, wheezing, dry and irritating cough, tightness in the chest and difficulty speaking. Triggers include exercise, colds, smoke, pollens, cold air, deodorants, dusts etc.

### PURPOSE:

- 1.1 To manage and support asthma sufferers at Albany Rise Primary School as sensitively, effectively and efficiently as possible at school.

### GUIDELINES:

- 2.1 All students with asthma must have an up to date (annual) written asthma management plan consistent with Asthma Victoria's requirements completed by their doctor or paediatrician. Appropriate asthma plan proformas are available at [www.asthma.org.au](http://www.asthma.org.au). For each student diagnosed with asthma, the school requires a written:
  - Asthma Care Plan
  - Student Health Support Plan (attached).
- 2.2 If no plan is available, children having an asthma episode are to be sat down, reassured, administered 4 puffs of a shaken reliever puffer (blue canister) delivered via a spacer – inhaling 4 deep breaths per puff, wait 4 minutes, if necessary administer 4 more puffs and repeat the cycle. An ambulance must be called if there is no improvement after the second 4-minute wait period, or if it is the child's first known attack.
- 2.3 The school will ensure all staff with a duty of care for students are trained to assess and manage an asthma emergency and complete the free one-hour Asthma Education session at least every three years as part of their first aid training.
- 2.4 Those staff with a direct student wellbeing responsibility such as PE/sport teachers, first aid and camp organisers will have completed the on line asthma course via Asthma Australia for schools at least every 3 years.
- 2.5 Equipment to manage an asthma emergency (such as Ventolin, Airomir, Asmol or Bricanyl and spacer devices) will be available in asthma first aid kits to be used on Camp and during sports events, (refer to: Asthma First Aid Kits in [Related policies](#), DET).
- 2.6 Asthma plans will be attached to the student's records for reference, and displayed in the sick bay for immediate reference.
- 2.7 Parents/guardians are responsible for ensuring their children have an adequate supply of appropriate asthma medication (including a spacer) with them at school at all times.
- 2.8 The school will provide, and have staff trained in the administering of, reliever puffers (blue canister) such as Ventolin, Airomir, Asmol or Bricanyl and spacer devices in all first-aid kits, including kits on excursions and camps.
- 2.9 Clear written instructions on how to use these medications and devices will be included in each first aid kit, along with steps to be taken to treat severe



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asthma attacks. Kits will contain 70% alcohol swabs to clean devices after use.

- 2.10 The first aid staff member and Assistant Principal will be responsible for ensuring the checking of reliever puffer expiry dates.
- 2.11 A nebuliser pump will not be used by the school staff unless a student's asthma management plan specifically recommends the use of such a device, and only then if the plan includes and complies DET policy.
- 2.12 Asthma spacers are single-person use only. To avoid infection transmission via mucus spacers and masks must only be used by the one person. They should be:
  - stored in a dustproof container. Spacers should not be stored in a plastic bag as this can cause static inside the spacer
  - cleaned once a month by the student/parent/carer.

Note: Blue/grey reliever medication 'puffers' may be used by more than one student, as long as they have been used with a spacer. If a puffer comes in contact with the mouth it cannot be re-used.

- 2.13 Care must be provided immediately for any student who develops signs of an asthma attack.
- 2.14 Children suffering asthma attacks should be treated in accordance with their asthma plan.
- 2.15 Parents must be contacted whenever their child suffers an asthma attack.
- 2.16 The school aims to reduce asthma triggers by ensuring students with Exercise Induced Asthma have a chance to warm up and cool down, to take a reliever medication before exercise, and to stop activity and take reliever medication if symptoms occur.
- 2.17 Classroom teachers should be aware of all students in their class who have an asthma plan and ensure communication with parents regarding students with asthma is undertaken regularly and as required.
- 2.18 The school will purchase blue/grey reliever puffers (as needed) for first aid purposes from a pharmacist on the written authority of the Principal

### References:

<http://www.education.vic.gov.au/school/principals/spag/health/Pages/conditionasthma.aspx>

<http://www.asthma.org.au/>

<http://www.education.vic.gov.au/school/principals/spag/health/Pages/asthma.aspx>

<http://www.education.vic.gov.au/school/principals/spag/health/pages/supportplanning.aspx>

Principal: \_\_\_\_\_

School Council President: \_\_\_\_\_

Date ratified by School Council: \_\_\_\_\_

March 21<sup>st</sup> 2018

To be reviewed: \_\_\_\_\_

2021



# STUDENT HEALTH SUPPORT PLAN - Cover Sheet

This plan outlines how the school will support the student's health care needs, based on health advice received from the student's medical/health professional. This form must be completed for each student with an identified health care need. This plan is to be completed by the principal or nominee in collaboration with the parent/carer and student.

School:		Phone:
Student's name:		Date of birth:
Year level:		Proposed date for review of this Plan:
Parent/carer contact information (1)	Parent/carer contact information (2)	Other emergency contacts (if parent/carer not available)
Name:	Name:	Name:
Relationship:	Relationship:	Relationship:
Home phone:	Home phone:	Home phone:
Work phone:	Work phone:	Work phone:
Mobile:	Mobile:	Mobile:
Address:	Address:	Address:

Medical /Health practitioner contact:

Ideally, this plan should be developed based on health advice received via the appropriate Departmental Medical Advice form or in case of asthma, the Asthma Foundation's *School Asthma Action Plan*. Please tick the appropriate form which has been completed and attach to this Plan. All forms are available from Section 4.5 *Student Health* in the *Victorian Government Schools Reference Guide*: <http://www.eduweb.vic.gov.au/referenceguide/>.

- |   |  |
|---|--|
| <input type="checkbox"/> <b>General Medical Advice Form - for a student with a health condition</b> | <input type="checkbox"/> <b>Condition Specific Medical Advice Form – Epilepsy</b>  |
| <input type="checkbox"/> <b>School Asthma Action Plan</b>   | <input type="checkbox"/> <b>Personal Care Medical Advice Form - for a student who requires support for transfers and positioning</b> |
| <input type="checkbox"/> <b>Condition Specific Medical Advice Form – Cystic Fibrosis</b>            | <input type="checkbox"/> <b>Personal Care Medical Advice Form - for a student who requires support for oral eating and drinking</b>  |
| <input type="checkbox"/> <b>Condition Specific Medical Advice Form – Acquired Brain Injury</b>      | <input type="checkbox"/> <b>Personal Care Medical Advice Form - for a student who requires support for continence</b>                |
| <input type="checkbox"/> <b>Condition Specific Medical Advice Form – Cancer</b>                     |  |
| <input type="checkbox"/> <b>Condition Specific Medical Advice Form – Diabetes</b>                   |  |

List who will receive copies of this *Student Health Support Plan*:

1. Student's Family                      2. Other:    3.

The following *Student Health Support Plan* has been developed with my knowledge and input :

Name of parent/carer or adult/independent student: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please note: adult student is a student 18years of age and older. Independent student is a student under the age of 18years and living separately and independently from parents/guardians (see Victorian Government Schools Reference Guide 4.6.14.5).

Name of principal (or nominee): : \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Privacy Statement

The school collects personal information so as the school can plan and support the health care needs of the student. Without the provision of this information the quality of the health support provided may be affected. The information may be disclosed to relevant school staff and appropriate medical personnel, including those engaged in providing health support as well as emergency personnel, where appropriate, or where authorised or required by another law. You are able to request access to the personal information that we hold about you/your child and to request that it be corrected. Please contact the school directly or FOI Unit on 96372670.



## How the school will support the student's health care needs

Student's name:	
Date of birth:	Year level:
What is the health care need identified by the student's medical/health practitioner?	
Other known health conditions:	
When will the student commence attending school?	
Detail any actions and timelines to enable attendance and any interim provisions:	

**Below are some questions that may need to be considered when detailing the support that will be provided for the student's health care needs. These questions should be used as a guide only.**

Support	What needs to be considered?	Strategy – how will the school support the student's health care needs?	Person Responsible for ensuring the support
<b>Overall Support</b>	Is it necessary to provide the support during the school day?	<i>For example, some medication can be taken at home and does not need to be brought to the school.</i>	
	How can the recommended support be provided in the simplest manner, with minimal interruption to the education and care program?	<i>For example, students using nebulisers can often learn to use puffers and spacers at school.</i>	
	Who should provide the support?	<i>For example, the principal, should conduct a risk assessment for staff and ask: Does the support fit with assigned staff duties and basic first aid training ( see the Department First Aid Policy <a href="http://www.education.vic.gov.au/hrweb/ohs/health/firstaid.htm">www.education.vic.gov.au/hrweb/ohs/health/firstaid.htm</a>) If so, can it be accommodated within current resources? If not, are there additional training modules available</i>	
	How can the support be provided in a way that respects dignity, privacy, comfort and safety and enhances learning?	<i>For example, detail the steps taken to ensure that the support provided respects the students, dignity, privacy, comfort and safety and enhances learning.</i>	
<b>First Aid</b>	Does the medical/health information highlight any individual first aid requirements for the student, other than basic first aid?	<i>Discuss and agree on the individual first aid plan with the parent/carer. Ensure that there are sufficient staff trained in basic first aid (see the Department's First Aid Policy <a href="http://www.education.vic.gov.au/hrweb/ohs/health/firstaid.htm">www.education.vic.gov.au/hrweb/ohs/health/firstaid.htm</a>) Ensure that all relevant school staff are informed about the first aid response for the student</i>	



Support	What needs to be considered?	Strategy – how will the school support the student's health care needs?	Person Responsible for ensuring the support
<b>First Aid, cont'd</b>	Does the school require relevant staff to undertake additional training modules not covered under basic first aid training, such as staff involved with excursions and specific educational programs or activities	<p><i>Ensure that relevant staff undertake the agreed additional training</i></p> <p><i>Ensure that there are interim provisions in place (whilst awaiting the staff member to receive training), to ensure the student's attendance at school.</i></p>	
<b>Complex/ Invasive health care needs</b>	Does the student have a complex medical care need?	<p><i>Is specific training required by relevant school staff to meet the student's complex medical care need?</i></p> <p><i>Can the training be obtained through the Department funded Schoolcare Program? If so, the School should complete the relevant referral forms which can be accessed by contacting the Royal Children's Hospital's Home and Community Care on 9345 6548.</i></p> <p><i>Consider if the following program/services are required: the Program for Students with Disabilities or Visiting Teachers Service.</i></p>	
<b>Routine Supervision for health-related safety</b>	Does the student require medication to be administered and/or stored at the School?	<p><i>Ensure that the parent/carer is aware of the School's policy on medication management.</i></p> <p><i>Ensure that written advice is received, ideally from the student's medical/health practitioner for appropriate storage and administration of the medication – via the Department's Medication Authority Form</i></p> <p><i>Ensure that a medication log or equivalent official medications register is completed by the person administering the taking of the medication.</i></p>	
	Are there any facilities issues that need to be addressed?	<p><i>Ensure the schools first aid room/sick bay and its contents provide the minimum requirements and discuss and agree if other requirements are needed in this room to meet the student's health care needs.</i></p> <p><i>Ensure the school provides sufficient facilities to assist a student who requires a wheelchair or other technical support. Discuss this with the parent/carer/student</i></p>	
	Does the student require assistance by a visiting nurse, physiotherapist, or other health worker?	<p><i>Detail who the worker is, the contact staff member and how, when and where they will provide support.</i></p> <p><i>Ensure that the school provides a facility which enables the provision of the health</i></p>	
	Who is responsible for management of health records at the school?	<i>Ensure that information privacy principles are applied when collecting, using, retaining or disposing of personal or health information.</i>	
	Where relevant, what steps have been put in place to support continuity and relevance of curriculum for the student?	<i>For example, accommodation in curriculum design and delivery and in assessment for a student in transition between home, hospital and school; for a student attending part-time or episodically.</i>	
<b>Personal Care</b>	Does the medical/health information highlight a predictable need for additional support with daily living tasks?	<p><i>Detail how the school will support the student's personal care needs, for example in relation to nose blowing, washing hands, continence care</i></p> <p><i>Would the use of a care and learning plan for</i></p>	



Support	What needs to be considered?	Strategy – how will the school support the student's health care needs?	Person Responsible for ensuring the support
<b>Other considerations</b>	Are there other considerations relevant for this health support plan?	<p><i>For example, in relation to behaviour, such as special permission to leave group activities as needed; planned, supportive peer environment.</i></p> <p><i>For example, in relation to the environment, such as minimising risks such as allergens or other risk factors.</i></p> <p><i>For example, in relation to communication, is there a need to formally outline the communication channels between the school, family and health/medical practitioner?</i></p> <p><i>For example, is there a need for planned support for siblings/peers?</i></p>	

Online copies of this form are available from:

<http://www.education.vic.gov.au/school/principals/spag/health/Pages/supportplanning.aspx> and

<http://www.rch.org.au/education/parents/student-health-support-planning-templates/>





# Asthma care plan for education and care services

**CONFIDENTIAL:** Staff are trained in asthma first aid (see overleaf) and can provide routine asthma medication as authorised in this care plan by the treating doctor. Please advise staff in writing of any changes to this plan.

To be completed by the treating doctor and parent/guardian, for supervising staff and emergency medical personnel.

PLEASE PRINT CLEARLY

Photo of student  
(optional)

Plan date

/ / 201

Review date

/ / 201

Student's name

Date of birth

## Managing an asthma attack

Staff are trained in asthma first aid (see overleaf). Please write down anything different this student might need if they have an asthma attack:

## Daily asthma management

This student's usual asthma signs

- ☐ Cough
- ☐ Wheeze
- ☐ Difficulty breathing
- ☐ Other (please describe)

Frequency and severity

- ☐ Daily/most days
- ☐ Frequently (more than 5 x per year)
- ☐ Occasionally (less than 5 x per year)
- ☐ Other (please describe)

Known triggers for this student's asthma (eg exercise\*, colds/flu, smoke) — please detail:

- Does this student usually tell an adult if s/he is having trouble breathing? ☐ Yes ☐ No
- Does this student need help to take asthma medication? ☐ Yes ☐ No
- Does this student use a mask with a spacer? ☐ Yes ☐ No
- \*Does this student need a blue reliever puffer medication before exercise? ☐ Yes ☐ No

## Medication plan

If this student needs asthma medication, please detail below and make sure the medication and spacer/mask are supplied to staff.

Name of medication and colour	Dose/number of puffs	Time required

## Doctor

Name of doctor

Address

Phone

Signature

Date

## Parent/Guardian

I have read, understood and agreed with this care plan and any attachments listed. I approve the release of this information to staff and emergency medical personnel. I will notify the staff in writing if there are any changes to these instructions. I understand staff will seek emergency medical help as needed and that I am responsible for payment of any emergency medical costs.

Signature

Date

Name

## Emergency contact information

Contact name

Phone

Mobile

Email



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