



## ASTHMA MANAGEMENT POLICY

<b>Document Title</b>	Asthma Management Policy
<b>Date</b>	2015
<b>Author/s</b>	Health Centre Team Deputy Principal Student Wellbeing
<b>Version Status</b>	WB0318P
<b>Document Location</b>	College Website, SIMON Intranet and Staff Handbook

### Rationale

Avila College (the College) reflecting the Christian values of the Presentation Order is committed to promoting full engagement with all aspects of College life for all students. The College is committed to providing, as far as practicable, a safe and supportive environment for the student with Asthma. It is important to understand that Asthma is a long-term (chronic) otv(i)5(c))-3( )-2otv(i)5(c))-3( )-2otv(i)5(c))-3( )-2

coughing alongside other symptoms.

You do not need to have all of these symptoms to be diagnosed with Asthma. Symptoms vary from person to person.

### **Asthma flare-up**

An Asthma flare-up is when Asthma symptoms start up or get worse compared to usual. The symptoms themselves and need treatment. These flare-ups can happen quite quickly (i.e. exposure to smoke) but they can also come on gradually over hours or days (i.e. if you get a cold).

### **Common triggers may include, but are not limited to:**

- exercise;
- colds/flu;
- smoke (cigarette smoke, smoke from open fires, burn-offs or bushfires);
- weather changes;
- dust and dust mite;
- moulds;
- pollens;
- animals;
- chemicals;
- deodorants (including perfumes, after-shaves, hair spray and deodorant sprays);
- foods and additives;
- certain medications (including aspirin and non-steroidal anti-inflammatories); and/or
- emotions.

Asthma and allergies are closely linked. Asthma is more common in families with allergies but not everyone with Asthma has allergies.

### **Thunderstorm Asthma**

Grass pollen season brings an increase in Asthma and hay fever. It also brings the chance of Thunderstorm Asthma.

Grass pollen grains get swept up in the wind and carried for long distances. Some can burst open and release tiny particles that are concentrated in the wind gusts that come just before a thunderstorm. These particles are small enough to be breathed deep into the lungs and can trigger Asthma symptoms, making it difficult to breathe.

For people with hay fever especially those who experience wheezing or coughing with their hay fever Thunderstorm Asthma can be sudden, serious and even life threatening.

Students in collaboration with their parents/carers are encouraged to manage their hay fever, and reduce their risk of developing Thunderstorm Asthma by administering antihistamines prior to coming to school. Antihistamines are available at the Health Centre and can be administered only with parents/carers permission. Parents/carers may record permission for antihistamine on CareMonkey. Consultation with a medical practitioner is encouraged for a Hay Fever Treatment Plan.

On days where there is a Thunderstorm Asthma warning, from October through to December, especially in wind gusts before the storm, at risk students should be encouraged to stay inside with doors and windows closed and air conditioning on recirculate only.

If a student has Asthma symptoms but no Asthma Action Plan follow the four steps of Asthma first aid and recommend follow up with a medical practitioner.

### **Documentation**

Every student with Asthma attending the College will have a written Asthma Action Plan (Appendix 8) completed by their

The provision of an Asthma Action Plan and the shared approach ensures that:

Students with Asthma are readily identified;  
Usual medical treatment (medication taken on a regular basis and a premedication prior to exercise) is identified;  
Details are provided on what to do in the event of deteriorating Asthma and details of medication to be used including what to do during an acute Asthma attack;  
The medical section in the Confirmation of Student details includes an Asthma Action Plan and the necessary questions that identify students with Asthma. The completed form is then returned to the Health Centre Team;  
New students will be identified from information provided by parents/carers at the time of enrolment;  
Current students receive an Asthma Action Plan on a yearly basis, which can be updated by parents/carers via the CareMonkey portal if any changes take place during the school year;  
When an Asthma Action Plan is received by the Health Centre Team the details are entered





# APPENDIX: Asthma Action Plan

FOR USE WITH PUFFER AND SPACER  
**ASTHMA ACTION PLAN**



**VICTORIAN SCHOOLS**

Student's name: \_\_\_\_\_

<p>1. <b>Reliever</b> (SABA) <b>as prescribed</b> for relieving symptoms</p> <p>2. <b>Controller</b> (LTRA or LABA/LTRA or ICS/LABA) <b>as prescribed</b></p> <p>3. <b>Adrenaline autoinjector</b> if prescribed</p>	<p>4. <b>Reliever</b> (SABA) <b>as prescribed</b> for relieving symptoms</p> <p>5. <b>Controller</b> (LTRA or LABA/LTRA or ICS/LABA) <b>as prescribed</b></p> <p>6. <b>Adrenaline autoinjector</b> if prescribed</p>
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**Always** give adrenaline autoinjector **FIRST**, and then asthma reliever puffer if someone with known asthma and ts or medication has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or there are no skin symptoms).

**ALWAYS** give adrenaline autoinjector if there is a known allergy to food, insect or medication (including hoarse voice) even if there are no skin symptoms.

As prescribed:     Type of adrenaline autoinjector: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ASTHMA FIRST AID**

Give 5 rapid shallow breaths if a child is breathing alone and not breathing well. Call for help if you are not sure.

Give 10 rapid shallow breaths if a child is breathing alone and not breathing well. Call for help if you are not sure.

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