



**Catholic
Ladies' College**

Asthma Management

CATHOLIC LADIES' COLLEGE LTD
MARY AIKENHEAD MINISTRIES IN
THE TRADITION OF THE SISTERS
OF CHARITY

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Catholic Ladies' College Ltd

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Asthma Management Policy

Catholic Ladies' College is a Mary Aikenhead Ministry in the tradition of the Sisters of Charity. We seek to develop in each member of our community a contemporary understanding and application of the charism of Mary Aikenhead, the spirituality of the Sisters of Charity, the mission and vision of Mary Aikenhead Ministries and their values of justice, love, compassion and hope.

In responding to this call Catholic Ladies' College is a Christ-centred community established to educate, in partnership with parents, women of faith, integrity, individuality and compassion, confident of their own worth as women and wholly involved in the transformation of society.

The Hazard

Asthma affects around 11% of Australian children and is one of the most common reasons for absenteeism and hospital admission in school aged children.

Asthma attacks must be identified quickly and treated correctly to ensure the best outcome for students affected. Teachers and staff must be aware of the symptoms, triggers and best practice management of asthma so they can assist their asthmatic students while at College.

If you think a student may be having a serious asthma attack, call an ambulance and give the student reliever medication in accordance with the student's Asthma Action Plan or the Asthma First Aid Plan.

Legal Obligations

The Victorian Registration Standards (sch 2 cl 12) require that the College must ensure that the care, safety and welfare of all students attending the college is in accordance with any applicable State and Commonwealth laws, and that all staff are advised of their obligations under those laws.

All staff have a duty of care to take reasonable steps to protect a student in their care from risks of injury that are reasonably foreseeable. The keys to prevention of an asthma attack is knowledge of the student who has been diagnosed with asthma, awareness of asthma triggers, and prevention of exposure to those triggers. Partnerships between schools and parents/carers are important in helping the student avoid an asthma attack.

Asthma also falls within the definition of disability for the purposes of both the Equal Opportunity Act 2010 (Vic) and the Disability Discrimination Act 1992 (Cth). This means that schools must ensure that they do not unlawfully discriminate, either directly or indirectly, against students with asthma. Refer to Disability Discrimination Policy.

Catholic Ladies' College's Policy

Catholic Ladies' College is committed to providing a safe learning environment for all students and complying with the Department of Education and Training's Asthma Guidelines as amended by the Department from time to time (Guidelines).

It is our policy that:

- We provide, as far as practicable, a safe and supportive environment in which students diagnosed with asthma can participate equally in all aspects of the student's schooling
- We adopt the recommendations of the Guidelines where relevant to the College
- Asthma Emergency Kits and other reliever medication are purchased, stored and maintained in accordance with the guidelines and the College's particular circumstances.
- Strategies are in place to communicate with and advise staff, students and parents/carers and to raise awareness about asthma and the College Asthma Management Policy in the college community
- Staff are appropriately trained and have knowledge about asthma and the College's asthma prevention strategies and policies and procedures in responding to an asthma attack.

Safe Work Practices

Catholic Ladies' College has developed the following work practices and procedures for maintaining asthma:

- Identifying Asthma – Causes, Signs and Symptoms
- Individual Asthma Risk Minimisation Plans
- Asthma Emergency Kits and Reliever Medication
- Asthma Communication Plan
- College Planning and Emergency Response Procedure
- Prevention Strategies
- Asthma Training and Briefings.

Risk Management Checklist

The Principal completes the annual Risk Management Checklist to monitor the College's compliance with the Guidelines and this policy.

We regularly update the Risk Management Checklist in line with any changes to the information on the Department of Education and Training's Asthma Management in Schools page.

The Guidelines recommend that designated staff members are given certain responsibilities for asthma management, including conducting the annual asthma briefing and reviewing reliever medication.

These staff may include a

- College employed nurse
- First aid Manager
- Health and wellbeing coordinator or other health and wellbeing staff

The College will allocate specific responsibilities in relation to asthma management to designated staff members when required under this policy.

Key Definitions

Asthma

Asthma is a disease of the airways. Asthma is a long-term (chronic) disease. Asthma symptoms can be triggered by different things for different people. Common triggers include colds and flu, allergies and cigarette smoke.

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 harder 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.

In this policy, the terms asthma attack and asthma flare-up are both used.

Asthma Action Plan

Also known as Asthma Care Plans and Asthma Management Plans, the Asthma Action Plan lists the student's prescribed asthma medication as well as the signs and symptoms students show when they are experiencing an asthma attack, including treatment for said attack. This plan is one of the requirements of the student's Individual Asthma Risk Minimisation Plan.

To assist staff in identifying asthma signs and symptoms, including their severity and action to be taken, the Asthma Foundation of Victoria has developed preferred Action Plans for use in schools. These are designed to complement, rather than replace the student's Asthma Action Plan. It is our preference that the Asthma Foundation's Action Plans are used by students.

If a student presents with a different Asthma Action Plan, the First Aid Manager in consultation with the student's parents/carers can transcribe the information on to the specific Asthma Action Plan for Victorian Schools. This Action Plan must be signed by the parent of the student for authenticity and the original Asthma Action Plan provided by the parent must be kept in the student's file.

Asthma Emergency Kit

A specific first aid kit for asthma designed to be portable in an emergency.

Asthma Emergency Kits can be purchased from Asthma Australia or the Asthma Foundation and reliever medication is available from pharmacies.

Asthma Education Session

An education session delivered by the Asthma Foundation of Victoria, the National Asthma Council or another asthma peak body designed to educate staff on the basics of asthma. This can be a face-to-face session or online training.

Asthma Management Training Course

This means:

- a course in asthma management training that is accredited as either a:
- VET accredited course in accordance with Part 3 of the National Vocational Education and Training Regulator Act 2011 (Cth) that includes a competency check in the administration of a pressure metered dose inhaler (puffer) and spacer device, or
- course in asthma management training accredited under Chapter 4 of the Education and Training Reform Act 2006 by the Victorian Registration and Qualifications Authority that includes a competency check in the administration of a pressure metered dose inhaler (puffer) and spacer device
- any other course including an online course, approved by the Department for the purpose of these Guidelines.

Communication Plan

A plan developed by the school which provides information to all school staff, students and parents about asthma and the school's asthma management policy.

Diagnosed with Asthma

In relation to a student, means a student who has been diagnosed by a medical practitioner as having a medical condition that relates to asthma and is at high risk of having an asthma episode at school.

Exercise Induced Bronchoconstriction (EIB)

EIB (formerly known as exercise induced asthma) is a temporary narrowing of the lower airways, occurring after vigorous exercise. While EIB can occur without asthma, up to 90% of people with asthma experience EIB.

Individual Asthma Risk Minimisation Plan

An individual plan for each student at risk of asthma, developed in consultation with the student's parents. The Individual Asthma Risk Minimisation Plan includes the Asthma Action Plan which describes the student's triggers, symptoms, and the emergency response to administer the student's reliever medication should the student display symptoms of an asthma attack.

Reliever Medication

Medication, approved for use by the Commonwealth Government Therapeutic Goods Administration, which can be used to treat a person experiencing an asthma attack. These may include Salbutamol, Bricanyl and Symbicort.

Roles and Responsibilities

Section 9 of the Guidelines sets out the suggested role and responsibilities of the Principal. The Principal will:

- Ensure that the College develops, implements and routinely reviews this policy in accordance with the Guidelines
- Actively seek 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)
- Ensure that parents/carers provide an Asthma Action Plan which has been signed by the student's medical practitioner and that contains an up-to-date photograph of the student
- Ensure that an Individual Asthma Risk Minimisation Plan is developed in consultation with the student's parents/carers for any student that has been diagnosed by a medical practitioner with asthma, where the College has been notified of that diagnosis
- Ensure students' Individual Asthma Risk Minimisation Plans are communicated to staff
- Ensure that parents/carers provide the College 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
- Ensure that an appropriate Communication Plan is developed
- Ensure there are procedures in place for providing information to college volunteers and casual relief staff about students diagnosed with asthma and their role in responding to a student having an asthma attack in their care
- Ensure that relevant college staff have successfully completed approved asthma training and that their accreditation is current
- Ensure that there are sufficient numbers of trained staff available to supervise students diagnosed with asthma while they are under the care or supervision of the College, including excursions, yard duty, camps and special event days
- Ensure that all college staff are briefed at least annually by appropriately trained staff member
- Allocate time, such as during staff meetings,
- To discuss, practice and review this policy
- Encourage ongoing communication between parents/carers and college staff about the current status of the student's asthma, the College's policies and their implementation
- Ensure that the student's Individual Asthma Risk Minimisation Plan and this policy are reviewed as required
- Ensure the Risk Management Checklist for asthma is completed annually
- Arrange to purchase and maintain an appropriate number of Asthma Emergency Kits for general use to be part of the College's first aid kit.

College Asthma Supervisors will:

- have current asthma management training and ensure they have a higher level of knowledge relating to asthma management, in particular in the correct use of a puffer and spacer
- lead the annual asthma college briefing
- conduct regular reviews of the reliever medications to ensure they are not out-of-date
- inform casual relief teachers, specialist teachers and volunteers about this policy, the names of any students diagnosed with asthma, the location of each student's Individual Asthma Risk Minimisation Plan and reliever medication and each individual person's responsibility in managing an incident
- briefing all volunteers, casual relief staff and new college staff of the College's Communication Plan and their role in responding to a student having an asthma attack in their care.

Roles and Responsibilities: Staff

Section 9 of the Guidelines sets out the suggested role and responsibilities of staff. The College staff will:

- know and understand the requirements of this policy
- know the identity of students who are diagnosed with asthma and know their face
- understand the causes, symptoms, and treatment of asthma
- obtain regular in how to recognise and respond to an asthma attack, including administering reliever medication
- know where to find a copy of each student's Asthma Action Plan quickly, and follow it in the event of an asthma flare-up/attack
- know the College's general first aid and emergency response procedures, and understand their role in relation to responding to a severe or life-threatening asthma attack
- know where students' reliever medication and the Asthma Emergency Kits for general use are kept
- know and follow the prevention and risk minimisation strategies in the student's Individual Asthma Risk Minimisation Plan
- plan ahead 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 the college, or away from the college
- be aware of the possibility of hidden triggers in art supplies, traces of triggers when using items such as paint cleaning chemicals in art or food additives in cooking classes, or students being at risk of an asthma attack when they experience extreme emotions induced at college (e.g. stress during exams)
- raise student awareness about asthma and the importance of their role in fostering a college environment that is safe and supportive for their peers.

Roles and Responsibilities: Parents/Carers

Section 9 of the Guidelines sets out the suggested role and responsibilities of parents/carers of students diagnosed with asthma. Parents/carers of students diagnosed with asthma will:

- inform the College in writing, either at enrolment or diagnosis, of the student's asthma
- obtain and provide the College with an Asthma Action Plan from the student's medical practitioner that details their condition, and any medications to be administered, and other emergency procedures
- inform college staff in writing of any changes to the student's medical condition and if necessary, provide an updated Asthma Action Plan
- provide the College with an up-to-date photo for the student's Asthma Action Plan and when the plan is reviewed
- meet with and assist the College to develop the student's Individual Asthma Risk Minimisation Plan, including risk management strategies
- provide the College with reliever medication and spacer device, where the medication is administered by a puffer, that are current and not expired
- replace the student's reliever medication as needed, before their expiry date or when used assist college staff in planning and preparation for the student prior to camps, field trips, incursions, excursions or special events (e.g. class parties, cultural days, fetes or sport days)
- inform college staff in writing of any changes to the student's emergency contact details
- participate in reviews of the student's Individual Asthma Risk Minimisation Plan

Worker Responsibilities

All workers must follow the asthma management requirements set out in this policy.

Signage

Copies of the Individual Asthma Risk Minimisation Plan and Asthma Action Plan for each student with asthma are displayed in various locations around the College.

Implementation

This policy is implemented through a combination of:

- Staff training and supervision
- Maintenance of medical records
- Implementation of prevention strategies
- Effective incident notification procedures
- Effective communication procedures with the student's parents/carers
- Initiation of corrective actions where necessary.

Related Policies

- Student Duty of Care (Summary)
- Anaphylactic Shock Management
- Allergy Awareness
- Bites & Stings
- Critical Incident (Emergency Situations) Response
- First Aid
- Medication Administration
- Needles & Syringes
- Medical Records (Student)
- Disability Discrimination

Related Documents

- Victorian Asthma Action Plans
- Individual Asthma Risk Minimisation Plan Template
- Facilitator Guide for Asthma Management
- Asthma Management Briefing Presentation
- Annual Risk Management Checklist
- Prevention Strategies for Schools

Key Reference

This policy has been developed having regard to the 'Asthma Guidelines for Victorian Schools'.

Identifying Asthma – Causes, Signs and Symptoms

What is asthma?

Refer to **Asthma Management** for a definition of asthma.

Main causes of asthma

- Allergens
- Airborne/ environmental irritants
- Certain medicines
- Dietary triggers
- Respiratory tract infections
- Certain medical conditions
- Physiological and psychological changes.

The most common asthma triggers for students are exercise, colds and flus and cigarette smoke.

The best way to reduce an asthma flare-up/attack occurring is to avoid / reduce, where possible, certain triggers and manage exposure to other triggers.

Exercise induced bronchoconstriction (EIB)

Children with asthma can and should participate in physical activity. Exercise induced asthma can be managed effectively with relievers and preventers (or both) and should not stop children with asthma participating in activities unless they are already unwell.

If a student has EIB College staff will allow adequate time for the asthma prevention strategies for exercise. Refer to **Prevention Strategies**.

Thunderstorm Asthma

Thunderstorm asthma is a form of asthma that is triggered by an uncommon combination of high pollen (usually during late Spring to early Summer) and a certain kind of thunderstorm. Anyone can be affected, even if they don't have a history of asthma.

People at increased risk have:

- a history of asthma
- unrecognised asthma
- hay fever (allergic rhinitis), particularly seasonal hay fever
- allergies to grass pollen.

Signs and Symptoms

The most common symptoms of asthma are:

- wheezing – a continuous, high-pitched sound coming from the chest while breathing
- shortness of breath – a feeling of not being able to get enough air
- a feeling of tightness in the chest
- persistent coughing – alongside other symptoms.

The table below from the Guidelines describes the symptoms of different types of asthma attacks. Symptoms will vary from student to student.

Type	Symptoms
Mild / Moderate	<ul style="list-style-type: none"> • may have a cough • may have a wheeze • minor difficulty in breathing
Severe	<ul style="list-style-type: none"> • cannot speak a full sentence in one breath • may have a cough • may have a wheeze • obvious difficulty in breathing. • Sitting hunched forward • Lethargic (children) • Tugging in of skin over the chest and throat • Sore tummy (young children)
Life-threatening	<ul style="list-style-type: none"> • unable to speak or 1-2 words more than a few words per breath • being very distressed and anxious • collapsed, exhausted, unconscious • wheeze and cough may be absent • gasping for breath • pale and sweaty • may have blue lips discolouration • sucking in of skin over ribs/throat • drowsy/confused.

Recognising Symptoms of Poorly Controlled Asthma

The following symptoms may indicate that a student's asthma is poorly controlled, however symptoms will vary from student to student:

- frequent absenteeism from College due to asthma
- students regularly use their reliever medication more than 2 times per week to ease asthma symptoms
- tiredness/poor concentration
- student is unable to exercise or play sport due to asthma.

If a staff member believes that a student may have poorly controlled asthma, they should notify the Asthma Supervisor or First Aid Manager or the Principal, who will inform the parents/carers and may advise them to seek medical advice.

Individual Asthma Risk Minimisation Plans

Identification of Students at Risk

Parents/ carers are requested to notify the College of all student medical conditions including asthma. Refer to our Medical Records (Student) Policy.

Students who are identified as having asthma are considered high risk. For each of these students an Individual Asthma Risk Minimisation Plan should be developed and regularly reviewed and updated.

Catholic Ladies' College maintains a complete and up-to-date list of students identifying as being diagnosed with asthma. It is the responsibility of the First Aid Manager to keep this list up-to-date. This list is kept on College database software, Synergetic and Reception drive.

Key Definitions

Refer to Asthma Management.

Preparing an Individual Asthma Risk Minimisation Plan

Where the College has been notified of a student diagnosed with asthma, the Principal will be responsible for ensuring that an Individual Asthma Risk Minimisation Plan is developed in consultation the student's parents/carers, for any student who has been diagnosed by a medical practitioner as having asthma.

The Individual Asthma Risk Minimisation Plan should be in place as soon as practicable after the student is enrolled, and where possible before their first day at the college.

Plan Contents

Individual Asthma Risk Minimisation Plans must include the following:

- Information about the student's medical condition that relates to asthma and the potential for severe/ life-threatening asthma attack, including the type of triggers the student has (based on a written diagnosis from a medical practitioner)
- Strategies to minimise the risk of exposure to known and notified triggers while the student is under the care or supervision of the College
- The name of the person(s) responsible for implementing the strategies
- Information on where the student's medication will be stored
- The student's emergency contact details
- A completed Asthma Action Plan signed by a medical practitioner.

Review of Plan

The student's Individual Asthma Risk Minimisation Plan will be reviewed, in consultation with the student's parents/carers:

- Annually, and as applicable
- If the student's medical condition, insofar as it relates to asthma, changes
- As soon as practicable after the student has a severe/life-threatening asthma attack at college
- When the student is to participate in an off-site activity, or at a special event conducted, organised or attended by the College.

Responsibilities in Relation to Plan

All college staff are expected to know and follow the prevention and risk minimisation strategies in each student's Individual Asthma Risk Minimisation Plan.

It is recommended that the Principal:

- Ensure that the student's Individual Risk Minimisation Plan is developed in consultation with the student's parents/carers for any student that has been diagnosed by medical practitioner with asthma, where the college has been notified of that diagnosis
- Communicate Individual Risk Minimisation Plans to staff.

It is the responsibility of parents/carers of students diagnosed with asthma to:

- Provide the Asthma Action Plans signed by the medical practitioner
- Inform the College in writing if their child's medical condition, insofar as it relates to asthma, changes and if relevant provide an updated Asthma Action Plan
- Provide an up-to-date photo for the Asthma Action Plan when the Plan is provided to the school and when it is reviewed
- Provide the school with asthma reliever medication that is current and not expired for their child
- Meet with and assist the College to develop the student's Individual Asthma Risk Minimisation Plan
- Participate in reviews of the student's Individual Risk Minimisation Plan.

Location of Plan

- A copy of each student's Individual Asthma Risk Minimisation Plan is stored with the Student's Asthma Action Plan.

At the college:

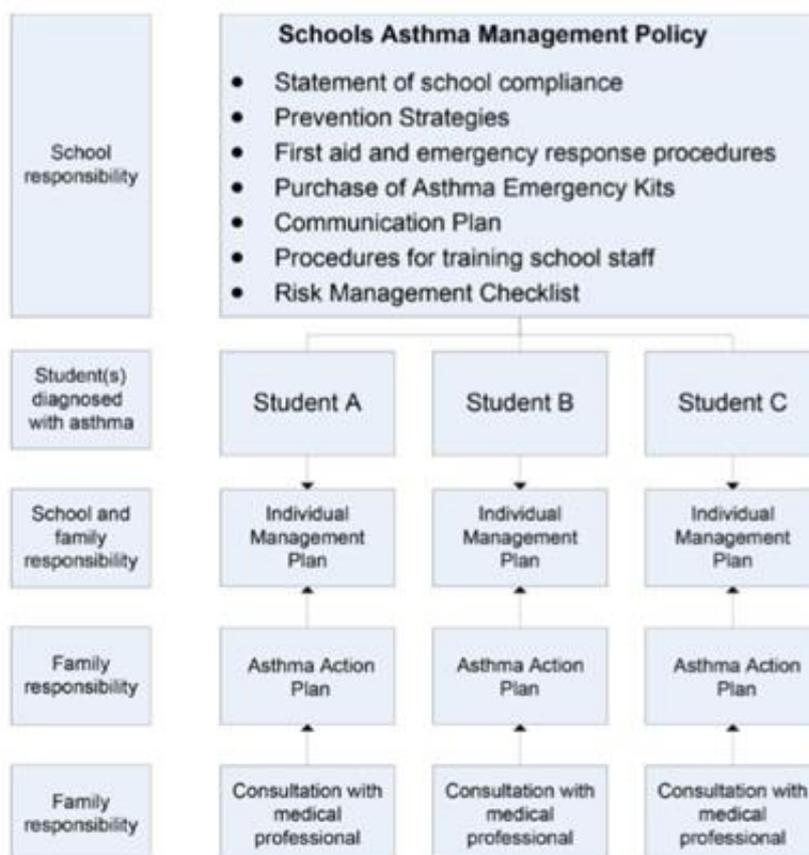
- Individual Asthma Plans are kept on SIMON, CareMonkey, and a file in the First Aid Manager's office.
- Examples of Asthma Action Plans are available from Asthma Victoria.

During off-site college settings (e.g. excursions, college camps, specials events attended by the college):

- A copy of the Individual Asthma Risk Minimisation Plan and Asthma Action Plan for each student with asthma must be easily accessible during field trips, excursions, camps and other out-of-college settings
- Either the supervising teacher or an identified staff member with current asthma training (refer to Asthma Training and Briefings) will have a copy of the Plans with them at all times. All attending staff must be aware of their exact location.

Interactions between the Plan and this Policy

The relationship between the College's **Asthma Management Policy** (and each student's Individual Asthma Risk Minimisation Plan) is represented by the below diagram from the Guidelines (Figure 7.1), including the responsibilities of the Principal and the student's family.



Asthma Emergency Kits and Reliever Medication

Asthma Emergency Kits and Reliever Medication

In accordance with their responsibilities set out in the **Asthma Management Policy** the Principal arranges the College's purchase of asthma emergency kits for general use, and as a back up to reliever medication supplied by parents of students who have been diagnosed with asthma. Asthma Emergency Kits are not a substitute for individuals with asthma having their own prescribed reliever medication.

Key Definitions

Refer to Asthma Management

Purchasing Asthma Emergency Kits

The college must provide and maintain at least one Asthma Emergency Kit to keep at the College, and at least one mobile kit for activities such as excursions and camps.

The Principal will determine the overall number of Asthma Emergency Kits required by the college and will arrange the purchase of additional Asthma Emergency Kits using the guidance in the following table:

College site characteristics	Minimum Asthma Emergency Kit (AEK) Requirements
Less than 299 employees (and students)	2 AEKs
300 - 399 employees (and students)	3 AEKs
400 - 499 employees (and students)	4 AEKs
500 - 599 employees (and students)	5 AEKs
600 - 699 employees (and students)	6 AEKs
700 - 999 employees (and students)	7 AEKs
>1000 employees (and students)	7 AEKs + 1 first aid officer for every additional 100 employees and students

The following factors are considered by the Principal when determining the number and contents of additional Asthma Emergency Kits to purchase:

- The number of students enrolled at the College, in particular the number of students who have been diagnosed with asthma
- The accessibility of reliever medication that have been provided by parents of students who have been diagnosed with asthma
- The availability and sufficient supply of Asthma Emergency Kits in specified locations at the College and at excursions, camps and special events conducted or organised by the school
- that because reliever medication contains up to 200 doses, and puffers do not have a dose counter on them, the fact that the College will need to replace the medication before 200 doses have been administered
- that reliever medication has a limited life, will usually expire within 12-18 months, the fact that it will need to be replaced at the College's expense either at the time of use or expiry, whichever is first
- that Asthma Emergency Kits are designed to be portable in an emergency.

Even when there are no students enrolled who have been diagnosed with asthma, the Principal should purchase an Asthma Emergency Kit for students who may experience their first asthma attack while at the college.

Contents of Asthma Emergency Kit

Each of the College's Asthma Emergency Kits must contain:

- Blue or blue/grey reliever medication such as Airomir, Asmol, or Ventolin
- At least 2 single person use spacer devices to assist with effective inhalation of the blue or blue/grey reliever medication
- A number of spare spacers for use as replacements
- Clear written instructions on how to use the medication and spacer devices and steps to be taken in treating an asthma attack
- A record sheet/log for recording the details of a first aid incident, such as the number of puffs administered.

The College's uses the Lite-Aire Disposable Cardboard spacer in their Asthma Emergency Kits. This spacer contains refined soy ink, which poses a risk of developing an allergic reaction in highly sensitive individuals.

College staff are trained on the risks posed by this spacer and must not use it for students who are known to allergic to refined soy ink or are highly sensitive.

Using Asthma Emergency Kits

Asthma Emergency Kits are used when:

- A student's prescribed reliever medication does not work, is misplaced, out-of-date or is not immediately available
- A student is having a first time asthma attack and does not have a medical diagnosis for asthma
- Instructed to do so by a medical officer after calling 000.

Storage & Location of Reliever Medication

All reliever medication must be stored according to a student's Asthma Action Plan and checked regularly to ensure that they have not expired. They must be stored in various locations which are easily accessible to staff.

The following procedures are followed for the storage of reliever medication:

- Store in an unlocked, easily accessible place away from direct heat but not in a refrigerator or freezer
- Clearly label each reliever medication with the student's name, or as being for general use
- Distinguish each student's reliever medication from other students' reliever medication and is stored with a copy of the student's Asthma Action Plan
- Clearly label each Asthma Emergency Kit and ensure it is distinguishable from those for students diagnosed with asthma.

Whenever Asthma Emergency Kits are taken and returned to/from their usual location, such as for camps and excursions, their movements must be clearly recorded.

Catholic Ladies' College maintains Asthma Emergency Kits in the following location/s:

- First Aid Room (Sick Bay)
- Resource Centre
- Gym
- Each Staff Study

All staff should be aware of these locations.

Maintenance of Asthma Emergency Kits

Asthma Emergency Kits will be checked regularly to ensure they are well-maintained and stocked appropriately.

Asthma spacers are single-person use only. To avoid the risk of infection, spacers and masks must only be used by the one student. The College ensures that spacers and masks contained in Asthma Emergency Kits are:

- Stored in dustproof container
- Labelled with the name of the student who has used them
- Cleaned once a month or after being notified of a respiratory tract infection by the student who has the spacer or their parent/ carer (refer to the Guidelines for specific cleaning procedures).

After a spacer and/ or mask is used by a student, they will either be disposed of, or labelled and either kept on site for further use or given to the student to take home.

Blue of blue/grey reliever medication 'puffers' may be used by more than one student, as long as they have been used with a spacer. If the medication delivery device (e.g. puffer) comes into contact with someone's mouth it cannot be reused and must be replaced.

Review of Reliever Medication

The College will undertake regular reviews of students' reliever medication, and those in the Asthma Emergency Kits, to ensure the requirements of this policy are being met.

If the Asthma Supervisor or another designated College Staff member identifies any reliever medication which are out of date, they will:

- Send a written reminder to the student's parents/carers to replace the reliever medication
- Advise the Principal that the reliever medication needs to be replaced.

Other Asthma Medication

Some students will be prescribed other medication to help prevent asthma symptoms occurring. These medications should not be provided to the College to administer or hold onsite unless the student attending activities where they will be required to be away from home for an extended period of time.

The College does not provide nebulisers for students. If a student is prescribed a nebuliser, they must bring their own to college.

Asthma Communication Plan

Plan Contents

The Principal will be responsible for developing a Communication Plan to provide information to all staff, students and parents/carers about asthma and the College's asthma management policies and procedures.

The Communication Plan includes the following information:

- Strategies for how to respond to an asthma attack during normal college activities
- Strategies for how to respond to an asthma attack during off-site or out of school activities
- Procedures to inform volunteers and casual relief staff on arrival at the College of students diagnosed with asthma, and if they are caring for a student diagnosed with asthma, the potential of and their role in responding to an asthma attack
- Procedures to communicate with and raise awareness among staff, students, parents/carers and the college community
- The responsibility of the Principal for ensuring that relevant college staff are appropriately trained and briefed at least annually. Refer to **Asthma Training and Briefings**.

Key Definitions

Refer to Asthma Management.

Raising Staff Awareness

The Communication Plan must include arrangements for relevant college staff to be briefed at least once per year by an Asthma Supervisor or a staff member who has current accredited asthma management training.

The Asthma Supervisor or another designated staff member(s) will brief all volunteers and casual relief staff, and new college staff (including administration and office staff, canteen staff, sessional teachers, and specialist teachers) on the above information and their role in responding to a student having an asthma attack in their care.

The College will promote student awareness of the risks of asthma and recognising asthma attacks. The following methods may be used as appropriate:

Raising Student Awareness

The College will promote student awareness of the risks of asthma and recognising asthma attacks. The following methods may be used as appropriate:

- Displaying fact sheets or posters in hallways, canteens and classrooms
- Discussion by class teachers
- Acknowledging that a student diagnosed with asthma may not want to be singled out or seen to be treated differently
- Dealing with any bullying or attempt to harm a student in accordance with the college's Student Discipline Policy

Location of Plan

- The college Communication Plan is currently under review/development.

College Planning and Emergency Response Procedures

Emergency Response Procedures

The procedures set out in this policy and a student's Asthma Action Plan will be followed when responding to an asthma attack.

Key Definitions

Refer to Asthma Management

List of Students with Asthma

Catholic Ladies' College maintains a complete and up-to-date list of students identifying as being diagnosed with asthma. It is the responsibility of the First Aid Manager to keep this list up-to-date. The list is kept in the First Aid Cupboard and on College databases.

Location of Asthma Plans

Refer to Individual Asthma Risk Minimisation Plans for locations of where the Individual Risk Minimisation Plans and Asthma Action Plans are kept at the College and during off-site college settings.

Storage and Accessibility Asthma Medication

Refer to Asthma Emergency Kits and Reliever Medication for storage and location details of reliever medication at the College.

Communication Plan

Refer to the Asthma Communication Plan for information on communication between College staff, students and parents/carers.

Planning for an emergency

The College regularly undertakes drills to test the effectiveness of our emergency response procedures, including in responding to severe or life-threatening asthma attack.

Staff should refer to the Guidelines for additional information on planning for a severe or life-threatening asthma attack, including additional information on responding to an accident and how to administer particular types of reliever medication.

Self-Administration of Reliever Medication

If a student self-administers their reliever medication, one staff member should supervise and monitor the student, and another staff member should call an ambulance (000). An Asthma Emergency Kit for general use should also be retrieved and brought to the site of the asthma attack.

If a student who ordinarily self-administers their reliever medication is not physically able to do so due to the effects of an asthma attack, a staff member must administer the reliever medication following the procedures set out in this policy.

If a student is displaying symptoms of an asthma, a staff member must remain with them at all times and sit them upright.

Another member of staff should immediately locate the student's reliever medication (if it is not in the student's possession) and the student's Asthma Action Plan.

The reliever medication should then be administered following the instructions in the student's Asthma Action Plan.

The reliever medication should then be administered following the instructions in the student's Asthma Action Plan.

In the College environment – Client to tailor the following procedures as appropriate.**Classrooms**

A personal mobile phone should be used to raise the alarm that an attack has occurred.

An Asthma Supervisor should be contacted in the first instance, followed by the First Aid Manager and Principal.

If an asthma attack occurs, a student will be nominated to go to the nearest teacher or to the office to raise an alarm. The staff member contacted will organise for getting reliever medication to the student and other emergency response procedures as set out in this policy.

Yard

A staff member on yard duty will raise the alarm using their mobile phone, or walkie talkie if one has been allocated.

AND/OR

If an asthma attack occurs, a student will be nominated to go to the nearest teacher or to the office to raise an alarm. The staff member contacted will organise for getting reliever medication to the student and other emergency response procedures set out in this policy.

The Asthma Supervisor or another designated staff member will call an ambulance if needed, and wait for the ambulance at the designated College entrance.

Out-of-school environments

Emergency procedures will vary depending on the out-of-college activity. Emergency procedures for camps and excursions must also take into account the School Camp and Excursion Medical Update Form completed for each student attending who is diagnosed with asthma.

The emergency procedures must address:

- The location of reliever medication and Asthma Emergency Kit (if one is taken) and/or who will be carrying them
- Procedures for getting the reliever medication to a student
- Where reliever medication will be stored during the night (i.e. with the supervising teacher or the student)
- Procedures for calling an ambulance.

Staff should be aware of what local emergency services are in the area, and how to contact them in the event of an emergency. For camps and remote excursions, contact should be made with emergency services and hospitals well in advance, and advise of the full medical conditions of students diagnosed with asthma, the location and any off-camo activities.

Responding to an anaphylactic reaction

If a student with known asthma and allergy to food, insects or medication has sudden breathing difficulty (including wheezing, persistent cough or hoarse) voice, ALWAYS administer an adrenaline auto injector FIRST and then administer reliever medication, even if there are no skin symptoms. If in doubt, it is better to give the adrenaline auto injector according to the student's ASCIA Action plan for Anaphylaxis.

If an adrenaline auto injector is administered, immediately call an ambulance advising that you have administered the adrenaline auto injector and give them the time of the dose. Administer the students' asthma reliever medication according to their Asthma Action Plan while waiting for the ambulance.

Responding to a severe or life-threatening asthma attack

The following step-by-step instructions will be followed by the College if a student is having a severe or life-threatening asthma attack:

1. Immediately call an ambulance (000)
2. Sit the student upright
3. Administer reliever medication in accordance with the student's Asthma Action Plan
4. Reassure the student experiencing the attack. Watch the student closely in case of a worsening condition. Another member of staff will supervise nearby students, move them away from the area and reassure them.
5. If there is no improvement or severe symptoms progress (as described in the Asthma Action Plan), more medication (of the same dosage) doses may be administered every four minutes or any other length of time prescribed in the Asthma Action Plan.
6. Contact the student's emergency contacts
7. Follow the College's Critical Incident (Emergency Situations) Response procedure.

First-time reactions

If a student appears to be having a severe or life-threatening asthma attack, but has not been previously diagnosed with asthma, staff should follow the College's First Aid Policy and immediately:

- Locate and administer reliever medication from an Asthma Emergency Kit
- After the first 4 doses of reliever medication call an ambulance
- Continue giving 4 doses of reliever medication every 4 minutes whilst waiting for the ambulance to arrive.

Post-incident support

A life-threatening asthma attack can be a very traumatic experience for the student, others witnessing the attack, and parents/carers.

The procedures set out in our Critical Incident Management (Traumatic Events) policy should be followed to deal with any longer term effects within the college community.

Review Procedures

After a severe or life-threatening asthma attack has taken place that has involved a student in the College's care and supervision, the College's critical incident review will also include the following procedures:

- The Asthma Emergency Kit should be restocked if it has been used
- The student's Individual Asthma Risk Minimisation Plan should be reviewed in consultation with the student's parent/carer
- The Asthma Management Policy should be reviewed to ensure that it adequately responds to an asthma attack by students who are in the care of College staff.

Prevention Strategies

Risk Management Strategies

The minimisation of the risk of a severe/life-threatening asthma attack is everyone's responsibility, including the Principal, all college staff, parents/carers, students and the broader college community.

The College may employ some or all of the following prevention strategies that are designed to minimise the risk of a severe/life-threatening asthma attack.

Staff should also consult the Prevention Strategies for schools included in the Guidelines.

Key Definitions

Refer to **Asthma Management**.

Trigger Minimisation

Cleaning and Maintenance

The following cleaning and maintenance should only be undertaken out of school hours:

- Vacuum carpets and curtains
- Turn on any fans, air conditioning and heaters which have experienced a long period of non-use
- Mow the lawns

Maintenance that may require the use of chemicals, such as painting, should be conducted during school holidays. Cleaning products used in the College will be regularly inspected and their potential impact on students with asthma inspected.

Cigarette Smoke

Smoking at or within 4 metres of a pedestrian access point to the college grounds is prohibited by law under the Tobacco Act 1987 (Vic).

Catholic Ladies' College displays a 'no smoking' sign that identifies a 4 metre 'no smoking area' at every pedestrian access point to the college grounds.

Refer to Smoking (Staff)

Animal Allergens

Classrooms where animals are kept are cleaned regularly. Animals in classrooms with highly sensitive students should be relocated in the College.

Animal urine, faeces and saliva should be removed and cleaned immediately. Furred animals should also be regularly bathed, unless frequent bathing puts the animal's health at risk.

The College only has low-risk animals for classroom pets, such as fish, lizards and turtles.

Dust and Dust Mites

Dust proof pillow wraps will be used for all pillows and cushions. Pillow cases should also be washed regularly.

Moulds

Bathrooms and wet rooms will be cleaned regularly and aired to dry any moisture in the air.

Any rugs, leaves or fabric that contain mould or mildew will be removed and disposed of.

Pollens and grasses

The College only plants low allergen gardens.

Any flowers brought into the college, such as by staff who receive them as gifts, should have their stamen and the connective anther removed before being placed in classrooms.

During pollen season, students sensitive to pollen should be encouraged to stay indoors.

Pollution

On days with poor air quality, such as smoggy and dusty days, students with asthma should be advised to stay indoors and air conditioners should be used to filter the air.

Chemicals

College staff should avoid using products that can irritate the airways, such as cleaning products, paints, varnishes, pesticides and chemical based soaps.

Aerosols

Staff and students are encouraged to use roll-on deodorants, and not to wear perfume and cologne.

Non-aerosol based pest control products will be used, for example insect tape and Venus fly traps.

Smoke (any, including: bushfire, vegetation reduction)

The college avoids using wood stoves and open fireplaces, and ensures that all heaters and gas appliances are vented correctly and inspected each year.

Students should stay indoors with windows closed and vents blocked if hazard-reduction burns or bushfire smoke is in the school area and avoid physical activity on high-pollution days if smoke is in the air.

Medications

Any administration of medication will be undertaken in accordance with our Administration of Medication policy. Staff must not give student's any medication – including ibuprofen, aspirin and naproxen – from their personal supply.

Food Chemicals/ Additives

Food products sold in the canteen or cooked in cooking classes that contain food chemicals that may cause asthma have a 'may contain...' statement should not be served to students diagnosed with asthma. Refer to the food additives information published by Food Standards Australia and New Zealand.

Exercise

Students with asthma should be encouraged to be active, but should not be pressured to exercise when they are unwell. Any sporting activity (except SCUBA diving) is suitable for students with asthma.

Staff need to be particularly alert for asthma symptoms when students are participating in sports carnivals or endurance events (e.g. cross country).

If a student has EIB (refer to **Identifying Asthma**) staff will allow adequate time for the following procedures before, during and after exercise

Before Exercise:

Students who suffer from EIB should exercise in a warm and humid environment wherever possible, and avoid environments with high levels of allergens, pollution, irritant gases or airborne particles.

Before Exercise:

Staff should ensure students:

- Use reliever medication 15 minutes before exercising (if indicated on the students' Asthma Action Plan)
- Always warm up before exercise or activity
- Carry or have their reliever medication close by in case it is needed.

During Exercise:

Staff should ensure students:

- Breathe through their nose to help warm and humidify the air (or use a mask to filter the air)
- If symptoms reoccur, take reliever medication and cease activity for the rest of the day.

After Exercise:

Staff should ensure students:

- Always cool down after exercising, and be alert for asthma symptoms
- Breathe through their nose, covering their mouth in cold or dry weather

If a student has an asthma attack during or after exercise or activity, follow the **College Planning and Emergency Response Procedures**. Always notify parents/carers of any incidents or medication usage.

Colds and Flu

The College encourages staff, parents/carers and students to not attend College when they have a cold or flu.

Students are encouraged to cover their mouth when sneezing or coughing and to wash their hands regularly.

Where students with asthma attend College with the cold or flu or they are unwell, their reliever medication should be stored close by and they should not be pressured to exercise.

In the classroom

In the classroom, teachers should:

- Ensure they are aware of the identity of any students who are diagnosed with asthma
- Be familiar with the student's Asthma Action Plan and Individual Asthma Risk Minimisation Plan and have them readily accessible
- Be familiar with the locations of other staff who are trained to deal with an asthma attack
- Limit dust, for example having the carpets and curtains cleaned regularly and out of hours
- If fans, air conditioning and heaters have not been used for a long period, have them turned on for the first time out of hours
- Ensure they are aware of the importance of not providing students, whose asthma is triggered by certain medications, with medication, particularly: ibuprofen, naproxen and aspirin
- Brief casual/relief teachers and provide them with copies of the student's Asthma Action Plan and Individual Asthma Risk Minimisation Plan.

In the College Yard

In the college yard:

- Staff trained to provide an emergency response to asthma attacks should be readily available during non-class times (e.g. recess and lunch)
- The reliever medication and each student's Individual Asthma Risk Minimisation Plan should be easily accessible
- Staff on duty need to be able to communicate that there is an asthma emergency without leaving the child experiencing the asthma attack unattended
- Students with asthma triggered by pollens should be encouraged to stay away from flowering plants.

During On-site Events (e.g. sporting events, in college activities, class parties)

During on-site events:

- Class teachers should consult parents/carers in advance to either develop an alternative food menu or request the parents/carers to send a meal for the student
- Parents/carers of other students should be informed in advance about foods that may cause asthma as well as being informed of our Asthma Management Policy
- Staff must know where the Asthma Emergency Kit is located and how to access it if required
- For sporting events, the student's reliever medication should be taken to the event, and stored in accordance with prescribed temperatures and conditions.

During Off -site college settings – travel to/from College by bus

The College will consult with parents/carers of students diagnosed with asthma and the bus service provider to ensure that appropriate risk minimisation and prevention strategies and processes are in place to address an asthma attack reaction should it occur on the bus.

The reliever medication and Asthma Action Plan must be with the student even if this child is deemed too young to carry their medication on their person at College.

During Off -site college settings – field trips, excursions

During field trips and day excursions:

- The student's reliever medication, Individual Asthma Risk Minimisation Plan, Asthma Action Plan and means of contacting emergency assistance must be taken
- One or more staff members who have been trained in the administration of reliever medication and responding to an asthma attack if required must accompany the student on field trips or excursions. All staff present need to be aware if there is a student diagnosed with asthma and be able to identify them by face
- Parents/carers should be consulted in advance to discuss issues that may arise
- Parents/carers may wish to accompany their child on field trips and/or excursions. This should be discussed with parents/carers as another strategy for supporting the student.

During Off -site college settings – camps and remote settings

During college camps and overnight excursions:

- When planning college camps and overnight excursions, risk management plans for students with asthma should be developed in consultation with parents/carers and camp operators
- Camp site/accommodation providers and airlines should be advised in advance of any student diagnosed with asthma
- Parents must provide enough medication (including preventer medication) for the student to last the period of the camp, and should provide the College with a completed **School Camp and Excursion Medical Update Form**, outlining any additional asthma medication the student needs to take in the prevention of asthma
- The student's reliever medication, Individual Asthma Risk Minimisation Plan Asthma Action Plan and a mobile phone must be taken on camp
- A team of staff who have been trained in the recognition of asthma and the administration of reliever medication should accompany the student on camp. However, all staff present need to be aware if there is a student diagnosed with asthma and be able to identify them by face
- Staff should develop an emergency procedure that sets out clear roles and responsibilities in the event of an asthma attack
- An Asthma Emergency Kit should be taken on a college camp, even if there is no student diagnosed with asthma, as a back-up device in the event of an emergency
- The reliever medication should remain close to the student with asthma and staff must be aware of its location at all times. It may be carried in the college's first aid kit, although the College can consider allowing students, particularly adolescents, to carry it on their person. Remember, staff still have a duty of care towards the student even if they carry their own reliever medication.

Principal's responsibilities

The Principal is to ensure that while the student is under the care of the College, including on excursions, camps, special event days such as sports carnivals, there are a sufficient number of College staff present who have successfully completed an Asthma Management Training Course.

The Principal may also nominate a staff member/s to perform the following roles:

- Checking the **pollen count** during pollen season
- Monitoring newspapers and news outlets for daily outdoor air quality reports.

Parents/ Carers Responsibilities

Parents/carers must assist the College to manage the risk of an asthma attack, and must:

- Communicate their child's triggers and diagnosis of asthma to the College at the earliest opportunity, preferably on enrolment

- Continue to communicate with staff and provide up-to-date information about their child's medical condition
- Provide the College with an Asthma Action Plan
- Ensure that their child has asthma reliever medication and an asthma spacer device (where directed by a medical practitioner) that is current and not expired at all times.

Staff Responsibilities

Staff should determine which strategies are appropriate after consideration of factors such as the:

- Age of the student at risk
- Facilities and activities available at the college
- General college environment
- Likelihood of that student's exposure to the relevant trigger/s whilst at college.

Asthma Training and Briefings

Staff Training

The Guidelines state that the following College staff should undertake non-accredited training in Asthma first aid management for education staff through the Asthma Foundation:

- All staff with a direct teaching role with students affected by asthma
- Any other staff identified by the Principal, based on an assessment of the risk of an asthma attack occurring while a student is under the care or supervision of the College.

The training should be conducted at least every three years and can be accessed through either:

- A one hour face-to-face school visit (for as many staff as the College wishes to train)
- An online training package.

Catholic Ladies' College's Policy

It is the Catholic Ladies' College's policy that at a minimum, all staff with duty of care for students, including volunteers and regular casual relief teachers, must undertake an asthma education session.

When a student diagnosed with asthma is under the care or supervision of the College outside of normal class activities, including in the college yard, at camps and excursions, or at special events conducted, organised or attended by the College, the Principal must ensure that there are a sufficient number of staff present who have been appropriately trained.

Key Definitions

Refer to **Asthma Management**.

Accredited Asthma Management Training

The following staff should undertake accredited asthma management training:

- 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 PE/Sports and Home Economics/Cooking Teachers.

The asthma management training undertaken must be either:

- Accredited as a VET course
- Accredited under Chapter 4 of the Education and Training Reform Act 2006 (VIC) by the VRQA

All face-to-face courses must be attended by the staff member in person and must include a competency check in the administration of a pressure metered dose inhaler (puffer) and spacer device.

Asthma Briefings

All staff identified by this policy as being required to undergo training must also participate in asthma briefings.

Briefings must occur at least once per year, to be held in December during professional learning days following students departure. Asthma briefings are conducted by either a:

- designated staff member
- staff member who has successfully completed an Asthma Management Training Course in the three years prior.

The asthma briefing covers:

- our Asthma Management Policy
- our legal requirements
- the causes, signs/symptoms and treatment of asthma
- the identities of students (including pictures) diagnosed with asthma, their triggers, year levels, risk management plans that are in place and where reliever medication is located
- an overview of the Asthma Action Plan highlighting the first aid procedure and that some students will need to take different doses of their medication
- our first aid and emergency response procedures
- the location of, and access to, Asthma Emergency Kits and reliever medication
- how to access ongoing support and training.

Training Requirements

Staff must successfully complete asthma training in accordance with this policy within three years prior to supervising a student diagnosed with asthma.

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/carers. Training should take place as soon as practicable after the student diagnosed with asthma enrolls, preferably before the student's first day at college.

It is the College's policy that the Principal is to ensure that while the student is under the care of the College, including on excursions, camps, special event days such as sports carnivals, there is a sufficient number of college staff present who have successfully completed an Asthma Management Training Course.

Canteen Staff

Canteen staff (whether internal or external) should also be able to demonstrate satisfactory training in food allergen management and its implications on food-handling practices, including knowledge of the major food triggers triggering asthma.

Nebuliser Training

If a student is prescribed a nebuliser, specialised nebuliser training will be prescribed for relevant staff by the Principal. The parents/carers of the student are required to cover any costs associated with this training.