# St Monica's Asthma Policy & Procedures





St Monica's School is a school which operates with the consent of the Catholic Archbishop of Melbourne and is owned, operated and governed by Melbourne Archdiocese Catholic Schools Ltd (MACS), where formation and education are based on the principles of Catholic doctrine, and where the teachers are outstanding in true doctrine and uprightness of life.

### **Purpose**

To ensure that St Monica's School appropriately supports students diagnosed with asthma.

### Scope

This policy applies to:

- all staff, including causal relief staff, contractors and volunteers
- all students who have been diagnosed with asthma or who may require emergency treatment for asthma

### **Policy**

Asthma is a long term lung condition. 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 hard 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.

### **Symptoms**

Symptoms of asthma can vary over time and often vary from person to person. The most common asthma symptoms are:

- breathlessness
- wheezing (a whistling noise from the chest)
- tight feeling in the chest
- persistent cough

Symptoms often occur at night, early in the morning or during/just after physical activity. If asthma is well controlled, a person should only have occasional asthma symptoms.

### **Triggers**

A trigger is something that sets off or starts asthma symptoms. Everyone with asthma has different triggers. For most people with asthma, triggers are only a problem when asthma is not well controlled with medication.

Common asthma triggers include:

- exercise
- smoke (cigarette smoke, wood smoke from open fires, burn-offs or bushfires)
- house dust mites
- pollens

- chemicals such as household cleaning products
- food chemicals/additives
- laughter or emotions, such as stress
- colds/flu
- weather changes such as thunderstorms and cold, dry air
- moulds
- animals such as cats and dogs
- deodorants (including perfumes, after-shaves, hair spray and aerosol deodorant sprays)
- certain medications (including aspirin and anti-inflammatories)

### **Asthma management**

If a student diagnosed with asthma enrolls at St Monica's School:

- 1. Parents/carers must provide the school with an Asthma Action Plan which has been completed by the student's medical practitioner. The plan must outline:
  - the prescribed medication taken by the student and when it is to be administered, for example as a pre-medication to exercise or on a regular basis
  - emergency contact details
  - the contact details of the student's medical practitioner
  - the student's known triggers
  - the emergency procedures to be taken in the event of an asthma flare-up or attack.
- 2. Parents/carers should also provide a photo of the student to be included as part of the student's Asthma Action Plan.
- 3. School will keep all Asthma Action Plans:
  - In the First Aid Room. A spreadsheet is provided for each classroom and specialist Roll Folders
- 4. School staff may also work with parents/carers to develop a Student Health Support Plan which will include details on:
  - how the school will provide support for the student
  - identify specific strategies
  - allocate staff to assist the student

Any Student Health Support Plan to be developed by their Doctor and supported by St Monica's School.

- 5. If a student diagnosed with asthma is going to attend a school camp or excursion, parents/carers are required to provide any updated medical information.
- 6. If a student's asthma condition or treatment requirements change, parent/carers must notify the school and provide an updated Asthma Action Plan.
- 7. School staff will work with parents/carers to review Asthma Action Plans once a year or in 6 month intervals if the attending physician deems this appropriate.

### Student asthma kit

All students diagnosed with asthma are required to have a student asthma kit at school which contains:

- their own prescribed reliever medication labelled with the student's name
- their spacer (if they use one)
- Asthma action plan

Student asthma kits are stored in the first aid room

### Asthma emergency response plan

If a student is:

- having an asthma attack
- difficulty breathing for an unknown cause, even if they are not known to have asthma

School staff will endeavour to follow the Asthma First Aid procedures outlined in the chart Appendix 1 table below. School staff may contact Triple Zero "000" at any time.

### External references

Asthma Australia <a href="https://asthma.org.au/">https://asthma.org.au/</a>

Free Online Asthma Training <a href="https://asthma.org.au/what-we-do/training/">https://asthma.org.au/what-we-do/training/</a>

## First Aid for Asthma

1

### Sit the person comfortably upright.

Be calm and reassuring.

Don't leave the person alone.

2

### Give 4 puffs of a blue/grey reliever

(e.g. Ventolin, Asmol or Airomir)

Use a spacer, if available.

Give 1 puff at a time with 4 breaths after each puff

Use the person's own inhaler if possible.

If not, use first aid kit inhaler or borrow one.

3

### Wait 4 minutes.

If the person still cannot breathe normally, give 4 more puffs.

4

### If the person still cannot breathe normally, CALL AN AMBULANCE IMMEDIATELY (DIAL 000)

Say that someone is having an asthma attack.

### Keep giving reliever.

Give 4 puffs every 4 minutes until the ambulance arrives.

Children: 4 puffs each time is a safe dose.

Adults: For a severe attack you can give up to 6-8 puffs every 4 minutes

HOW TO USE

INHALER

### WITH SPACER



- Assemble space:
- Remove puffer cap and shake well
- Insert puffer upright into spacer
- Place mouthpiece between teeth and seal lips around it
   Press once firmly on puffer to fire one puff into seacer
- . Take 4 breaths in and out of spacer
- Slip spacer out of mouth
- Repeat 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff
- Replace cap

### WITHOUT SPACER



- Remove cap and shake well
- Breathe out away from puffer
- Place mouthpiece between teeth and seal lips around it
- Press once firmly on puffer while breathing in slowly and deeply
- Slip puffer out of mouth
- Hold breath for 4 seconds or as long as comfortable
- Breathe out slowly away from puffer
- Repeat 1 puff at a time until 4 puffs taken – remember to shake the puffer before each puff
- Replace cap

### Give 2 separate doses of a Bricanyl or Symbicort inhaler

If a puffer is not available, you can use Symbicort (people over 12) or Bricanyl, even If the person does not normally use these.

#### Wait 4 minutes

OR

If the person still cannot breathe normally, give 1 more dose.

If the person still cannot breathe normally, CALL AN AMBULANCE IMMEDIATELY (DIAL 000) Say that someone is having an asthma attack

Keep giving reliever while waiting for the ambulance:

For Bricanyl, give 1 dose every 4 minutes

For Symbloort, give 1 dose every 4 minutes (up to 3 more doses)

### BRICANYL OR SYMBICORT



- Unscrew cover and remove
- Hold inhaler upright and twist grip around and then back
- Breathe out away from inhalor
   Place mouthsines between test
- Place mouthpiece between teeth and seal lips around it
- Breathe in forcefully and deeply
- . Slip inhaler out of mouth
- Breathe out slowly away from inhaler
- Repeat to take a second dose
   remember to twist the grip both
- ways to reload before each dose
- Replace cover

### Not Sure if it's Asthma?

### **CALL AMBULANCE IMMEDIATELY (DIAL 000)**

If a person stays conscious and their main problem seems to be breathing, follow the asthma first aid steps. Asthma reliever medicine is unlikely to harm them even if they do not have asthma.

For more information on asthma visit: Asthma Foundations – www.asthmaaustralia.org.au National Asthma Council Australia – www.nationalasthma.org.au

### Severe Allergic Reactions

### CALL AMBULANCE IMMEDIATELY (DIAL 000)

Follow the person's Action Plan for Anaphylaxis if available. If the person has known severe allergies and seems to be having a severe allergic reaction, use their adrenaline autoinjector (e.g. EpiPen, Anapen) before giving asthma reliever medicine.



Although all care has been taken, this chart is a general guide only which is not intended to be a substitute for individual medical advice treatment. The National Asthma Council Australia expressly discisims all responsibility (including for negligence) for any loss, damage or personal injury resulting from reliance on the information contained. © National Asthma Council Australia 2011.