



Melrose Rural Care Asthma Policy

From our philosophy: **"We aim to provide high quality care and education through a partnership between parents, children, community, staff and the Department of Education and Children's Services."**

With the belief that:

- ❖ Children develop individually through stages, in their own learning style varying through cultural and family values and perception of these may vary.
- ❖ Healthy self esteem is the basis of positive physical, intellectual and social growth.
- ❖ We believe children need to express themselves in a safe environment.
- ❖ Children learn most effectively through hands on experience, through play.
- ❖ We value involvement of families and community and we encourage open communication.
- ❖ Our planning and evaluation is inclusive to children with additional needs.
- ❖ Our aims of planning and daily activities reflect our philosophy and are made available to families.

Statement

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.

At MELC we aim to manage asthma and asthma sufferers as effectively and efficiently as possible at school.

Guidelines

- Asthma attacks involve the narrowing of airways making it difficult to breathe. Symptoms commonly include difficulty breathing, wheezy breathing, dry and irritating cough, tightness in the chest and difficulty speaking.
- Children and adults with mild asthma rarely require medication; however severe asthma sufferers may require daily or additional medication (particularly after exercise).
- Professional development should be provided annually for all staff on the nature, prevention and treatment of asthma attacks. Such information will also be displayed on the sickroom wall.

Implementation

1. All students with asthma must have current written asthma management plan consistent with the Asthma Foundation of SA requirements completed by their doctor or paediatrician. Appropriate asthma plan pro formas are available at www.breathebetter.com.au
2. Asthma plans will be attached to the student's records for reference.
3. 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.
4. 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.

5. 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 asthma attacks.
6. The first aid staff member will be responsible for checking reliever puffer expiry dates.
7. A nebuliser pump will not be used by the school staff unless a student's asthma management plan recommends the use of such a device, and only then if the plan includes and complies with the Asthma Medication Delivery Devices Guidelines.
8. All devices used for the delivery of asthma medication will be cleaned appropriately after each use.
9. Care must be provided immediately for any student who develops signs of an asthma attack.
10. Children suffering asthma attacks should be treated in accordance with their asthma plan.
11. If no plan is available children are to:
 - a) **be sat down in an upright position (staff to remain calm)**
 - b) **be reassured**
 - c) **be administered 4 puffs of a shaken reliever puffer (blue canister- Airomir, Asmol, Bricanyl**, Epaq or Ventolin) delivered via a spacer* - one puff at a time, inhaling 4 deep breaths per puff**
****Bricanyl is not used with a spacer and**
***Use blue puffer on its own if there is no spacer**
 - d) **wait 4 minutes**
 - e) **if there is little or no improvement repeat steps c) and d).**
 - f) **if there is still little or no improvement call an ambulance immediately (Dial 000). Continue to repeat steps c) and d) while waiting for the ambulance.**
12. Parents must be contacted whenever their child suffers an asthma attack.
13. As a rule, students without asthma management plans that are treated with a reliever puffer will have their name and dose recorded in the first aid book

Evaluation:

- This policy will be reviewed as part of the school's review cycle plan.

Referenced:

DECS Staying Healthy in Childcare

DECS Administrative and Information and Guidelines "Student Matters"

.....
 Director
 Rural Care

Ratified / /2008

Review Date: