Introduction
The purpose of this policy is to inform all staff, parents and guardians, students, and volunteers regarding asthma management within Mazenod College.

Relevant Legislation
Mazenod must comply with the following legislation and regulations:

● Education and Training Reform Act 2006,
● Schools Policy Advisory Guide
● Occupational Health & Safety Act 2004 (Vic),
● Equal Opportunity Act 2010 (Vic),

Related Policies:
● Occupational Health & Safety (OHS) Policy
● First Aid Policy
● Anaphylaxis Policy
● Anti-bullying Policy
● Disability Discrimination Policy
● Privacy Policy

Statement
Asthma is a chronic health condition affecting approximately 10% of Australian children and teenagers. Asthma is one of the most common reasons for child admissions to hospital and missed days of school. Asthma flare ups can commonly occur while attending schools, particularly in February and May.

Mazenod College is committed to ensure the safety and health of all students and staff as much as practicable. Registered nurses and qualified First Aiders are available on campus to care for students with asthma.
Additionally, all staff are provided with suitable training to enable them to supervise students with asthma. The College recognises the importance of managing both an asthma emergency and everyday care.

**Scope**

To ensure the Mazenod College community (leaders, staff, volunteers, parents and careers, and students) are aware of their obligations and best practice management of asthma in the school setting.

To provide the necessary information to effectively manage episodes of asthma within the school.

**Definition**

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 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.

**Epidemic Thunderstorm Asthma**

Every year during grass pollen season there is an increase in asthma and hay fever symptoms, and during grass pollen season there is also the chance of an epidemic thunderstorm asthma event.

Epidemic thunderstorm asthma events are thought to be triggered by an uncommon combination of high grass pollen levels (usually during late Spring to early Summer) and a certain type of thunderstorm, resulting in large numbers of people developing asthma symptoms over a short period of time.

Those at increased risk of epidemic thunderstorm asthma include people with asthma, people with a past history of asthma, those with undiagnosed asthma (i.e. people who have asthma symptoms but have not yet been diagnosed with asthma) and also includes people with hay fever who may or may not have asthma.

Having both asthma and hay fever, as well as poor control and self-management of asthma increases the risk further.
Roles and Responsibilities

The Principal/Senior Leadership will:

- Provide staff with a copy of the school’s asthma management policy and ensure staff are aware of asthma management strategies upon employment at the school,
- Provide asthma education and first aid training for staff as required,
- Provide parents and careers with a copy of the school’s asthma policy upon enrolment of their child,
- Identify students with asthma during the enrolment process and provide parents and careers with a blank asthma plan to be completed and signed by the child’s medical practitioner and returned to the school,
- Ensure Asthma Management Plans are completed for students with asthma,
- Where possible, ensure that all students with asthma have a current written asthma plan (must be updated at least annually),
- Ensure a School Camp and Excursion Medical Update Form is completed by parents/careers for off-site activities where possible,
- Ensure the parents and careers of all students with asthma provide reliever medication and a spacer (and a face mask if required) at all times their child attends the school,
- Implement an asthma first aid procedure consistent with current national recommendations and all staff are aware of the asthma first aid procedure,
- Ensure adequate provision and maintenance of asthma emergency kits for the school and that each asthma emergency kit contains reliever medication, two spacer devices, instructions outlining the first aid procedure and a record form,
- Ensure that reliever medications within the asthma emergency kits are replaced regularly and have not expired, and that spacers are replaced after each use,
- Facilitate communication between management, staff, parents and careers and students regarding the school’s asthma management policy and strategies,
- Promptly communicate to parents and careers any concerns regarding asthma and students attending the school,
● Identify and minimise, where possible, triggers of asthma symptoms for students. The College recognises that there are a wide range of factors which trigger asthma. Specific foods are not banned at the school, parents are advised that if certain food ingredients trigger asthma for their sons, safe food should be brought from home and/or the College notified so that appropriate food is provided. These students are advised not to share the food of other students,
● Ensure that students with asthma are not discriminated against in any way,
● Ensure that students with asthma can participate in all activities safely and to their fullest abilities.

Employees will:
● Be aware of the school’s asthma management policy,
● Be aware of the asthma first aid procedure,
● Be aware of students with asthma and where their medication and personal spacers are stored,
● Participate in Asthma Management Plan completion as required,
● Attend asthma education and training sessions when required,
● Be aware of where to access written asthma plans, School Camp and Excursion Medical Update Forms, and asthma emergency kits,
● Identify and minimise, where possible, triggers of asthma symptoms for students,
● Ensure that students with asthma are not discriminated against in any way,
● Ensure that students with asthma can participate in activities safely and to their fullest abilities,
● Promptly communicate to the Principal, parents and careers any concerns regarding asthma and students enrolled in the school.

Parents, Guardian or Careers will:
● Inform the school if their child has asthma upon enrolment,
● Read the school’s asthma management policy,
● Participate in and sign student Asthma Management Plans as required,
● Provide a signed written asthma action plan to the school, and ensure that it is updated at least yearly, the plan should include:
  ○ Usual medical treatment and a list of medications used;
  ○ Details on what to do if the student’s condition deteriorates;
- Emergency contact details of the parent/guardians and treating physician;
- Provide a School Camp or Excursion Medical Update form as required,
- Provide the school with their child’s reliever medication along with a spacer (required for ‘puffer’ medication) for all times the child is attending the school, unless the child is carrying the medication and spacer for self-management purposes,
- Ensure that if their child is self-managing their asthma correctly, the child carries their reliever medication and spacer at all times,
- Promptly communicate all medical and health information relevant to their child, to the principal and staff of the school,
- Communicate any changes to their child’s asthma or any concerns about the health of their child.

**Students will:**
- Immediately inform staff if they experience asthma symptoms,
- Inform staff if they have self-administered any asthma medication,
- Carry asthma medication and a spacer with them at all times (if self-managing their asthma).

**Staff Training**

The following school staff will be appropriately trained:

- Group 1: All staff with a duty of care for students must undertake an asthma education session;
- Group 2: Staff with a direct student wellbeing responsibility such as nurses, first aid and camp organisers complete asthma management training;
- Any other school staff as determined by the principal to attend.

<table>
<thead>
<tr>
<th>Completed by</th>
<th>Course</th>
<th>Provider</th>
<th>Cost</th>
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<tbody>
<tr>
<td>Group 1</td>
<td>All school staff</td>
<td>Asthma first aid management for education staff</td>
<td>The Asthma Foundation of Victoria</td>
<td>Free to all schools</td>
</tr>
</tbody>
</table>
In addition, it is recommended, all staff participate in a briefing, to occur at the beginning of the school year on:

- the school’s Asthma Management Policy,
- the causes, symptoms and treatment of asthma,
- the identities of the students diagnosed with asthma, and where their medication is located,
- how to use a puffer and spacer,
- the school’s general first aid and emergency response procedures,
- the location of, and access to, asthma medication that have been provided by parents or purchased by the school for general use.

Asthma Management briefing will be provided to any new staff as part of the staff induction. If new students enrol at the school after the briefing staff should be notified of the new students’ details at the next staff meeting.

The briefing must be conducted by a member of the school staff who has successfully completed an Asthma Management Training Course and holds a current Asthma Management Certificate.

In the event that the relevant training has not occurred for a member of staff who has a child in their class diagnosed with asthma, the Principal will organise time for the relevant staff member to complete the “Asthma First Aid Management for Education Staff” online as soon as practicable after the student enrols, and preferably before the student’s first day at school.
The Principal will ensure that while the student is under the care or supervision of the college, including excursions, yard duty, camps and special event days, there is a sufficient number of school staff present who have successfully completed asthma training.

**Individual Asthma Risk Minimisation Plans**

An [Individual Asthma Risk Minimisation Plan](#) can be found on the Asthma Foundation of Victoria website: Victorian Schools Website

The Principal will ensure that an Individual Asthma Risk Minimisation Plan is developed, in consultation with the student’s parents, for any student who has been diagnosed by a medical practitioner with asthma.

The Individual Asthma Risk Minimisation Plan will be in place as soon as practicable after the student enrols, and where possible before their first day of school.

The Individual Asthma Risk Minimisation Plan will set out the following:

- information about the diagnosed student’s asthma 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 students are under the care or supervision of school staff, for in-school and out-of-school settings including in the school yard, on camps and excursions, or at special events conducted, organised or attended by the school,
- the name of the person(s) responsible for implementing the strategies,
- information on where the student’s medication will be stored,
- an Asthma Action Plan for Victorian Schools for each student diagnosed with Asthma.

**Note:** Asthma Action plans can sometimes be called Asthma Management Plans, Asthma Care Plans or can be in the form of a letter from the student’s Medical Practitioner. If a student presents with one of the aforementioned plans, the school Student Health and Wellbeing officer in consultation can transcribe the information on to the specific Asthma Action Plan for Victorian Schools. This Action Plan must be

The transcribable Asthma Action Plan can be downloaded from the Asthma Foundation of Victoria website; [Victorian School Resources.](#)

The school will then implement and monitor the student’s Individual Asthma Risk Minimisation Plan.

The student’s Asthma Risk Minimisation Plan will be reviewed, in consultation with the student’s parents in all of the following circumstances:
• annually,
• if the student's medical condition, insofar as it relates to asthma, changes,
• as soon as practicable after the student has a severe or life threatening asthma attack at school,
• when the student is to participate in an off-site activity, such as camps and excursions, or at special events conducted, organised or attended by the school (eg. class parties, elective subjects, cultural days, fetes, incursions).

It is the responsibility of the parents to:
• provide an Asthma Action Plan,
• inform the school in writing if their child’s medical condition, insofar as it relates to asthma and the potential for an asthma flare-up / attack, changes and if relevant, provide an updated Asthma Action Plan,
• provide an an up to date photo for the Asthma Action Plan when that Plan is provided to the school and when it is reviewed,
• provide the school with the student's asthma reliever medication that is current (the date has not expired) for their child, and a spacer where the asthma reliever medication is a metered dose inhaler (puffer) device.

Risk Minimisation and Prevention Strategies
Mazenod College is committed to minimising risk and developing Prevention Strategies to assist in managing students with Asthma at the school. The college works to ensure that common triggers of asthma are reduced, for all relevant in-school and out-of-school settings, which include (but are not limited to) the following:
• Smoking - is banned on school premises in accordance with Victorian law,
• Pollen - care is taken to maintain school grounds to reduce exposure as much as practicable,
• Exercise - consideration of a student’s abilities and medical condition are taken into account for all activities, and
• Colds and flu - appropriate information is displayed and communicated regarding the minimisation of contagions.

This includes during classroom activities (including class rotations, specialist and elective classes), and:
• between classes and other breaks,
• in canteens,
• during recess and lunchtimes,
• before and after school,
• special events including incursions, sports, cultural days, fetes or class parties, excursions and camps.
In the likelihood or occurrence of **Epidemic Thunderstorm Asthma** conditions, be alert and prepared to act on the warnings and advice, including:

- implement the communication strategy to inform the school community and parents
- implement procedures to avoid exposure such as staying indoors with windows and doors closed
- Implement emergency response procedures and follow individual asthma action plans as needed.

School staff are reminded that they 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 development and implementation of appropriate prevention strategies to minimise the risk of a severe / life-threatening asthma attack is an important step to be undertaken by school staff when trying to satisfy this duty of care.

Staff are appropriately informed and trained to assist with minimising risk for students in their care, and to respond as necessary.

**School Management and Emergency Response**

A complete and up to date list of students identified as having been diagnosed with asthma is available through the Learning Management System (LMS) for staff to access, and appropriate training will be provided.

Asthma Action Plans are located in the Health Centre with nursing staff. Up to date medical information is provided for school excursions, camps or special events.

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

In the event of an emergency, the staff member in attendance should follow the Asthma Action Plan, administer reliever medication as prescribed. Obtain assistance from nurses and colleagues, and contact an ambulance by calling 000:

- If the person is not breathing,
- If the person’s asthma suddenly becomes worse, or is not improving,
- If the person is having an asthma attack and reliever is not available,
- If you are not sure if it’s asthma,
- If the person is known to have Anaphylaxis, follow their Anaphylaxis Action Plan, then give Asthma First Aid,
- Notify parents/guardians and administration as soon as practicable.
Asthma Emergency Kits
Asthma emergency kits are found at the following locations:

- Health Centre,
- Reception (back room near photocopier),
- Founder’s Complex kitchen,
- Provence Centre office,
- Food Technology Kitchen,
- Oblate Hall (entry), and
- Year 10 building (outside Coordinator's office).

Emergency kits are also provided for out-of-school settings, such as excursions, camps and special events.

The Asthma Emergency Kits contain:

- blue/grey reliever medication such as Airomir, Asmol, or Ventolin,
- at least 2 spacer devices to assist with effective inhalation of the blue/grey reliever medication (ensure spare spacers are available as replacements),
- clear written instructions on:
  - how to use these medications and devices;
  - steps to be taken in treating a severe asthma attack;
- a record sheet/log for recording the details of a first aid incident, such as the number of puffs administered.

In consultation with nurses on staff, the Principal will determine the number of Asthma Emergency Kits required. The following relevant considerations will be taken into account:

- the number of students enrolled at the school,
- 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 school, including:
  - in the school yard, and at excursions, camps and special events conducted or organised by the school;
  - reliever medication have a limited life, usually expiring within 18 - 24 months, and will need to be replaced at the school’s expense, either at the time of use or expiry, whichever is first.
Annual Risk Management Checklist

The Principal will complete an annual Risk Management Checklist as published by the Department of Education and Training to monitor compliance with their obligations.

Communication Strategy

A copy of the Asthma Management Policy will be made available to staff members on the College website. Briefing will occur at the start of each school year, each semester, and as part of induction for any new staff members. Staff access to the Learning Management System (LMS) also provides details of at risk students.

School staff, students and parents will be advised about how to respond to an asthma attack by a student in various environments including:

- during normal school activities including in the classroom, in the schoolyard, in all school buildings and sites including gymnasiums and halls,
- during off-site or out of school activities, including on excursions, school camps and at special events conducted or organised by the school.

Volunteers and casual relief staff will be informed appropriately of students diagnosed with asthma and the potential for a severe or life threatening asthma attack and their role in responding to an asthma attack by a student in their care.

Review

A review of the Asthma Management Policy will be conducted should the College Executive deem it necessary or alterations to the relevant legislation occur.

Record of Review

<table>
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<th>Date</th>
<th>Alterations made</th>
<th>Name</th>
</tr>
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<tbody>
<tr>
<td>5 February 2020</td>
<td>Thunderstorm Asthma</td>
<td>Greg Pargeter</td>
</tr>
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Note: Reliever medication is available for purchase at any chemist. No prescriptions are necessary.

Note: Schools are not required to provide a nebuliser for students. If a student is prescribed a nebuliser, they must bring their own to school. Specialised nebuliser training can be accessed through the manufacture, the parents of the student prescribed a nebuliser must cover any costs associated.
Other Resources

National Asthma Council (NAC) is the national authority on asthma providing the latest information on asthma to health professionals to help improve their quality of care. The NAC writes Guidelines based on scientific and medical evidence on asthma and the treatment of asthma Further information is available at: http://www.nationalasthma.org.au/

The Asthma Foundation of Victoria (AFV) is a non-profit organisation that raises awareness in the Victorian community about asthma. A range of items including brochures, medical devices and training resources are available from the online store on The Asthma Foundation of Victoria’s website. Further information is available at: http://www.asthmaaustralia.org.au/vic/home

Asthma Advice Line provides advice and support on implementing asthma legislation to education and care services and Victorian children's services. The Asthma Advice Line is available between the hours of 9.00 a.m. to 5:00 p.m., Monday to Friday. Phone 1800 278 462 (toll free) or (03) 9326 7088. Further information is available at: http://www.asthmaaustralia.org.au/vic/about-asthma/manage-your-asthma

School nurses are also able to refer parents and students if they are concerned about their asthma for asthma education and support. http://www.asthmaaustralia.org.au/vic/about-asthma/resources/patient-education-referral-service
Glossary of Terms

**Adrenaline autoinjector:** An adrenaline autoinjector device, approved for use by the Commonwealth Government Therapeutic Goods Administration, which can be used to administer a single premeasured dose of adrenaline to those experiencing a severe allergic reaction or anaphylaxis. These may include EpiPen® or EpiPen® Jr.

Adrenaline autoinjector for general use   A 'back up' or 'unassigned' adrenaline autoinjector purchased by a school.

**Asthma Action Plan:** Sometimes called Asthma Care Plans and Asthma Management Plans, they list 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 Management Plan.

**School Camp and Excursion Medical Update Form:** A plan that parents complete prior to the student attending overnight school activities, where the student may be required to take additional medication to manage their asthma.

**Asthma Education Session:** An education session delivered by an asthma peak body designed to educate staff on the basics of asthma. This can be face to face session or online training.

- Asthma first aid management for education staff

**Asthma Emergency Kit:** A specific first aid kit for asthma designed to be portable in an emergency.

**Asthma Foundation of Victoria:** The peak consumer body for people with Asthma and their careers in Victoria.

**Asthma management training course:** This means:

- A course in asthma management training that is accredited as 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;

- A course in asthma management training accredited under Chapter 4 of the Act 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 the guidelines as published by the Department.
Asthma Peak Body: An advocacy group established for the purposes of developing standards and processes, or to act on behalf of all members when lobbying government or promoting the interests of people with asthma.

- The Asthma Foundation of Victoria
- National Asthma Council

ASCIA Action Plan for Anaphylaxis: This plan is a nationally recognised action plan for anaphylaxis developed by ASCIA. These plans are device specific; that is, they list the student's prescribed adrenaline autoinjector (EpiPen® or EpiPen®Jr) and must be completed by the student’s medical practitioner. This plan is one of the requirements of the student’s Individual Anaphylaxis Management Plan.

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 Management 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.

Medical practitioner: This is a registered medical practitioner within the meaning of the Health Professions Registration Act 2005, but excludes a person registered as a non-practising health practitioner.

National Asthma Council: Medical peak body for asthma in Australia, develops the Australian Asthma Handbook (Treatment Guidelines).

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.

Emergency response procedures: Procedures which each school develops for emergency response to an asthma attack for all in-school and out-of-school activities. The procedures, which are included in the school’s asthma management policy, differ from the instructions listed on the Asthma Action Plan of ‘how to administer reliever medication’.