



Mary MacKillop

Catholic Regional College

Asthma Management (Asthma Guidelines) Policy

1. DUTY OF CARE

Every 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.

2. DISABILITY DISCRIMINATION

Asthma falls within the definition of disability for the purposes of the Disability Discrimination Act 1992 (Commonwealth). This means that schools must ensure that they do not unlawfully discriminate, either directly or indirectly, against students with asthma.

Under the Disability Standards for Education 2005, schools have an obligation to make reasonable adjustments to accommodate students with disabilities. It is important to consult with a student's parent on what reasonable adjustments are appropriate for a student with asthma.

3. THE HAZARD – ASTHMA MANAGEMENT

Asthma affects around 11% of Australian children and is one of the most common reasons for school 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.

4. STATEMENT

Mary MacKillop Catholic Regional College (**MMCRC**) is committed to providing a safe learning environment for all our 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.

5. STAFF TRAINING

The following school staff will be appropriately trained:

All staff must complete an asthma management course

Selection of Asthma Management courses

Course	Provider	Completed by	Cost	Accreditation	States available
Asthma First Aid for Schools - online	Asthma Australia	All school staff	Free	3 years	National

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/device 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/device that have been provided by parents or purchased by the school for general use.

Additional briefings should be held at the beginning of each school semester. 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.

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 for School Staff* online course as soon as practicable after the student enrolls, 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 school, including excursions, yard duty, camps and special event days, there is a sufficient number of school staff present who have successfully completed asthma training.

6. 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.

7. INDIVIDUAL ASTHMA RISK MINIMISATION PLANS

School

The principal (or his delegate) 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 enrolls, 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 student/s 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
- a suitable Asthma Action Plan/Asthma Care Plan for each student diagnosed with Asthma.

MMCRC 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).

Parents/Carers

It is the responsibility of the parents/carers to:

- provide an Asthma Action Plan/Asthma Care 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, any changes and if relevant, provide an updated Asthma Action Plan/Asthma Care Plan.
- provide an up to date photo for the Asthma Action Plan/Asthma Care 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), and a spacer device where the asthma reliever medication is a metered dose inhaler (puffer) device.

8. PREVENTION STRATEGIES

Risk Minimisation and Prevention Strategies that will be put into place for all relevant in-school and out-of-school settings include (but are not limited to) the following:

- during classroom activities (including class rotations, specialist and elective classes)
- 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.

9. SCHOOL MANAGEMENT AND EMERGENCY RESPONSE

The school has procedures for emergency response to an asthma attack, which includes:

- a complete and current list of students identified as having been diagnosed with asthma
- details of Asthma Action Plans/Asthma Care Plans and where these can be located:
- information about the storage and accessibility of asthma medication
- how communication with school staff, students and parents is to occur in accordance with a communications plan.

Asthma Emergency Kits

The principal will purchase *salbutamol* (reliever medication) for general use (purchased by the school) for use in the Asthma Emergency Kits.

The Asthma Emergency Kits will contain:

- reliever medication such as *Asmol* or *Ventolin*
- at least two single person use spacer devices to assist with effective inhalation of the reliever medication (ensure spare spacers are available as replacements)
- clear written instructions on:
 - how to use the medication and spacer devices
 - 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 (record sheets can be downloaded from the Asthma Australia website).

MMCRC has an Asthma Emergency kit in every First Aid bag, that has taken on excursions or to sporting events.

The principal should take into account the following additional relevant considerations:

- the number of students
- 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, organised or attended by the school
- reliever medication contains up to 200 doses. As puffers generally do not have a dose counter on them, the school will need to replace the medication before 200 doses have been administered.
- reliever medication has a limited life, and will usually expire within 12-18 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 their Department of Education/Education sector and Training to monitor compliance with their obligations.

10. 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](#)

11. KEY REFERENCE

This policy has been developed having regard to the Asthma Guidelines

12. REVIEW

This Policy has been reviewed and ratified by the Principal

Implementation Date: July 2018

Reviewed: October 2023

Next Review Date: October 2025