Moonee Ponds Primary School
respect • optimism • care • collaboration

ASTHMA POLICY

Help for non-English speakers

If you need help to understand the information in this policy please contact Moonee Ponds Primary School on 9375 2511.

RATIONALE:

To ensure that Moonee Ponds Primary School appropriately supports students diagnosed with asthma.

PURPOSE:

To explain to Moonee Ponds Primary School parents/carers, staff and students the processes and procedures in place to support 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 and their parents/carers.

POLICY:

Asthma

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 enrols at Moonee Ponds Primary School:

1. Parents/carers must provide the school with an Asthma Care Plan (see appendix 1) 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 Care Plan.
3. Moonee Ponds Primary School will keep all Asthma Care Plans in the front office.
4. A student with an Asthma Action Plan only requires a Student Health Support Plan if their asthma is not well-controlled, and needs individualised medical or health-related supervision, care or adjustments at school. School staff will 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
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 Care Plan.
7. School staff will work with parents/carers to review Asthma Care Plans (and Student Health Support Plans) once a year.

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)

Student asthma kits will be stored in the office. If on an excursion or activity, the teacher may ask the students to carry their asthma kit with them. This will depend on the student and the type of activity.

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 table below. School staff may contact Triple Zero "000" at any time.

Step	Action
1.	Sit the person upright • Be calm and reassuring • Do not leave them alone • Seek assistance from another staff member or reliable student to locate the student's reliever, the Asthma Emergency Kit and the student's Asthma Care Plan (if available). • If the student's action plan is not immediately available, use the Asthma First Aid as described in Steps 2 to 5.
2.	Give 4 separate puffs of blue or blue/grey reliever puffer: • Shake the puffer • Use a spacer if you have one • Put 1 puff into the spacer • Take 4 breaths from the spacer Remember – Shake, 1 puff, 4 breaths
3.	Wait 4 minutes • If there is no improvement, give 4 more separate puffs of blue/grey reliever as above (or give 1 more dose of Bricanyl or Symbiocort inhaler)
4.	If there is still no improvement call Triple Zero "000" and ask for an ambulance. • Tell the operator the student is having an asthma attack • Keep giving 4 separate puffs every 4 minutes until emergency assistance arrives (or 1 dose of Bricanyl or Symbicort every 4 minutes – up to 3 doses of Symbicort)
5.	If asthma is relieved after administering Asthma First Aid, stop the treatment and observe the student. Notify the student's emergency contact person and record the incident

Staff will call Triple Zero "000" immediately if:

- the person is not breathing
- the student is not breathing
- the student is having a severe or life threatening attack (reliever medication not working at all; cannot speak a full sentence; extreme difficulty breathing; feeling asthma is out of control; lips turning blue)
- the student is having an asthma attack and a reliever is not available

- the student is known to have anaphylaxis – staff will follow their Anaphylaxis Action Plan then give asthma first aid at any time the student's condition suddenly worsens or is not improving
- staff are otherwise concerned about the student's health and safety.

Training for staff

Moonee Ponds Primary School will arrange the following asthma management training for staff:

Staff	Completed by	Course	Provider	Cost	Valid for
Group 1 General Staff	School staff with a direct teaching role with students affected by asthma or other school staff directed by the principal after conducting a risk assessment.	Asthma first aid management for education staff (non-accredited) One hour face-to-face or online training.	The Asthma Foundation of Victoria	Free to all schools	3 years
Group 2 Specific Staff	Staff working with high-risk children with a history of severe asthma, or with direct student wellbeing responsibility, (including nurses, PE/sport teachers, first aid and school staff attending camp)	Course in the management of Asthma Risks and Emergencies in the Workplace 22556VIC (accredited)	Any RTO that has this course in their scope of practice	Paid by the school.	3 years

Moonee Ponds Primary School will also conduct an annual briefing for staff on:

- the procedures outlined in this policy
- the causes, symptoms and treatment of asthma
- identities of the students diagnosed with asthma
- how to use a puffer and spacer
- the location of:
    - the Asthma Emergency Kits
    - asthma medication which has been provided by parents for student use.

Moonee Ponds Primary School will also provide this policy to casual relief staff and volunteers who will be working with students, and may also provide a briefing if the principal decides it is necessary depending on the nature of the work being performed.

Asthma Emergency Kit

Moonee Ponds Primary School will provide and maintain at least two Asthma Emergency Kits. One kit will be kept on school premises at the front office and one will be a mobile kit for activities such as:

- yard duty
- camps and excursions.

The Asthma Emergency Kit will contain:

- at least 1 blue or blue/grey reliever medication such as Airomir, Admol or Ventolin
- at least 2 spacer devices (for single person use only) to assist with effective inhalation of the blue or blue/grey reliever medication (Moonee Ponds Primary School will ensure

spare spacers are available as replacements). Spacers will be stored in a dust proof container.
- clear written instructions on Asthma First Aid, including:
    - 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 an asthma first aid incident, such as the number of puffs administered.

A designated office administrator will monitor and maintain the Asthma Emergency Kits. They will:

- ensure all contents are maintained and replaced where necessary
- regularly check the expiry date on the canisters of the blue or blue/grey reliever puffers and place them if they have expired or a low on doses
- replace spacers in the Kits after each use (spacers are single-person use only)
- dispose of any previously used spaces.

The blue or blue/grey reliever medication in the Asthma Emergency Kits may be used by more than one student as long as they are used with a spacer. If the devices come into contact with someone's mouth, they will not be used again and will be replaced.

After each use of a blue or blue/grey reliever (with a spacer):

- remove the metal canister from the puffer (do not wash the canister)
- wash the plastic casing
- rinse the mouthpiece through the top and bottom under running water for at least 30 seconds
- wash the mouthpiece cover
- air dry then reassemble
- test the puffer to make sure no water remains in it, then return to the Asthma Emergency Kit.

Management of confidential medical information

Confidential medical information provided to Moonee Ponds Primary School to support a student diagnosed with asthma will be:

- recorded on the student's file
- shared with all relevant staff so that they are able to properly support students diagnosed with asthma and respond appropriately if necessary.

Communication plan

This policy will be available on the Moonee Ponds Primary School website so that parents and other members of the school community can easily access information about the school's asthma management procedures.

Epidemic Thunderstorm Asthma

Moonee Ponds Primary School will be prepared to act on the warnings and advice from the Department of Education and Training when the risk of epidemic thunderstorm asthma is forecast as high.

COMMUNICATION

This policy will be communicated to our school community in the following ways:

- Available publicly on our school's website (or insert other online parent/carer/student communication method)
- Included in staff induction processes and staff training
- Discussed at annual staff briefings/meetings
- Hard copy available from school administration upon request

FURTHER INFORMATION AND RESOURCES:

- Asthma Foundation Victoria: Resources for schools
- Asthma Australia: Asthma emergency kits
- School Policy and Advisory Guide:
  - Asthma
  - Treating an asthma attack
- MPPS First Aid Policy (available on the School Website here)
- MPPS Health Care Needs Policy (available on the School Website here)

APPENDICES

1. Victorian Schools Asthma Action Plan – Puffer and Spacer

POLICY REVIEW AND APPROVAL

Policy last reviewed	February 2026
Approved by	Principal
Next scheduled review date	2027 (1 year)

Appendix 1

FOR USE WITH PUFFER AND SPACER

ASTHMA ACTION PLAN

VICTORIAN SCHOOLS

Student's name:

DOB:

Confirmed triggers:

PHOTO

ASTHMA AUSTRALIA

- ☐ Child can self-administer if well enough
- ☐ Child needs to pre-medicate prior to exercise
- ☐ Face mask needed with spacer

ALWAYS give adrenaline autoinjector FIRST, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has SUDDEN BREATHING DIFFICULTY (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms.

Adrenaline autoinjector prescribed: ☐ Y ☐ N Type of adrenaline autoinjector:

ASTHMA FIRST AID

For Severe or Life-Threatening signs and symptoms, call for emergency assistance immediately on Triple Zero "000"
Mild to moderate symptoms do not always present before severe or life-threatening symptoms

1. **Sit the person upright**
   Stay with the person and be calm and reassuring
2. **Give ___ separate puffs of Airomir, Asmol or Ventolin**
   Shake the puffer before each puff
   Puff 1 puff into the spacer at a time
   Take 4 breaths from spacer between each puff
3. **Wait 4 minutes**
   If there is no improvement, repeat step 2
4. **If there is still no improvement call emergency assistance**
   Dial Triple Zero "000"
   Say 'ambulance' and that someone is having an asthma attack
   Keep giving ___ puffs every 4 minutes until emergency assistance arrives

Commence CPR at any time if person is unresponsive and not breathing normally.

Blue/grey reliever medication is unlikely to harm, even if the person does not have asthma.

SIGNS AND SYMPTOMS	MILD TO MODERATE	SEVERE	LIFE-THREATENING
	• Minor difficulty breathing • May have a cough • May have a wheeze • Other signs to look for:	• Cannot speak a full sentence • Sitting hunched forward • Tugging in of skin over chest/throat • May have a cough or wheeze • Obvious difficulty breathing • Lethargic • Sore tummy (young children)	• Unable to speak or 1–2 words • Collapsed/exhausted • Gasping for breath • May no longer have a cough or wheeze • Drowsy/confused/ unconscious • Skin discolouration (blue lips)

Emergency contact name:

Work ph:

Home ph:

Mobile ph:

Plan prepared by Dr or Nurse Practitioner:

Signed: I hereby authorise medications specified on this plan to be administered according to the plan

Date prepared:

Date of next review:

- Assemble spacer.
- Remove cap from puffer.
- Shake puffer well.
- Attach puffer to end of spacer.
- Place mouthpiece of spacer in mouth and ensure lips seal around it.
- Breathe out gently into the spacer.
- Press down on puffer canister once to fire medication into spacer.
- Breathe in and out normally for 4 breaths (keeping your mouth on the spacer).

© Asthma Australia August 2019. This plan was developed as a medical document that can only be completed and signed by the patient's treating medical doctor or nurse practitioner and cannot be altered without their permission.