



Help for non-English speakers

If you need help to understand this policy, please contact the Principal at Murtoa College or call 53 852 381

PURPOSE

To ensure that Murtoa College appropriately supports students diagnosed with asthma.

OBJECTIVE

To explain to Murtoa College 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 casual 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
- colds/flu

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- 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
- 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 Murtoa College:

1. Parents/carers must provide the school with an Asthma Action Plan (Appendix One) 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. Murtoa College will keep all Asthma Action Plans at the Front Office and the Primary Staff Office Area.
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 will be developed in accordance with Murtoa College's Healthcare Needs Policy (Refer to Murtoa College website <https://murtoacollege.vic.edu.au/index.php/policies-plans-and-reports/>).

If a student diagnosed with asthma is going to attend a school camp or excursion, Murtoa College | parents/carers are required to provide any updated medical information.

5. If a student's asthma condition or treatment requirements change, parent/carers must notify the school and provide an updated Asthma Action Plan.
6. School staff will work with parents/carers to review Asthma Action 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

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- their spacer (if they use one)

Students will be required to keep their asthma kits with them while at school.

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 <ul style="list-style-type: none"> • 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 Action 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: <ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> • If there is no improvement, give 4 more separate puffs of blue/grey reliever as above (or give 1 more dose of Bricanyl or Symbicort inhaler)
4.	If there is still no improvement call Triple Zero “000” and ask for an ambulance. <ul style="list-style-type: none"> • 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
- if the person’s asthma suddenly becomes worse or is not improving
- if the person is having an asthma attack and a reliever is not available
- if they are not sure if it is asthma
- if the person is known to have anaphylaxis

School Camps/Excursions:

- A minimum of one staff member capable of managing an acute asthma attack shall be present.

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- Parents/Carers will be notified of their responsibility to ensure that their child has an adequate supply of appropriate medication, and this medication has been added to a Camp/Excursion Asthma Action Plan which is returned to the school office along with other camp permission documentation. This Asthma Action Plan will be taken to camp by camp staff.
- An asthma first aid kit will be carried by staff.
- Catering staff will be provided with a record of students known to have food allergies or have their asthma triggered by food or food additives.

School Activities/Physical Education:

- Students with asthma will be encouraged to participate in all school activities.
- Staff responsible for Physical Education/Activity will know and understand the steps involved in managing exercised induced asthma

Training for staff

Murtoa College 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 online training.	Asthma Australia	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)	<i>Course in the management of Asthma Risks and Emergencies in the Workplace</i> 22556VIC (accredited)	Any RTO that has this course in their scope of practice	Paid by Murtoa College	3 years

Murtoa College will also conduct an annual briefing for staff on:

- the procedures outlined in this policy

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- 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.

Murtoa College 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

Murtoa College will provide and maintain at least two Asthma Emergency Kits. One kit will be kept on school premises at the Front office and the Primary staff area, 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 (Murtoa College 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
- The Business/HR Manager and Office Education Support staff 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 if they are used with a spacer. If the devices encounter 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

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- 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 Murtoa College 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 Murtoa College website so that parents and other members of the school community can easily access information about Murtoa College asthma management procedures.

Epidemic Thunderstorm Asthma

Murtoa College 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
- Included in staff induction processes and staff training
- Included in staff handbook/manual
- Discussed at annual staff briefings/meetings
- Included in transition and enrolment packs
- Discussed at parent information nights/sessions
- Reminders in our school newsletter
- Hard copy available from school administration upon request

FURTHER INFORMATION AND RESOURCES

- Asthma Australia: [Resources for schools](#)
- Policy and Advisory Library:
 - [Asthma](#)
 - [Treating an asthma attack](#)
- Health Care Needs Policy

Murtoa College website: <https://murtoacollege.vic.edu.au/index.php/policies-plans-and-reports/>

POLICY REVIEW AND APPROVAL

Policy last reviewed	October 2024
Approved by	Principal

MURTOA COLLEGE


ASTHMA POLICY



Next scheduled review date	October 2025
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Appendix One

Victorian Asthma Action Plans



Name: _____
Date of birth: _____

Photo

Child can self administer medication if well enough.
 Child needs to pre-medicate prior to exercise


Confirmed triggers: _____

Family/emergency contact name(s): _____

Work Ph: _____
Home Ph: _____
Mobile Ph: _____

Plan prepared by Dr or NP: _____

I hereby authorise medications specified on this plan to be administered according to the plan.
Signed: _____
Date: _____
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 Action Plan

For use with a Puffer and Spacer

MILD TO MODERATE SIGNS

- Minor difficulty breathing
- May have a cough
- May have a wheeze

ACTION FOR MILD TO MODERATE ASTHMA FLARE UP

- 1 Sit the person upright.
 - Stay with person and be calm and reassuring
- 2 Give 4 separate puffs of Airomir, Asmol or Ventolin
 - Shake puffer before each puff
 - Put 1 puff into the spacer at a time
 - Take 4 breaths from the spacer between each puff
- 3 Wait 4 minutes.
 - If there is no improvement, repeat step 2

If there is still no improvement follow the Asthma First Aid Plan for severe / life-threatening asthma attacks below

Mild to moderate symptoms do not always present before severe or life-threatening symptoms

SEVERE SIGNS	LIFE-THREATENING SIGNS
<ul style="list-style-type: none"> • Cannot speak a full sentence • Sitting hunched forward • Tugging in of skin over chest or throat • May have a cough or wheeze • Obvious difficulty breathing • Lethargic • Sore tummy (young children) 	<ul style="list-style-type: none"> • 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)

ACTION FOR SEVERE / LIFE-THREATENING ASTHMA ATTACK

- 1 Sit the person upright. Be calm and reassuring. Do not leave them alone.
- 2 Phone ambulance: Triple Zero (000).
- 3 Give 4 separate puffs of Airomir, Asmol or Ventolin
 - Shake puffer before each puff
 - Put 1 puff into the spacer at a time
 - Take 4 breaths from the spacer between each puff
- 4 Wait 4 minutes.
- 5 Keep giving 4 puffs every 4 minutes until emergency assistance arrives.

Commence CPR at any time if person is unresponsive and not breathing normally. Blue reliever medication is unlikely to harm, even if the person does not have asthma.

IF UNCERTAIN WHETHER IT IS ANAPHYLAXIS OR ASTHMA

- Give adrenaline autoinjector FIRST, then asthma reliever.
- If someone with known food or insect allergy suddenly develops severe asthma like symptoms, give adrenaline autoinjector FIRST, then asthma reliever.

Anaphylaxis: Y N Type of autoinjector: _____

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Asthma Action Plan - for Salbutamol when using a puffer and spacer (4 x 4 Procedure)