

	<p style="text-align: center;">PARADE COLLEGE</p>
<p style="text-align: center;">POLICY:</p>	<p style="text-align: center;">ASTHMA MANAGEMENT</p>

Preamble

Asthma is a chronic health condition affecting approximately 11% of Australian children and teenagers. Asthma is one of the most common reasons for child admissions to hospital and missed days of school. Asthma exacerbations can commonly occur while attending schools.

In order to meet the duty of care obligations specified by the *School Policy and Advisory Guide* (SPAG) and to ensure the health and wellbeing of students attending Parade College, the College recognises the importance of staff education and the implementation of an asthma policy. The College recognises the importance of involvement and engagement with parents and carers of students and the ability of students to self-manage their asthma where appropriate.

Parade College recognises that this condition can be serious and life threatening so it is crucial that staff are well equipped to deal with instances of asthma.

Principles

Asthma is treatable and occurrences are preventable with the right encouragement, support and education, students of Parade College can lead full and normal lives.

Policy

The purpose of this policy is to ensure the Parade College community (leaders, staff, volunteers, parents/carers 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, excursions and school camps.

Relevant Legislation

- Education And Training Reform Act 2006
- Schools Policy Advisory Guide
- Occupational Health & Safety Act 2004 (Vic)
- Equal Opportunity Act 2010 (Vic)
- Disability Discrimination Act 1992 (Cth)

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 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 not have asthma.

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

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.

Guidelines

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.

The College will ensure that there are processes in place to:-

- Identify students with asthma during the enrolment process.
- Where possible, ensure that all students with asthma have a current written Asthma Management Plan (and parents update annually).
- Encourage parents/carers to supply all students with asthma the appropriate asthma reliever medication and spacer at all times their students attend school and off site activities.
- 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 and instructions outlining the first aid procedure.
- Ensure that reliever medications within the asthma emergency kits are checked regularly and expired medication replaced.
- Facilitate communication between staff, parents/carers and students regarding the asthma policy and strategies.
- Promptly communicate to parents/carers any concerns regarding asthma and students attending the school.
- Identify and minimize, where possible, triggers of asthma symptoms for students. The College recognises that there are a wide range of factors which trigger asthma. Parents are advised that if certain food ingredients trigger asthma for their sons, safe food should be brought from home and/or the College notifies the provider of the camp that appropriate food is provided on the camp. These students are advised not to share food with others. Staff on immersions and international trips will be provided with medical information from the First Aid Officer regarding students with asthma and food triggers in hard copy.
- 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.

Staff

College staff will:

- Know and understand the requirements of this policy
- Know the identity of students who are diagnosed with asthma and understand the causes, symptoms, and treatment of asthma
- Attend the briefing in how to recognise and respond to an asthma attack, including administering reliever medication
- Know where to find a copy of each student's Asthma Action Plan quickly, and follow it in the event of an asthma flare-up/attack
- Know the College's general first aid and emergency response procedures, and understand their role in relation to responding to a severe or life-threatening asthma attack
- Know where students' reliever medication and the Asthma Emergency Kits for general use are kept
- Know and follow the prevention and risk minimisation strategies in the student's Individual Asthma Risk Minimisation Plan
- Plan ahead for special class activities (e.g. cooking, art and science classes), or special occasions (e.g. excursions, incursions, sport days, camp, cultural days, fetes and parties), either at the college, or away from the college
- Be aware of the possibility of hidden triggers in art supplies, traces of triggers when using items such as paint, cleaning chemicals in art or food additives in cooking classes, or students being at risk of an asthma attack when they experience extreme emotions induced at college (e.g. stress during exams, odors, fumes)
- Raise student awareness about asthma and the importance of their role in fostering a college environment that is safe and supportive for their peers.

Parents and Carers

Parents, Carers and Guardians of students diagnosed with asthma will:

- It is the parents/carers responsibility to inform the College if their child has asthma upon enrolment.

- Provide a signed written action plan to the College, and ensure that it is updated at least yearly and uploaded to the school medical portal.
- Participate and sign student Health Support and Risk Minimisation Plans if required.

The plan must also include:

- Complete and maintain their medical profile on PAM.
- Ensure that their child is self-managing their asthma correctly.
- Promptly communicate all medical and health information relevant to their child, to the College via the PAM portal.
- Communicate any changes to their child's asthma or any concerns about the health of their child to their Tutor teacher or House Leader.
- 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.

Students

Students will:

- Immediately inform staff if they experience asthma symptoms.
- Inform staff if they have self-administered any asthma medication.

Staff Training

PLEASE NOTE: First Aid training does not meet asthma training
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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 first aiders and camp organisers complete asthma management training.
- Any other school staff as determined by the Principal to attend.

	Completed by	Course	Provider	Cost	Valid for
GROUP 1	All school staff	Asthma first aid management for education staff. asthma.otrainu.com	The Asthma Foundation of Victoria	Free to all schools	3 years
GROUP 2 Option 1	Staff with a direct student wellbeing responsibility	Course in Management of Asthma Risks and Emergencies in the Workplace. 22282VIC	Any RTO that has this course in their scope of practice approved by the Department	Paid by the College	3 years

			of Education		
GROUP 2 Option 2	Staff with a direct student wellbeing responsibility	Course in Emergency Asthma Management 10392NAT	Any RTO that has this course in their scope of practice	Paid by the College	

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 via the LMS and where asthma medication is located.
- How to use a puffer and spacer.
- The College'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 induction. If new students enroll at the school after the briefing, staff should be notified of the new students' details via the school LMS.

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.

The Principal will ensure that while the student is under the care and supervision of the College, including excursion, yard duty, camps and special events, there is a sufficient number of school staff present who have successfully completed asthma training.

Communication Strategies

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

School staff, parents and students 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, on the school yard, in all buildings and sites including the gymnasium and halls.
- During off-site or out of school activities, including on excursions, school camps and at special events conducted or organized by the school.

Risk Minimisation Strategies

Parade College is committed to minimizing risk and developing Prevention Strategies to assist in managing students with Asthma at school. The College works to ensure that common triggers of asthma are reduced for all the relevant in-school and out-of-school setting, which include:

- 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.
- Cold and flu – appropriate information is displayed and communicated regarding the minimisation of contagions.

This includes during classroom activities (including class rotations, specialist and elective class and:

- Between classes and other breaks
- In canteens
- During recess and lunchtimes
- Before and after school
- Special events including incursions, sports, cultural days, class parties, excursions and events.

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 action plans as needed.

College 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 reasonable foreseeable. The development and implementation of appropriate prevention strategies to minimize 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 minimizing risk for students in their care and to respond as necessary.

<https://asthma.org.au/about-asthma/triggers/thunderstorm-asthma/>

Annual Risk Management Check List

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

Individual Risk Minimisation Plans

An Individual Risk Minimisation Plan can be found on the Asthma Foundation of Victoria website: Victorian Schools Website.

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

The Individual Risk Minimisation Plan will set out the following:

- Information about the student's asthma including the type of triggers the student has (based on a written diagnosis from a medical practitioner).
- Strategies to minimize 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 the school yard, on camps and excursions or at special events conducted, organized or attended by the school.
- The title of the person responsible for implementing the strategies.
- Information where the student's medication will be stored.
- An Asthma Action Plan for Victorian Schools for each student diagnosed with Asthma.

The student's Asthma Risk Minimisation Plan will be reviewed 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.

It is the responsibility of the parents to:

- Provide an Asthma Action Plan.
- Inform the school in writing if their child's medical condition, in so far 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 up to date photo for 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, unless the child is carrying the medication and spacer for self-management purposes.

School

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 First Aid officer can transcribe the information on to the specific Asthma Action Plan for Victorian Schools.

Management and Emergency Response

Also known as Asthma Care Plans and Asthma Management Plans, the Asthma Action Plan lists 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 Risk Minimisation Plan.

If a student presents with a different Asthma Action Plan, the First Aid Officer in consultation with the student's parents/carers can transcribe the information on to the specific Asthma Action Plan for Victorian Schools. This Action Plan must be signed by the parent of the student for authenticity and the original Asthma Action Plan provided by the parent must be kept in the student's file.

Staff will follow the written first aid instructions on the student's Asthma Action Plan.

If no specific and signed instructions are available, the instructions are unclear, or the parent has not supplied an Asthma Action Plan, begin the first aid procedure immediately as directed by the First Aid Management (as authorised by the Department of Education and Early Childhood Development).

See Appendix E for more detail

Call emergency assistance to attend (000) IF:

- the person's asthma symptoms are severe
- the person suddenly stops breathing
- the person's asthma symptoms continue to worsen
- blue/grey reliever medication is not available
- you are unsure what is causing the breathing difficulty

Emergency response

In the event of an emergency, the staff member in attendance should follow Emergency Management Procedure and the student's Asthma Action Plan, assist the student in administering the reliever medication as prescribed or follow the Asthma First Aid guidelines. Obtain assistance from the First Aid Officer and colleagues and contact an ambulance by calling 000:

- If the person is not breathing (Commence DRSABCD)
- 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 it is an asthma attack
- If the person is known to have anaphylaxis, follow their anaphylaxis action plan then give asthma first aid
- Notify parents/carers and administration as soon as practicable.

Maintenance Asthma Emergency Kits

Disposable asthma spacers are single-person use only. To avoid the risk of infection, spacers must only be used by one student. The College ensures that spacers in Asthma Emergency kits are:

- Stored in dustproof container
- Labelled with the name of the student who has used them
- Cleaned once a month or after being notified of a respiratory tract infection by the student who has the spacer or their parent/ carer.

After a spacer and/ or mask is used by a student, they will either be disposed of, or labelled and either kept on site for further use by the student or given to the student to take home.

Blue or blue/grey reliever medication 'puffers' may be used by more than one student, as long as they have been used with a spacer. If the medication delivery device (e.g. puffer) comes into contact with someone's mouth it cannot be reused and must be replaced.

Other Asthma Medication

Some students will be prescribed other medication to help prevent asthma symptoms occurring. These medications should not be provided to the College to administer or hold onsite unless the student attending activities where they will be required to be away from home for an extended period of time.

NOTE: Schools are not required to provide a nebulizer for students. If a student is prescribed a nebulizer, they must bring their own to school. The parents/carers must cover any costs associated.

Asthma Emergency kits are found at the following locations:

- First Aid E47 Bundoora
- First Aid Office E49 Bundoora
- Reception Bundoora and Preston Campuses
- College Hall Emergency Bag with First Aid Convener
- Emergency kits are also provided for out of school setting such as excursions and camps.

The Asthma emergency kits contain:

- Blue/grey reliever medication such as Ventolin/Asmol
- At least two spacer devices to assist with effective inhalation of the blue/grey reliever medication.
- Clear instructions on
 - How to use the medication and spacer
 - Steps to be taken in treating a severe asthma attack
 - Alert the school if a student suffers a severe or life threatening asthma attack.

The following factors will be taken into account when deciding how many Asthma Emergency Kits are required by the school.

- The number of students enrolled at the school
- The accessibility of reliever medication that have been provided by parents/carers of students who have been diagnosed with asthma
- The availability and sufficient supply at excursions and camps etc.
- Reliever medication has a limited life usually between 18-24 months and will need to be replaced at the school's expense at the time of expiry.

Appendices:

[Appendix A – Asthma Action Plan \(National Asthma Council Australia\)](#)

[Appendix B – Asthma Action Plan \(Asthma Australia\)](#)

[Appendix C – Asthma First Aid Guide](#)

[Appendix D – Asthma Health Support & Risk Minimisation Plan](#)

[Appendix E – Risk Management Checklist](#)

[Appendix F – Asthma Emergency Management Procedure](#)

Resources

National Asthma Council (NAC) – www.nationalasthma.org.au

The Asthma Foundation of Victoria (AFV) – asthma.org.au

Asthma Guidelines – A resource for managing asthma in Victorian Schools

<https://asthmaaustralia.org.au/vic/education-and-training/for-victorian-schools-resources/school-resources>

<https://asthma.org.au/about-asthma/triggers/thunderstorm-asthma/>

Approved by College Board: October 2020

Appendix A: Asthma Action Plan (National Asthma Council Australia)

FOR USE WITH PUFFER AND SPACER

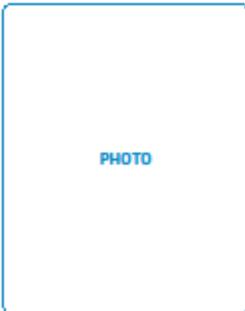
ASTHMA ACTION PLAN

VICTORIAN SCHOOLS

Student's name: _____

DOB: _____

Confirmed triggers: _____



- 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

- Sit the person upright**
Stay with the person and be calm and reassuring
- 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
- Wait 4 minutes**
If there is no improvement, repeat step 2
- 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
	<ul style="list-style-type: none"> Minor difficulty breathing May have a cough May have a wheeze Other signs to look for: <div style="border: 1px solid black; width: 100px; height: 40px; margin-top: 5px;"></div>	<ul style="list-style-type: none"> 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) 	<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)

Emergency contact name: _____

Plan prepared by Dr or Nurse Practitioner: _____

Work ph: _____

Signed: _____
I hereby authorize medications specified in this plan to be administered according to the plan.

Home ph: _____

Date prepared: _____

Mobile ph: _____

Date of next review: _____

- 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).

- Assemble spacer.
- Remove cap from puffer.
- Shake puffer well.
- Attach puffer to end of spacer.

Appendix B: Asthma Action Plan (Asthma Australia)

ASTHMA ACTION PLAN

Take this ASTHMA ACTION PLAN with you when you visit your doctor

NAME _____	DOCTOR'S CONTACT DETAILS	EMERGENCY CONTACT DETAILS
DATE _____		Name _____
NEXT ASTHMA CHECK-UP DUE _____		Phone _____
		Relationship _____

WHEN WELL *Asthma under control (almost no symptoms)* **ALWAYS CARRY YOUR RELIEVER WITH YOU**

Your preventer is: _____ (NAME & STRENGTH)
 Take _____ puffs/tablets _____ times every day
 Use a spacer with your inhaler

Your reliever is: _____ (NAME)
 Take _____ puffs _____

When: You have symptoms like wheezing, coughing or shortness of breath
 Use a spacer with your inhaler

Peak flow* (if used) above: _____

OTHER INSTRUCTIONS
 (e.g. other medicines, trigger avoidance, what to do before exercise)

WHEN NOT WELL *Asthma getting worse (needing more reliever than usual, having more symptoms than usual, waking up with asthma, asthma is interfering with usual activities)*

Keep taking preventer: _____ (NAME & STRENGTH)
 Take _____ puffs/tablets _____ times every day
 Use a spacer with your inhaler

Your reliever is: _____ (NAME)
 Take _____ puffs _____
 Use a spacer with your inhaler

Peak flow* (if used) between _____ and _____

OTHER INSTRUCTIONS Contact your doctor
 (e.g. other medicines, when to stop taking extra medicines)

IF SYMPTOMS GET WORSE *Severe asthma flare-up/attack (needing reliever again within 3 hours, increasing difficulty breathing, waking often at night with asthma symptoms)*

Keep taking preventer: _____ (NAME & STRENGTH)
 Take _____ puffs/tablets _____ times every day
 Use a spacer with your inhaler

Your reliever is: _____ (NAME)
 Take _____ puffs _____
 Use a spacer with your inhaler

Peak flow* (if used) between _____ and _____

OTHER INSTRUCTIONS Contact your doctor today
 (e.g. other medicines, when to stop taking extra medicines)

Prednisolone/prednisone:
 Take _____ each morning for _____ days

DANGER SIGNS *Asthma emergency (severe breathing problems, symptoms get worse very quickly, reliever has little or no effect)*

DIAL 000 FOR AMBULANCE

Peak flow (if used) below: _____

Call an ambulance immediately
 Say that this is an asthma emergency
 Keep taking reliever as often as needed
 Use your adrenaline autoinjector (EpiPen or Anapen)



* Peak flow not recommended for children under 12 years.

ASTHMA FIRST AID

- **SIT THE PERSON UPRIGHT**
 - Be **calm** and reassuring
 - **Do not leave** them alone
- **GIVE 4 SEPARATE PUFFS OF BLUE/ GREY RELIEVER PUFFER**
 - **Shake** puffer
 - Put **1 puff** into spacer
 - Take **4 breaths** from spacer
 - Repeat until **4 puffs** have been taken

OR give 2 separate Inhalations of Bricanyl (6 years or older)
OR give 1 Inhalation of Symbicort Turbuhaler (12 years or older)
OR give 2 puffs of Symbicort Rapihaler through a spacer (12 years or older)

If no spacer available: Take 1 puff as you take 1 slow, deep breath and hold breath for as long as comfortable. Repeat until all puffs are given
- **WAIT 4 MINUTES**
 - If there is no improvement, **give 4 more separate puffs of blue/grey reliever** as above

OR give 1 more Inhalation of Bricanyl
OR give 1 more Inhalation of Symbicort Turbuhaler
OR give 2 puffs of Symbicort Rapihaler through a spacer

IF THERE IS STILL NO IMPROVEMENT

- **DIAL TRIPLE ZERO (000)**
 - Say **'ambulance'** and that someone is having an asthma attack
 - Keep giving **4 separate puffs every 4 minutes** until emergency assistance arrives

OR give 1 Inhalation of a Bricanyl or Symbicort Turbuhaler every 4 minutes – up to a max of 4 more Inhalations of Symbicort Turbuhaler
OR give 2 puffs of Symbicort Rapihaler through a spacer every 4 minutes – up to a max of 8 more puffs of Symbicort Rapihaler

CALL EMERGENCY ASSISTANCE IMMEDIATELY AND DIAL TRIPLE ZERO (000) IF:

- the person is not breathing
- the person's asthma suddenly becomes worse or is not improving
- the person is having an asthma attack and a reliever is not available
- you are not sure if it is asthma
- the person is known to have anaphylaxis – follow their Anaphylaxis Action Plan, then give Asthma First Aid

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

 Translating and Interpreting Service
131 450



1800 ASTHMA
(1800 278 462)

asthma.org.au

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Appendix D: Asthma Health Support & Risk Minimisation Plan



PARADE COLLEGE

ASTHMA HEALTH SUPPORT AND RISK MINIMISATION PLAN (adopted from The Asthma Foundation Victoria, 479-481 King Street, West Melbourne, VIC, 3003 03 9326 7088)



This Plan is to be completed by the Principal or his nominee on the basis of information provided by the parent/carer/guardian from the student's asthma action plan and signed by a medical practitioner.

Student's name:		Date of birth: / /	Year level:
Asthma Action Plan provided by parent or Guardian (please circle) YES / NO		Review Date:	
Predominant & confirmed by doctor Asthma Triggers:			
Other Asthma Triggers:			
Other health conditions:			
Medication at school:			
Parent or Guardian information (1)	Parent or Guardian Information (2)	Other emergency contact (3)	
Name:	Name:	Name:	
Relationship:	Relationship:	Relationship:	
Mobile phone:	Mobile phone:	Mobile phone:	
Home phone:	Home phone:	Home phone:	
Work phone:	Work phone:	Work phone:	
Address:	Address:	Address:	
This plan should be developed based on health advice received via the Asthma Action Plan.			
Please confirm that the correct form has been completed and attached to this plan. YES / NO Asthma Action Plan			
This Asthma Health Support and Risk Minimisation Plan will be distributed to the following:			
1. Student's family 2. First Aid Manager 3. Teacher access through the schools Learning Management			
Medical Practitioner contact:			
Emergency care to be provided at school: As per current Action Plan			
Medication storage: <input type="checkbox"/> On the student <input type="checkbox"/> Spare in the FAC <input type="checkbox"/> Emergency Asthma Kit			
This plan has been developed with my knowledge and input and will be reviewed every 12 months.			
Signature of Parent/Guardian:		Date:	
Signature of Principal (or nominee):		Date:	



PARADE COLLEGE

ASTHMA HEALTH SUPPORT AND RISK MINIMISATION PLAN (adopted from The Asthma Foundation Victoria, 479-481 King Street, West Melbourne, VIC, 3003 03 9326 7088)



Strategies to Avoid Asthma Triggers

Risk	Strategy	Who is responsible?
Identification of student's living with asthma	<ul style="list-style-type: none">* On enrolment.* Upon notification of asthma history via the PAM portal.* Students' asthma action plans are:<ul style="list-style-type: none">➤ Available on the school's LMS➤ Sent to all camp activities➤ Available in the First Aid office	Principal or Nominee First Aid Officer Teaching staff
Student exclusion	<ul style="list-style-type: none">* Students' privacy is protected by all staff*Where reasonably practicable, staff to modify tasks or allow adjusted behaviours, such as opportunity to prepare for activities and preventative administration of medication as needed. Staff offer support which respect to the student's:* Dignity, comfort and safety: by allowing use of reliever medication readily.* Privacy: by offering support in class activities while maintaining confidentiality within reasonable limits.* Learning: by supporting health needs.	Principal or Nominee First Aid Officer Teaching staff
Student Health	<ul style="list-style-type: none">*Unwell students are escorted to the First Aid Centre by a fellow student.*If particularly unwell, the First Aid Officer is called to assist the student from the area the student is located.<ul style="list-style-type: none">➤ If the student requires urgent assistance with medication in the First aid Centre, then the parent is notified.➤ If the student requires urgent medical care, an ambulance will be called for and parents notified as soon as practicable.	Principal or Nominee First Aid Officer Teaching staff
Responsibilities	<ul style="list-style-type: none">*Management of Asthma Action Plans on ongoing record keeping and notifications through the First Aid office.*Staff to comply with training requirements.	Principal or Nominee First Aid Officer Teaching staff
First Aid Facilities	<ul style="list-style-type: none">*The First Aid room is staffed 8am – 4pm daily and is accessible after hours to staff users.*First Aid supplies are maintained by the First Aid Officer.*If a student has neglected to bring their own reliever medication to school for the day, they are encouraged to approach the First Aid room and use the schools' reliever medication and will be provided with a disposable spacer.	Principal or Nominee First Aid Officer Teaching staff



PARADE COLLEGE

ASTHMA HEALTH SUPPORT AND RISK MINIMISATION PLAN

(adopted from The Asthma Foundation Victoria, 479-481 King Street, West Melbourne, VIC, 3003 03 9326 7088)



Risk	Strategy	Who is responsible?
Communication	<ul style="list-style-type: none"> * Ensure that Information Privacy Principles are applied when collecting, using, retaining or disposing of personal or health information. * Use of Asthma Action Plans approved by parent or guardian and updated and confirmed annually. *Annual staff asthma briefing offered to all staff. *Notification of any changes in asthma status forwarded to relevant staff via email with new action plan and uploaded to the student's medical profile. *Any health concerns are referred to the Tutor teacher or House Leader which are then passed on to the First Aid officer. *For camps and out-of-school activities, parents check and update their child's medical profile to ensure the information is current. *Posters regarding asthma first aid and information are located in high traffic areas. 	Principal or Nominee First Aid Officer Teaching staff

Risk	Strategy	Who is responsible?
Staff Training and First Aid	<ul style="list-style-type: none"> *Training requirements and sessions are scheduled and monitored by: <ul style="list-style-type: none"> ➤ Leadership ➤ First Aid Convenor *Ensure that all relevant school staff are informed about the first aid response for the student via: <ul style="list-style-type: none"> ➤ Alert system on SIMON ➤ Synergetic ➤ Student Asthma Action plans in a folder in the First Aid office ➤ Supply of asthma reliever medication and spacer with first aid emergency care in the excursion grey bags. 	Leadership First Aid Convenor
Access to Asthma Action Plans	<ul style="list-style-type: none"> *Stored in a hard copy folder in the First aid office *Stored in the students medical profile PAM *Stored as pdf on file in the First aid office *Updated plans sent the school via email or student are uploaded to the student medical profile, filed as pdf and printed to the folder in First aid. 	Principal or Nominee First Aid Officer Teaching staff
Pre-exercise	<ul style="list-style-type: none"> *Support for use of reliever medication in a preventative capacity prior to exercise Staff are required to be familiar with the students in their classes who have asthma support needs 	Teaching staff



PARADE COLLEGE

ASTHMA HEALTH SUPPORT AND RISK MINIMISATION PLAN

(adopted from The Asthma Foundation Victoria, 479-481 King Street, West Melbourne, VIC, 3003 03 9326 7088)



Risk	Strategy	Who is responsible?
Reliever medications and storage	<p>*It is recommended that students living with asthma carry their own reliever medication and to use as needed pre-exercise or when needed</p> <p>*Spare generic reliever medication with disposable spacers are stored in the First Aid room</p> <p>*Excursion First aid kits and camp first aid kits are inclusive of reliever medication and spacers</p> <p>*Stocks and expiry dates are monitored by the First aid Officer</p> <p>*Ensure the the use of reliever medication is recorded by the person supervising the administration of the medication</p> <ul style="list-style-type: none"> ➤ In SIMON ➤ In Synergetic ➤ First aid register form ➤ <p>A student self-administering reliever administration does not need to record same unless reliever medication is used to relieve an urgent episode of asthma</p> <p>*Student Asthma Action Plans are stored in the First Aid office, the student medical profile and as a pdf file</p>	<p>Principal or Nominee</p> <p>First Aid Officer</p> <p>Teaching staff</p>

Risk	Strategy	Who is responsible?
Environmental Triggers	<p>*If environmental triggers are present on any day, then staff are to modify tasks or allow adjusted behaviours, such as opportunity to prepare for activities with preventative administration of medication needed. In this instance, make use of asthma risk minimisation strategies to ascertain triggers and responses</p> <p>*Occasionally (but very rarely) this would be a review of activity viability for the student if triggers too prevalent on a given day and no other risk management strategy could be put in place</p> <p>*Epidemic thunderstorm asthma conditions monitored via news media and alerts via email to all staff re same. Staff required to adjust class activities accordingly</p> <p>*Pollens: seasonal airborne pollens to be a factor in determining class activities where students are at risk</p> <p>*Smoking: the College is a no smoking environment</p> <p>*Colds/flu: Parents are asked to comply with keeping unwell students at home to prevent spread of infection. When contacted by the First aid Officer, parents are required to take unwell students home</p> <p>*Renovations and maintenance activities are planned for school holiday periods where possible</p> <p>*Gardens are maintained by full time maintenance staff mindful of avoiding plants that attract bees, wasps and ants</p>	<p>Principal or Nominee</p> <p>First Aid Officer</p> <p>Teaching staff</p>

Appendix E: Risk Management Checklist

Asthma Annual risk management checklist 2020

School name:	Parade College	
Date of review:		
Who completed this checklist?	Cathie Ireland	
Review given to:	Michael Callanan – Assistant Principal Organisation	
Comments:		
General information		
1. How many current students have been diagnosed with asthma, and have been prescribed a reliever medication?		
2. How many of these students carry their reliever medication on their person?		
3. Have any students ever had a mild asthma flare-up requiring first aid intervention at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
a. If Yes, how many times?		
4. Have any students ever had a severe asthma attack requiring medical intervention at school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
a. If Yes, how many students?		
b. If Yes, how many times		
5. Has a staff member been required to administer reliever medication to a student?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
a. If Yes, how many times?		
6. If your school is a government school, was every incident in which a student suffered a severe asthma attack reported via the Incident Reporting and Information System (IRIS)?	N/A	

SECTION 1: Training	
7. Have all staff with a duty of care for students undertaken an asthma education session, either: <ul style="list-style-type: none"> ▫ Asthma first aid management for education staff (face to face) within the last 3 years, or ▫ Asthma first aid management for education staff (online) within the last 3 years? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Staff with a direct student wellbeing responsibility such as nurses, first aid and camp organisers, or staff working with high risk children with a history of severe asthma at school and high risk teaching areas, such as PE/Sports teachers, Home Economics/cooking teachers completed asthma management training; either: <ul style="list-style-type: none"> ▫ <i>22282VIC Course in Management of Asthma Risks and Emergencies in the Workplace (in the last 3 years), or</i> ▫ <i>10392NAT Course in Emergency Asthma Management (in the last 3 years)</i> 	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Does your school conduct in house asthma briefings annually? If no, why not?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Do all school staff participate in the annual briefing? If no, why not?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 2: Individual Asthma Risk Minimisation Plan	
11. Does every student who has been diagnosed with asthma and prescribed reliever medication have an Individual Asthma Risk Minimisation Plan and Asthma Plan completed and signed by a prescribed medical practitioner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Are all individual Asthma Risk Minimisation Plan reviewed regularly (at least annually)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Do the Individual Asthma Risk Minimisation Plans set out strategies to minimise the risk of exposure to triggers for the following in-school and out of class settings?	
a. During classroom activities, including elective classes	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In canteens or during lunch or snack times	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Before and after school, in the school yard and during breaks	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. For special events, such as sports days, class parties and extra-curricular activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. For excursions and camps	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Other	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Do all students who carry an reliever medication on their person have a copy of their Asthma Action Plan kept at the school (provided by the parent)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p>a. Where are the Asthma Action Plans kept?</p> <ul style="list-style-type: none"> • First aid office folder • SIMON Alerts tile • Sent to all excursions/camps • As pdfs stored in first aid file 	
<p>15. Does the Asthma Action Plan include a recent photo of the student?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>16. Have the Individual Asthma Risk Minimisation Plan been reviewed prior to any off site activities (such as sport, camps or special events), and where appropriate reviewed in consultation with the student's parent/s?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 3: Storage and accessibility of reliever medication	
<p>17. Where are the student(s) reliever medication stored?</p> <ul style="list-style-type: none"> • Each student's spare reliever medication is stored in the first aid room and clearly labelled. 	
<p>18. Do all school staff know where the school's Asthma Emergency Kits for general use are stored?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>19. Is the storage safe?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>20. Is the storage unlocked and accessible to school staff at all times?</p> <p>Comments:</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>21. Are the Asthma Emergency Kits easy to find?</p> <p>Comments: All excursion and camp first aid kits are Asthma Kits at this College</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>22. Is a copy of student's individual Asthma Action Plan kept together with the student's reliever medication?(of those who supply spares)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>23. Is the student's reliever medication and the Asthma Action Plans clearly labelled with the student's names?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>24. Has someone been designated to check the reliever medication expiry dates on a regular basis?</p> <p>Who? Health Centre Coordinator</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>25. Is there reliever medication which is currently in the possession of the school and which has expired?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>26. Is the school registered as an Asthma Friendly school?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>27. Do all school staff know where the reliever medication, the Asthma Action Plans and the School Asthma Management Plans are stored?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

28. Has the school purchased Asthma Emergency Kits for general use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
29. Where are these kits located? All excursion and camp kits are Asthma Emergency kits and are located in First aid room & office and at various locations around the school: Gym Reception	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do staff know where they are located?	
30. Is the Asthma Emergency Kit clearly labelled as such? • As all kits are Asthma emergency kits this task is superfluous	<input type="checkbox"/> Yes <input type="checkbox"/> No
31. Is there a register for signing reliever medication in and out when taken for excursions, camps etc? • First Aid Kit Register	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 4: Prevention strategies	
32. Have you done a risk assessment to identify potential accidental exposure to triggers for all students who have been diagnosed with asthma?	<input type="checkbox"/> Yes <input type="checkbox"/> No
33. Have you implemented any of the prevention strategies in the Asthma Guidelines? If not record why not?	<input type="checkbox"/> Yes <input type="checkbox"/> No
34. Are there always sufficient school staff members on yard duty who have current Asthma Training? Training to follow and planned by Michael Hanrahan, date TBA	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 5: School management and emergency response	
35. Does the school have procedures for emergency responses to asthma attacks? Are they clearly documented and communicated to all staff? Emergency Response Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No
36. Do school staff know when their training needs to be renewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
37. Have you developed Emergency Response Procedures for when a severe asthma attack occurs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. In the class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. In the school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. In all school buildings and sites, including gymnasiums and halls?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. At school camps and excursions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. On special event days (such as sports days) conducted, organised or attended by the school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
38. Does your plan include who will call the ambulance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
39. Is there a designated person who will be sent to collect the student's reliever Medication and Individual Asthma Action Plan? • It depends on the scenario, follow the School's Emergency Response procedure	<input type="checkbox"/> Yes <input type="checkbox"/> No
40. Have you checked how long it will take to get to the reliever medication and the individual Asthma Action Plan to a student from various areas of the school including:	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. The class room?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The school yard?	<input type="checkbox"/> Yes <input type="checkbox"/> No

c. The sports field?	<input type="checkbox"/> Yes <input type="checkbox"/> No
41. On excursions or other out of school events is there a plan for who is responsible for ensuring the reliever medication(s) and Individual Asthma Action Plans and the Asthma Emergency Kits use are correctly stored and available for use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
42. Who will make these arrangements during excursions? Arranged by Health Centre Coordinator as directed by the teacher	
43. Who will make these arrangements during camps? . Arranged by Health Centre Coordinator as directed by the teacher / coordinator	
44. Who will make these arrangements during sporting activities? Arranged by Health Centre Coordinator as directed by the teacher	
45. Is there a process for post incident support in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
46. Have all school staff who conduct classes that students with asthma attend, and any other staff identified by the principal, been briefed on:	
a. The school's Asthma Management Policy? At Briefing on 11 October 2017	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. The causes, symptoms and treatment of asthma?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. The identities of students diagnosed with asthma, and who are prescribed reliever medication, including where their medication is located?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. How to use a puffer and spacer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. The school's general first aid and emergency response procedures for all in-school and out-of-school environments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Where the Asthma Emergency Kits for general use are kept?	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Where the reliever medication for individual students are located including if they carry it on their person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 6: Communication Plan	
47. Is there a Communication Plan in place to provide information about asthma and the school's policies?	
a. To school staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. To students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. To parents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. To volunteers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. To casual relief staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
48. Is there a process for distributing this information to the relevant school staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No

a. What is it?

VIA LMS - SIMON

49. How is this information kept up to date?

Updated by The First Aid Officer

50. Are there strategies in place to increase awareness about asthma among students
for all in-school and out-of-school environments?

Yes No

50a. What are they?

Usually via email (in the event of a Thunderstorm Asthma warning) or School Newsletter or Bulletin

Appendix F: Asthma Emergency Management Procedure

	PARADE COLLEGE
PROCEDURE	ASTHMA EMERGENCY MANAGEMENT

Staff Responsibility

All staff are expected to:

- Be familiar with the College's asthma management policy;
- Know the students with asthma in their care;
- Know where the Asthma Emergency Kits are located in the College;
- Know how to implement First Aid treatment in the event of an asthma attack;
- Know how to **access** students' written **Asthma Action Plans** as required – **SIMON & First Aid Office**;
- Know asthma triggers and how to recognise asthma symptoms;
- Know that use of a spacer with a puffer is more effective than puffer alone;

Asthma Emergency kits are found at the following locations:

- First Aid E47 Bundoora
- First Aid Office E49 Bundoora
- Reception Bundoora and Preston Campuses
- College Hall Emergency Bag with First Aid Convener
- All main staffrooms

The Asthma emergency kits contain:

- Blue/grey reliever medication such as Ventolin/Asmol
- At least two spacer devices to assist with effective inhalation of the blue/grey reliever medication.
- Clear instructions on
 - How to use the medication and spacer
 - Steps to be taken in treating a severe asthma attack
 - Alert the school if a student suffers a severe or life threatening asthma attack.

The Signs and Symptoms of asthma attacks can be classed as follows:

Mild/ Moderate	Severe	Life- threatening
Minor difficulty breathing Able to talk in full sentences Able to walk/move around May have cough or wheeze	Obvious difficulty breathing Cannot speak a full sentence in one breath Tugging in of the skin between ribs or at base of neck May have cough or wheeze Reliever medication not lasting as long as usual	Gasping for breath Unable to speak or 1-2 words per breath Confused or exhausted Turning blue Collapsing May no longer have wheeze or cough Not responding to reliever medication
↓	↓	↓
Ask the person if they have asthma and if they need help. If so, assist the person with Asthma First Aid.	Call Ambulance on 000 Commence Asthma First Aid	Call Ambulance on 000 Commence Asthma First Aid

Emergency Treatment: Life Threatening - SEVERE

Where asthma is suspected the following procedure should be followed:

Asthma First Aid

- Sit the patient upright reassure and stay with them.
- Send another student or call to the First Aid Officer (E47) that assistance is required for an asthma attack and the medication & a spacer will be brought to you.
- If the student has their own medication- start administering as per below:

Administer reliever medication steps;

1. Place the puffer in a spacer device if possible
2. Shake the puffer – check expiration date
3. Give one puff through the spacer device instructing the patient to breathe in and out through the spacer device four (4) times.
4. Repeat from step 2 four (4) to six (6) times depending on severity.
5. Wait four (4) minutes
6. Assess the Casualty
 - If asthma persists repeat the treatment from step 3
 - If after second provision of medication & there is still no relief call 000 and say Asthma Emergency
 - If asthma becomes worse call 000 and say Asthma Emergency
7. Continue treatment until signs or symptoms are no longer evident or care is handed over to Ambulance.
8. The parents/guardians will be contacted as soon as practically safe to do so after calling the ambulance.

Life Threatening - Asthma
CALL 000 IMMEDIATELY

After calling **000**

CALL FIRST AID OFFICER or
send someone to First Aid &
advise it's an asthma attack

(Ph) 9468 3332/3319 **or**
(M) 0427 335 540

***Send someone to Main**
Reception to collect an ASTHMA
EMERGENCY KIT plus a College
EPIPEN
in an emergency.

DEFIB locations:
Main Reception
College Hall (Sports Office)
Trade Centre

Emergency Treatment: Life Threatening – MODERATE AND MILD

- Unwell students are escorted to the First Aid Centre by a fellow student.
- If particularly unwell, the First Aid Officer is called to assist the student from the area the student is located.
- If the student requires pre exercise Ventolin or identifies the beginning of asthma – allow the student to come to First Aid.

NON–Life Threatening

**Contact/send student to
FIRST AID OFFICER
(Ph) 9468 3332 or
(M) 0427 335 540**

***ALL EPIPENS &
ASTHMA EMERGENCY KITS**

**ARE
LOCATED AT**

RECEPTION if needed

ASTHMA FIRST AID

1



SIT THE PERSON UPRIGHT

- Be **calm** and reassuring
- **Do not leave** them alone

2



GIVE 4 SEPARATE PUFFS OF BLUE/ GREY RELIEVER PUFFER

- **Shake** puffer
- Put **1 puff** into spacer
- Take **4 breaths** from spacer

– Repeat until **4 puffs** have been taken

OR give 2 separate Inhalations of Bricanyl (6 years or older)

OR give 1 Inhalation of Symbicort Turbuhaler (12 years or older)

OR give 2 puffs of Symbicort Rapihaler through a spacer (12 years or older)

If no spacer available: Take 1 puff as you take 1 slow, deep breath and hold breath for as long as comfortable. Repeat until all puffs are given

3



WAIT 4 MINUTES

- If there is no improvement, **give 4 more separate puffs of blue/grey reliever** as above

OR give 1 more Inhalation of Bricanyl

OR give 1 more Inhalation of Symbicort Turbuhaler

OR give 2 puffs of Symbicort Rapihaler through a spacer

IF THERE IS STILL NO IMPROVEMENT

4



DIAL TRIPLE ZERO (000)

- Say **'ambulance'** and that someone is having an asthma attack
- Keep giving **4 separate puffs every 4 minutes** until emergency assistance arrives

OR give 1 Inhalation of a Bricanyl or Symbicort Turbuhaler every 4 minutes – up to a max of 4 more Inhalations of Symbicort Turbuhaler

OR give 2 puffs of Symbicort Rapihaler through a spacer every 4 minutes – up to a max of 8 more puffs of Symbicort Rapihaler

CALL EMERGENCY ASSISTANCE IMMEDIATELY AND DIAL TRIPLE ZERO (000) IF:

- the person is not breathing
- the person's asthma suddenly becomes worse or is not improving
- the person is having an asthma attack and a reliever is not available
- you are not sure if it is asthma
- **the person is known to have anaphylaxis – follow their Anaphylaxis Action Plan, then give Asthma First Aid**

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



Translating and Interpreting Service
131 450



ASTHMA AUSTRALIA

1800 ASTHMA
(1800 278 462)

asthma.org.au

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