



## **ROTHERGLEN SCHOOL ASTHMA POLICY**

### **PURPOSE**

Rotherglen School (the “School”) has established this Asthma Policy in support of its commitment to students with asthma.

### **DEFINITION**

According to the Ontario Lung Association, asthma is a very common chronic (long-term) lung disease that can make it hard to breathe.

People with asthma have sensitive airways that react to triggers. There are many different types of triggers. For example, poor air quality, mold, dust, pollen, viral infections, animals, smoke and cold air. Symptoms of asthma are variable and can include coughing, wheezing, difficulty breathing, shortness of breath and chest tightness. The symptoms can range from mild to severe and sometimes could be life threatening.

### **ASTHMA MEDICATION**

Any student of the School with asthma is permitted to carry his or her asthma medication if s/he has permission from a parent or guardian.

Parents and guardians are required to ensure that the School has up-to-date information about the medication the student is taking, along with any notes and instructions from the student’s health care provider and a current emergency contact list.

### **INDIVIDUAL PLANS**

The School will prepare an individual plan for each student who has asthma and take into consideration any recommendations made the student’s health care provider. The individual plan will include:

- I. Details informing employees of the School, and others who are in direct contact with the student at the School on a regular basis, of the monitoring and avoidance strategies and appropriate treatment with respect to the student’s asthma.
- II. A readily accessible emergency procedure for the student, including emergency contact information.
- III. Permission from the student’s parent or guardian to carry asthma medication (if given).
- IV. Whether any spare medication is kept at the School, and, if so, where it is stored.

### **ADMINISTERING ASTHMA MEDICATION**

The School’s employees may be preauthorized to administer asthma medication, or supervise a student who self-administers asthma medication, if the parent or guardian gives consent.

The School’s employees may administer asthma medication if there is reason to believe a student is experiencing an asthma exacerbation, even if there is no preauthorization.

## **RESPONSIBILITIES**

Ensuring the safety of students with asthma at the School depends on the co-operation of the School community. To reduce the risk of exposure to asthma triggers, and to ensure rapid response to an emergency, parents, students and school personnel should all understand and fulfill their responsibilities.

### **Administration**

- Works closely with the parents of a student who has asthma.
- Ensures that, upon registration, parents, guardians, and students will be asked to supply information on asthma symptoms and medication.
- Maintains a file for each student who has asthma of current treatment and other information, including a copy of any notes and instructions from the student's physician or nurse and current emergency contact information.
- Develops an individual plan for each student who has asthma, including a readily accessible emergency procedure for the student, including emergency contact information.
- Inform school personnel who are in direct contact on a regular basis with a student who has asthma about the contents of his/her individual plan.
- Ensures regular training on recognizing asthma symptoms and managing asthma exacerbations for all employees and others who are in direct contact with students who have asthma on a regular basis.
- Develops a communication plan for the dissemination of information on asthma to parents, students, and employees.

### **Faculty**

- Recognizes the symptoms of asthma and the methods for managing asthma exacerbations.
- Reviews individual plans for students with asthma.
- Aware of proper procedure for administering medication to students with asthma.
- Leaves information in an organized, prominent, and accessible format for substitute teachers.

### **Parents or Guardians of Students with Asthma**

- Informs the school of their child's asthma condition by completing an asthma information sheet that includes a photograph of the child, a description of the asthma symptoms, avoidance strategies, and possible symptoms if a reaction were to take place, and an emergency procedure. This information sheet is posted in the teacher's cupboard and is available as a reference to both regular and substitute teachers. A second copy will be kept in the School office.
- Ensures that the information in the student's file is kept up to date with the medication that the student is taking.
- Provides a MedicAlert bracelet for their child, where appropriate.

- Provides the school with at least two up-to-date medications. It is the parent's responsibility to be aware of the medication's expiry date and to supply new medication before that date.
- Reviews the student's individual plan with school personnel and provides information as requested.
- Teaches their child:
  - i. about their asthma and the risk of exposure to asthma triggers;
  - ii. to recognize the first symptoms of an asthma exacerbation;
  - iii. to know where medication is kept, and how to use it;
  - iv. to communicate clearly when he or she feels that an asthma exacerbation is starting;
  - v. to carry his/her own medication in a body pouch or fanny pack;
  - vi. to take as much responsibility as possible for his/her own safety.

#### **Student who has Asthma**

- Has an age appropriate understanding of his/her asthma and its triggers.
- Complies with taking medication as arranged and approved by school administration.
- Takes as much responsibility as possible for avoiding triggers.
- Learns to recognize symptoms of an asthma exacerbation.
- Promptly informs an adult as soon as symptoms appear.
- Keeps medication on his/her person at all times.

#### **All Parents or Guardians**

- Will respond co-operatively to requests from the School to eliminate certain triggers.
- Participate in parent information sessions.
- Encourage students to respect students with asthma and follow school prevention plans.

#### **All Students**

- Learn to recognize symptoms of asthma.
- Follow school rules about keeping triggers out of a classroom.
- Refrain from bullying or teasing a student who has asthma.

#### **STRATEGIES THAT REDUCE RISK OF EXPOSURE**

In order to provide a safe learning environment, all members of the School community will make best efforts to reduce the risk of exposure to asthma triggers in classrooms and common school areas. Asthma triggers can vary, but common triggers include pet allergens, dust mites, pollen and mold.

Strategies to reduce the risk of exposure include:

- Keep classrooms and common areas free from clutter where dust can collect.
- Vacuum and dust classrooms and common areas on a regular basis.
- Keep windows closed during times of the year when pollen levels are high – check pollen reports.
- Avoid exposure to pollen and mould during activities outdoors.
- Reduce irritants such as tobacco smoke, perfumes (including detergents, cleaning fluids, paints etc.), air pollution and strong odours. Where a reduction in such irritants is not possible, avoid exposure to the irritant (e.g. stay inside during periods of high air pollution).
- Avoid eating certain foods which may trigger asthma in particular individuals, such as nuts, milk, shellfish and fish, eggs, soy, wheat, and additives such as sulphites. The School's Anaphylaxis Policy should be consulted where a student's asthma triggers are food-based.
- Other strategies to reduce the risk of exposure to a student's particular asthma triggers will be part of the monitoring and avoidance strategies in the student's individual plan.

## **TRAINING**

The School will provide regular training on recognizing asthma symptoms and managing asthma exacerbations for all employees and others who are in direct contact with students on a regular basis.

### **Recognizing the Symptoms**

Any combination of the following symptoms may signal the onset of an asthma exacerbation:

- Feeling short of breath (at rest or when exercising)
- Chest tightness
- Coughing
- Wheezing

Symptoms do not always occur in the same order, even in the same individuals.

Children with asthma usually know when an asthma exacerbation is taking place. School personnel should be encouraged to listen to the child. If he or she complains of any symptoms that could signal the onset of an asthma exacerbation, staff should not hesitate to administer medication.

### **Managing Asthma Exacerbations**

1. Administer asthma medication immediately if the child displays any of the symptoms.
2. Keep the child calm.
3. Call 9-1-1.
4. Advise dispatcher that the child is having an asthma exacerbation.

5. Transport child to hospital immediately even if symptoms subside.
6. Remain with the child in hospital as directed by health care professionals.

### **COMMUNICATION PLAN**

The School will provide information on asthma to parents, students and employees at the beginning of every school year. In particular, parents will receive a letter and a copy of the policy. Parents of students who have asthma are required to complete and return the Information and Consent Form attached to the annual letter.

Other communication about asthma will be circulated to parents, students and employees from time to time on an as-needed basis.