

Great Hearts Policy for Management of Asthma

An Asthma Action Plan is a self management tool that is used to help the school health personnel assist children diagnosed with asthma to better control his or her condition. The plan is completed by a physician or healthcare provider and includes information on a student's medications and dosing requirements, asthma triggers, how to handle worsening symptoms and what to do during a breathing emergency. It is a critical element in our school's overall wellness plan and will support school health personnel identify in tracking those students who are most at risk for having an asthma emergency.

Asthma Action Plan Protocol:

In order to protect all students with asthma, each student at our Great Hearts Academies who have been identified as having asthma must have an Asthma Action Plan on file that is signed by a physician or healthcare provider. The following will be incorporated into the asthma action plan protocols:

- Procedures to obtain, maintain, and utilize written asthma action plans, signed by the child's physician.
- Action Plans can be written based on symptoms, peak flow meter readings or both.
- Asthma action plans are updated on an annual basis, or when there is a change in the severity classification of the child's asthma.
- Students are able to self-carry their inhalers with a physician's approval only.
- A copy of the students who have been identified with self-management will be given to teaching staff, PE teachers, and designated staff as needed.
- Educate and provide information to faculty/staff recognizing the early signs of an asthma episode.

Effective School Asthma Management Plan:

- A healthier and supportive learning environment for students who have asthma.
- Reduced absences—students have fewer asthma attacks, and symptoms are treated earlier.
- Reduced disruption in the classroom—students have fewer symptoms and are more alert when their asthma is under control.
- Appropriate emergency care—school staff members know how to recognize and respond immediately to asthma emergencies.
- Improved access and adherence to appropriate asthma medications—students and parents feel comfortable asking the school for help if needed in obtaining or using prescribed medications.
- Full student participation in physical activities—physical education teachers, instructors, and coaches know how to prevent exercise-induced asthma or how to respond if symptoms appear. They also know how to help children who are having asthma symptoms and keep them involved in school activities

Asthma Treatment Plan:

Act fast! Warning signs and symptoms—such as coughing, wheezing, difficulty breathing, chest tightness or pressure, and low or falling peak flow readings—can worsen quickly and even become life-threatening. They require quick action.

1. Quickly assess the situation.
 - Call 9–1–1 or your local emergency service right away if the student is struggling to breathe, talk, or stay awake; has blue lips or fingernails; or asks for an ambulance.
 - If accessible, use a peak flow meter to measure the student's lung function.
2. Get help, but never leave the student alone. Have an adult accompany the student to the health room or send for help from the school nurse or designee. Do not wait.
3. Stop activity. Help the student stay calm and comfortable.
 - If the asthma attack began after exposure to an allergen or irritant (such as furry animals, fresh cut grass, strong odors, or pollen) remove the student from the allergen or irritant, if possible.
4. Treat symptoms. Help the student locate and use his or her quick-relief medication (inhaler) with a spacer or holding chamber (if available).
 - Many students carry their medicine and can self-manage asthma attacks. They should follow the school protocol. Provide support as needed.
5. Call the parent or guardian.
6. Repeat use of quick-relief inhaler in 20 minutes if—
 - Symptoms continue or return;
 - Student still has trouble breathing; or
 - Peak flow reading is below 80% of student's personal best peak flow number on asthma action plan.

Call 9-1-1 or your local emergency service if any of the following occur:

- The student is struggling to breathe, talk, or stay awake; has blue lips or fingernails; or asks for an ambulance.
- The student doesn't improve or the student has a peak flow reading below 50% of the student's personal best peak flow number after two doses of quick-relief medication, and the nurse (or designee) or parent or guardian is not available.
- No quick-relief medicine is available, the student's symptoms have not improved spontaneously, and the nurse (or designee) or parent or guardian is not available.
- You are unsure what to do.