

APPLEBY COLLEGE ASTHMA POLICY

Asthma is a chronic, inflammatory disease of the airways in the lung, that can make it difficult for an individual to breathe.

People with asthma have sensitive airways that react to triggers. There are several types of triggers, such as 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.

In accordance with *Ryan's Law – Ensuring Asthma Friendly Schools – 2015*, it is the policy of Appleby College to establish and maintain a policy for students diagnosed with asthma. It is also part of the policy to create individual plans for students with asthma.

Asthma Medication

In general, asthma medications work in one of two ways to relieve symptoms. They either work by (1) controlling or preventing the inflammation and mucous production or (2) relieving the muscle tightness around the airways.

Controller medication (Flovent, Advair, Qvar, Pulmicort, etc.): is used daily, before and after school at home to prevent asthma attacks. Can take days to week of regular use to work effectively. Comes in various colours

Reliever medication (Ventolin/salbutamol, bricanyl, etc.): Used to relieve symptoms of asthma. Known as the “rescue inhaler” and is usually blue in colour. It must be readily accessible at all times as it provides relief quickly by relaxing the muscles of the airways.

POLICY STATEMENT

Appleby College is committed to protecting its students and ensuring they have access to a safe, accepting and healthy learning environment to support their well-being.

This policy is to ensure that students with asthma can and do participate fully in all aspects of school life, as well as out-of-hours school activities. Appleby College's goal is to ensure that school staff and others in contact with students with asthma are prepared to handle an emergency situation.

ROLES AND RESPONSIBILITIES

Parents/Guardians

- Should teach their children about their asthma and seek assistance from a medical healthcare professional to provide additional information and resources as needed.
- Responsible for informing Appleby College and its Health Center about the child's asthma at the beginning of each school year or when first diagnosed.
- Must complete an Asthma Plan of Care which has the child's photograph, instructions on using their reliever and emergency inhalers, emergency contact numbers, emergency protocol, and signature of the parent/guardian and physician for the initial care plan and then only required when there are changes to the plan of care.
- Provide their child with the necessary medication(s) needed to help regulate their asthma as prescribed by their family health care provider.
- Provide a doctor's note if a student is no longer asthmatic and does not require to carry an inhaler.

Students with Asthma

- Must carry their own reliever and emergency inhaler on them at all times and use as directed by their health care provider and Plan of Care.
- Must notify their parents/Health Center staff if they misplace or lose their inhaler(s).
- Take responsibility for advocating for personal safety and well-being, and immediately notify a staff member if they begin to feel unwell and feel they may be having symptoms of an asthma attack.
- Encourage to wear medical identification, such as a Medic Alert bracelet (or necklace for older children).

School Staff

- Participate in annual asthma education, training and resource review to learn or to be reminded of how to respond during an emergency
- Awareness of common asthmas symptoms, student(s) asthma triggers and where possible minimize or eliminate causative factors
- All teachers must have access to a student's Asthma Plan of Care, which will be provided and updated through the Health Center; this is also where valuable information is organized for substitute teachers.
- All staff involved with students with asthma must review the child's Plan of Care and know how to access it at all times, both inside and outside the classroom
- Will identify students with asthma to all school personnel, including volunteers, substitute teachers, student teachers that do not typically interact with the student.
- The entire school population should be educated regarding the seriousness of Asthma and be taught how to respond during an emergency. This can be achieved through general awareness sessions in an assembly or a health lesson.
- Peers should be taught that bullying and teasing students with asthma is unacceptable. Bullying and teasing incidents should be dealt with immediately

Health Centre / Principal

- Review all student's registration forms to identify students with asthma and gather necessary asthma related information from parents/guardian and student to develop an individual plan for each student with asthma.
- The Health Centre will review the contents of the student's Plan of Care and make an electronic file for each student diagnosed with asthma. This information will be made available for the rest of the school staff, ensuring they have quick and easy access at all times.
- Arrange for information and training session for all staff who deal with the student (teachers, coaches, bus driver, etc.).
- The Health Centre will provide a reliever (Ventolin/salbutamol) inhaler during field trips, sporting events, and special outings in First Aid Kits that are to be requested by the teacher organizing the trip/team outing.
- Will notify parents/guardians if student with asthma experience severe asthma related symptoms while at school, or if signs of asthma worsening at school.

Responsibility of the Board of Directors

- The Board of Directors are expected to communicate, on an annual basis, their policies on supporting students with a prevalent medical condition to parents, school board staff, and others in the school community who are in direct contact with students (e.g., food service providers, transportation providers, volunteers). At a minimum, the board is expected to make their policies and their Plan of Care templates available on their public website in the language of instruction.
- Provide training and resources on prevalent medical conditions on an annual basis.
- Develop strategies that reduce the risk of student exposure to triggers or causative agents in classrooms and common school areas.
- Develop expectations for schools to support the safe storage and disposal of medication and medical supplies and communicate these expectations to schools and support schools in the implementation of the expectations.
- Preventative strategies to be undertaken by the school to reduce the risk of medical incidents and exposure to triggers or causative agents in classrooms and common school areas.
- Communicate expectations that consider this policy and related board policies when entering into contracts with transportation, food service, and other providers.

PLAN OF CARE

Parents of students with asthma must advise the Health Center at the beginning of each school year or when first diagnosed.

Each student with asthma must have a completed Asthma Plan of Care, which should be signed by their family physician and include a photo of the student.

The Asthma Plan of Care should be provided at the beginning of the school year, or once the student is first diagnosed. A new Plan of Care should be provided whenever any changes to the plan occur.

Should a student no longer be asthmatic, a doctor's note must be provided to the Health Center confirming this information and outlining that they no longer require carrying any inhalers.

The Asthma Plan of Care is included at the end of this document.

FACILITATING & SUPPORTING DAILY OR ROUTINE MANAGEMENT

Appleby College will ensure that students have a safe and supportive learning environment by providing the necessary support required to manage their asthma. Appleby College will achieve this through the following:

- Ensure all students have easy access to their prescribed inhaler medication(s)
- Complete routine checks to ensure that students with asthma are carrying their inhalers at all times (during classrooms, breaks, lunch, field trips, during evacuation procedures, lockdown, etc.).
- Ensure that students do not participate in physical activities if they are already experiencing asthma symptoms (allowing participation could lead to a severe asthma attack). A reliever inhaler should be used if this occurs.
- Ensure that any student exhibiting signs of asthma symptoms are removed from the triggers (see various triggers below).
- Choosing well ventilated indoor areas on days with extreme temperatures, poor air quality and/or high pollen counts.
- Where possible, facilitate the use of asthma-friendly school supplies and products:
 - Scent free markers, cleaning products, dust free chalk
 - Building inspections and maintenance on a regular basis
 - Cleaning at times which reduce the possibility of exposing students/staff to fumes, dust, mold, and other irritants

Asthma triggers

Cold air – Some students may need to cover their necks, this can add warmth and moisture to cold dry air and reduce chance of asthma symptoms from occurring. Choose well ventilated indoor areas during days with extreme conditions

Air quality, smog – Stay alert of air quality and smog alerts in the area, by following local forecasts on www.airqualityontario.ca. Choose well-ventilated indoor sites on days when the air quality is poor.

Pollen, trees, leaves – Be aware of pollen count, by reviewing reports at www.weather.ca. Try to avoid playing on freshly cut grass, and areas with lots of trees.

Indoor triggers (classrooms, gymnasium, and multipurpose rooms) – try to minimize/avoid presence of strong smells from markers, paints, cleaning products and perfumes; chalk, dust and furry or feathered animals. Keep windows closed during high pollen count days.

EMERGENCY RESPONSE

In the event of a student displaying symptoms of asthma or an asthma attack, school staff should refer to the student's individualized Plan of Care on how to respond.

Common 'day to day' symptoms of asthma are:

- Cough and wheeze (a 'whistle' heard on breathing out) when exercising
- Shortness of breath when exercising
- Intermittent cough

These symptoms are usually responsive to use of their own inhaler and rest (e.g. stopping exercise). They would not usually require the child to be sent home from school or to need urgent medical attention.

When asthma symptoms (coughing, wheezing, chest tightness, shortness of breath) are present:

1. Remove student from the trigger
2. Have student use controller/reliever inhaler as directed by Plan of Care
3. Have student remain in an upright position, while breathing slowly and deeply
4. Do NOT have student breathe into a bag or lie down
5. If student totally recovers, participation in activities may resume. Please be sure to notify school Health Center of incident.

It is an EMERGENCY SITUATION if the student has used the reliever medication and it has not helped within 5-10 minutes. Please see below for additional signs of an asthma attack/ asthma related emergencies.

Signs of an asthma attack include:

- Persistent cough or a wheezing sound coming from the chest (when at rest)
- Complaints of shortness of breath at rest, feeling tight in the chest
- Difficulty in breathing (fast and deep respiration)
- Nasal flaring
- Unable to complete sentences
- Appearing exhausted or has collapsed
- A blue / white tinge around the lips or is going blue

In all asthma related emergencies, the following steps should be taken:

1. Stay calm and remain with the student
2. Immediately use reliever inhaler (i.e. Ventolin). Student to take two puffs, shake before use
3. Dial 9-1-1, and the Appleby College Nurse
4. Reassure the student and remain by their side
5. If there is no immediate improvement, continue to give two puffs every two minutes up to a maximum of 10 puffs, or until their symptoms improve. The inhaler should be shaken between puffs.
6. Inform the emergency contact, as identified in the student's Plan of Care.

If a child has asthma and is also at risk for anaphylaxis and it is unclear which emergency the child is experiencing:

1. First give epinephrine and dial 9-1-1 for an ambulance
2. Then give the reliever inhaler (Ventolin – usually a blue inhaler) as indicated above

Use of an emergency inhaler should be recorded and notified to the Appleby Colleges Health Centre. Student's that are fully recovered, can resume normal school activities.

A fully recovered student:

- will breathe at a normal rate
- will not be wheezing or coughing
- will be able to carry a full conversation without any breaks

RAISING AWARENESS OF POLICY & RESOURCES

All teaching staff, school-based non-teaching staff will receive training annually or more frequently if required, in the recognition of an asthma reaction and the use of reliever inhalers and the emergency response protocol.

All members of the school community including substitute teachers, student teachers and volunteers have appropriate information about students with asthma, their daily asthma action plans, emergency contact details, and how to respond during an emergency.

All off-site activity service providers are notified of the student's asthma.

The classroom teacher must ensure that the student's classmates are provided with information on asthma in a manner that is appropriate for the age and maturity level of the students.

The school will place information regarding asthma on the Health Center's info sites on e-school and in school newsletters as needed.

Additional information on asthma can be found at <https://www.asthma.ca/>

TRAINING

All individuals who have been diagnosed with asthma should know how to handle their inhalers in case an emergency arises.

All Appleby staff members who are in regular contact with students with asthma should participate in annual training sessions. In the school setting, this would include; school staff, nurses, foodservice staff, bus drivers, coaches, camp counselors, lifeguards and so forth.

Standardized asthma training will be provided once a year at a minimum, preferably around the start of the school year. Training will include ways to identify and manage asthma triggers, recognition of signs and symptoms of asthma attack and when and how to give a reliever/rescue (salbutamol) inhaler.

Continuous updates will be communicated to all Appleby staff, and related medical information on a student will be made accessible through the school information system, as well as be included in first aid kits.

For more details on how to use asthmas medication devices please visit:

<http://www.lung.ca/lung-health/get-help/how-use-your-inhaler>

SAFETY CONSIDERATIONS

All asthmatic students should carry their own personal preventative and rescue inhalers with them at all times. This includes while in the classroom, physical education classes, dining hall, on the bus, and sporting and special events. Inhalers should never be left in the student's locker at any time. Student's must immediately notify the Appleby College Health Centre and their parents if they have lost/misplaced their inhalers.

Salbutamol inhalers will be made available throughout the Appleby College Campus in the event that any individual suffers from an asthma attack. Salbutamol inhaler will be located at the following locations on campus:

- Health Center
- Students will be responsible to carry their own inhaler at all times
- Dining Hall
- Pool first aid kit

An additional salbutamol inhaler will also accompany any students with asthma attending school related trips/events. These inhalers will be provided in the First Aid Kit created by the Health Center, which will be requested by teachers/school staff organizing the trip. It is the student's responsibility to ensure that they are also carrying their own personal inhalers with them during the trip/school outing.

PRIVACY AND CONFIDENTIALITY

Parents of students with asthma must advise the Health Centre of the child's condition and provide a completed Plan of Care during registration or when newly diagnosed. All information provided will be handled with respect and confidentiality as required.

The student's Plan of Care will be made accessible to all school staff and personnel who may interact with the student through teachers access on the school information system. A student's Plan of Care must be signed by the parent/guardian before being shared with school staff, as the Plan of Care will provide permission for the document to be shared.

A Student's Plan of Care will only be shared with all school staff members, and will not be distributed outside of Appleby College, unless requested and/or permissions is granted by the parents/guardians or student.

REPORTING

All medical diagnosis and any medical incidences (on school property and off) should be reported to the Appleby College Health Center to ensure that students can be best supported as possible. Appleby College Health Centre will maintain confidential records, ensuring only permitted and necessary staff have access to information as needed or requested by parents.

Any medical incidences/emergencies will always be reported to the Head of the school to ensure that the necessary and appropriate follow up is completed. This is to ensure that all students remain safe, that appropriate training is always completed, and to allow policies to be reviewed to ensure that they are always in the student's best interest.

LIABILITY

In 2001, the Ontario government passed the Good Samaritan Act to protect individuals from liability with respect to voluntary emergency medical or first-aid services. Subsections 2(1) and (2) of this act state the following with regard to individuals:

2. (1) Despite the rules of common law, a person described in subsection (2) who voluntarily and without reasonable expectation of compensation or reward provides the services described in that subsection is not liable for damages that result from the person's negligence in acting or failing to act while providing the services, unless it is established that the damages were caused by the gross negligence of the person.
- (2) Subsection (1) applies to,
... (b) an individual ... who provides emergency first aid assistance to a person who is ill, injured or unconscious as a result of an accident or other emergency, if the individual provides the assistance at the immediate scene of the accident or emergency.

As well, Sabrina's Law and Ryan's Law each include provisions limiting the liability of individuals who respond to an emergency relating to anaphylaxis or asthma, respectively, as cited below.

Subsection 3(4) of Sabrina's Law states:

No action for damages shall be instituted respecting any act done in good faith or for any neglect or default in good faith in response to an anaphylactic reaction in accordance with this Act, unless the damages are the result of an employee's gross negligence.

Subsection 4(4) of Ryan's Law states:

No action or other proceeding for damages shall be commenced against an employee for an act or omission done or omitted by the employee in good faith in the execution or intended execution of any duty or power under this Act.

ASTHMA ACTION PLAN

Name: _____

Student Photo
(please attach)

1 EVERY DAY I NEED ...

Medication/inhaler name: _____

Medication/inhaler name: _____

Colour: _____

Colour: _____

How much & How often: _____

How much & How often: _____



2 MY ASTHMA IS GETTING WORSE WHEN...

- I Need my rescue inhaler more than 3 times/week
- I wake up at night because of my asthma
- It's hard for me to breathe or my chest hurts or I cough a lot
- I was exposed to my asthma trigger(s)

THIS IS WHAT I NEED ...

Medication/inhaler name: _____

Colour: _____

How much & How often: _____

Medication/inhaler name: _____

Colour: _____

How much & How often: _____



3 I AM HAVING AN ASTHMA ATTACK WHEN

- My _____ reliever inhaler is not helping
- I can't talk or walk easily
- I'm breathing hard & fast
- I'm coughing or wheezing a lot
- Extreme tightness in the chest
- Sweating & gasping voice
- Anxiety or fear

CALL 911 STAY CALM & HELP ME TAKE...

_____ puffs of my _____ reliever inhaler every _____



Date: _____ Student signature: _____

Date: _____ Parent/HCP Signature: _____