

<b>Procedure Title</b>	<b>Asthma</b>		
<b>Date of Issue</b>	August 26, 2015	<b>Related Policy</b>	BP 6802-D
<b>Revision Dates</b>	August 22, 2018	<b>Related Forms</b>	AF 6201; AF 6813; AF 6805, AF 6802
<b>Review Date</b>		<b>Originator</b>	Administrative Council
<b>References</b>			
Bill 20, Ryan's Law (ensuring Asthma Friendly Schools), 2015; District School Board Niagara A.P. No 3-31 "Asthma Friendly Schools"; AP 6802-D "Medical and/or Physical Assistance – Provision of within the School"; Policy/Program Memorandum No. 161 'Supporting Children and Students with Prevalent Medical Conditions (Anaphylaxis, Asthma, Diabetes, and/or Epilepsy) in Schools'			

## **1.0 RATIONALE**

- 1.1 Bluewater District School Board endeavours to create a learning environment that will reduce the risk for students with diagnosed asthma in accordance with Bill 20, *Ryan's Law (Ensuring Asthma Friendly Schools)*, 2015.
- 1.2 The safety of students with a medical condition such as asthma is a shared responsibility of the board, family, health care providers and community partners. This procedure will ensure that appropriate communication and asthma plan management preparation has taken place between the aforementioned groups with the goal of minimizing risk and being equipped to respond appropriately in the event of an emergency.

## **2.0 DEFINITIONS**

### **What is Asthma?**

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 many different types of triggers. Poor air quality, mold, dust, pollen, viral infections, animals, smoke and cold air are all examples of asthma triggers. 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.

### **Emergency Medication**

"Emergency Medication" refers to medication that is administered by a staff member to a student at the time of an asthma exacerbation - for example – reliever/rescue inhaler or stand-by-medication (Ventolin/Salbutamol etc. – container is usually blue in colour).

### **Medication**

"Medication" refers to medications that are prescribed by a health care provider and, by necessity, may be administered to a student, or taken by the student during school hours or school related activities.

### **Student Asthma Management Plan**

Following the responsibilities/procedures noted in this Administrative Procedure as well as those within AP 6802-D "Medical and/or Physical Assistance – Provision of within the School", and by completing Administrative Forms AF 6805 "Medical Problems (Critical) – Request for Assistance/Medical Emergency – Written Plan" and AF 6802

"Medication Assistance – Request For" (and any other applicable forms), an individualized Student Asthma Management Plan will be created for those students with the diagnosed asthma.

### **3.0 RESPONSIBILITIES**

#### **3.1 Responsibilities of Bluewater District School Board**

Bluewater District School Board (BWDSB) shall provide asthma education and regular training opportunities on recognizing and preventing asthma triggers, recognizing when symptoms are worsening and managing asthma exacerbations for all employees and others who are in direct contact with students on a regular basis.

#### **3.2 Responsibilities of the School Administrator(s)**

The School Administrator(s) shall:

- a) Identify asthma triggers in classrooms, common school areas and in planning field trips and implement strategies to reduce the risk of exposure.
- b) Establish a communication plan to share information on asthma to parents/guardians, students, staff and include any other person who has direct contact with a student with asthma.
- c) Identify students with asthma at time of registration or following diagnosis and gather necessary asthma related information from the parents/guardians and student.
- d) Meet with the parent/guardian to develop the Student Asthma Management Plan based on the recommendation of the student's health care provider.
- e) Request that the parent/guardian provides inhalers (two are suggested).
- f) Ensure that AF 6803 "Medication Log Book" is filled in each time the asthma medication is administered by staff or in the presence of staff.
- g) Obtain permission to notify and visually identify asthmatic student via posting of the Student Asthma Management Plan within the school.
- h) Ensure parent/guardian have a copy of the Student Asthma Management Plan.
- i) Maintain a file for each student diagnosed with asthma. The file may contain personal medical information, treatment plans and/or other pertinent information about the student, if that information is obtained with the consent of the student or the parent/guardian, in accordance with relevant privacy legislation. This file shall also include current emergency contact information.
- j) Inform BWDSB staff and others who are in direct contact on a regular basis with a student with asthma about the contents of the Student Asthma Management Plan.
- k) Ensure a copy of the Student Asthma Management Plan is placed in the Ontario Student Record (OSR) and the "Medical Peril" flag activated within Trillium.
- l) Provide a copy of Student Asthma Management Plan to Student Transportation Service Consortium of Grey-Bruce.
- m) Ensure staff are aware of the locations of the Student Asthma Management Plan(s) and medications.

#### **3.3 Responsibilities of Staff**

Staff shall:

- a) Assist in the development of a Student Asthma Management Plan for each student diagnosed with asthma.
- b) Ensure that the student is following the Student Asthma Management Plan.
- c) Report any variances of the Student Asthma Management Plan to their School Administrator(s).

### 3.4 Responsibilities of the Parent/Guardian

The parent/guardian shall:

- a) Notify the school of their child/ward's diagnosed asthma.
- b) Provide information to the school about their child/ward's asthma medication.
- c) Provide the school with up-to-date inhalers (two are suggested), clearly labelled with child/ward's name and prescription details.
- d) Provide child/ward with a fanny pack/body pouch for carrying the inhalers to ensure that the child/ward has the medication readily available, in transport, while at school, on out of school programs or at other school events and activities.
- e) Notify the school if they would like their child/ward to be allowed to carry their asthma medication and complete the appropriate release section on AF 6805 "Medical Problems (Critical) – Request for Assistance/Medical Emergency – Written Plan".
- f) Assist in the development of their child/ward's Student Asthma Management Plan.
- g) Provide the School Administrator(s) with a recent photograph of the student to be included with the Student Asthma Management Plan.
- h) Guide and encourage their child to reach their full potential for self-management and self-advocacy.
- i) Educate their child about their medical condition(s) with support from their child's health care professional (as needed). This would include, but is not limited to, teaching their child/ward to:
  - i. Recognize the first symptoms of asthma
  - ii. Communicate clearly when they feel asthma starting
  - iii. Know the Student Asthma Management Plan
  - iv. Know where the inhaler(s) are kept and who can get it
  - v. Carry their own inhalers in a fanny pack/body pouch (if parent/guardian permission has been given and the appropriate forms have been completed)
  - vi. Take as much responsibility as possible for their own safety including recognizing different types of triggers and avoiding them when possible
  - vii. Take responsibility for the location of the inhaler at all times where the student was allowed to carry their asthma medication so that the inhaler is not used by another student