



Administrative Procedure: Ryan's Law (Asthma)

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1.0 Definitions

1.1 Asthma:

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

1.1.2 People with asthma have sensitive airways that react to triggers. There are many different types of triggers. For example, poor air quality, mould, 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.

1.2 **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 inhaler or standby medication.

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

- 1.4 **Immunity** in this administrative procedure means the Act to Protect Pupils with Asthma states that, “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.”

2.0 Roles

2.1 The Board shall:

- 2.1.1 Ensure that all students have easy access to their prescribed reliever inhaler(s) medications.
- 2.1.2 Identify asthma triggers in classrooms, common school areas and in planning field trips and implement strategies to reduce the risk of exposure.
- 2.1.3 Establish a communication plan to share information on asthma to parents and/or guardians, students, employees and include any other person who has direct contact with a student with asthma.
- 2.1.4 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.
- 2.1.5 Review the asthma policy and administrative procedure as part of its regular policy review cycle.
- 2.1.6 Include the asthma policy in the Board policies posted on the Board website.

2.2 The Administrator shall:

- 2.2.1 Upon registration to a school, ask the parent and/or guardian if the student has been diagnosed with asthma and, if so, what medications are used. The Administrator shall ensure that all staff members (teaching, administration, support staff, including bus drivers and supply staff) be made aware that a student has asthma and may require the use of a reliever inhaler.

- 2.2.2 If a student has their parent's and/or guardian's permission, be permitted to carry their medication.
 - 2.2.3 Ensure that parents and/or guardians in consultation with their health care provider, develop a Student Asthma Plan of Care (**Appendix B**) and share the plan with the staff who have regular contact with the student.
 - 2.2.4 Ensure that a copy of the Student Asthma Plan of Care is placed in the OSR.
 - 2.2.5 Provide relevant information from the student's Plan of Care to school staff and others who are identified in the Plan of Care (e.g., food service providers, transportation providers, volunteers, occasional staff who will be in direct contact with the student), including any revisions that are made to the plan. Administrators are asked to include students' Plan of Care in a red folder entitled Emergency Plan of Care. This is to be posted in the students' classroom and common pertinent areas.
 - 2.2.6 Work with staff and families to identify and minimize asthma triggers in the school setting. The Administrator shall inform students, parents/guardians, volunteers and coaches about the importance of understanding asthma and know the triggers. (**Appendix A**)
- 2.3 **The Parents and/or Guardians shall:**
- 2.3.1 With good asthma control, encourage your child not to miss school because of asthma and should be able to participate fully in activities, including sports.
 - 2.3.2 Have regular, clear communication with the school to help your child maintain good asthma control. You can help to prevent asthma problems by talking to your child's teacher and by making sure your child has a proper asthma treatment.
 - 2.3.3 Meet with your child's teacher and school staff each September and do the following:
 - a. Provide a copy of your child's Asthma Action Plan and explain what it means.

- b. List and explain your child's asthma triggers and why it's important to avoid them. Some common triggers in the classroom and school include furry animals, dust, mould and strong smells.
- c. Show the Administrator your child's asthma medications and how to use them properly and make sure they are well labeled.
- d. Make sure the teachers know which inhaler is the reliever medication that helps in an asthma emergency (usually a blue inhaler).
- e. Ensure that your child has the prescribed medication at all times and that it is carried by your child (if this is decided).
- f. Ask about policies for field trips – with a bit of extra planning most trips should be safe.
- g. Make sure your child's teacher and school staff know what to do in an emergency and whom to contact (Plan of Care).
- h. Fill in the Student Asthma Plan of Care and bring it to the school.
- i. Update the school on any changes to your child's condition and support this with documentation from the family physician.

2.4 The Teachers & School Staff shall:

- 2.4.1 Help students maintain good asthma control. Students with well-controlled asthma should be able to fully participate in activities, including sports. There are many things that can be done to help a student with asthma:
 - a. Review and familiarize yourself with the student Individual Health plan. Ask parents/guardians about their child's asthma triggers if additional

information is needed. Each person with asthma has their own set of triggers. As much as possible, remove asthma triggers from your classroom. Some possible triggers in the classroom include, furry animals, dust, mould and strong smells.

- b. All staff will participate in Board delivered asthma education and training opportunities on a yearly basis. This training will include learning about asthma medication – what they do and what they are for. Learn the difference between a reliever medication (usually in a blue puffer, taken during asthma attacks or before exercise) and a controller medication (usually taken at home every day to control symptoms, but won't help in an asthma attack).
- c. Talk to your class about asthma so they understand it better.

Appendix A

[OPHEA-Asthma Triggers](#)

Appendix B

[Plan of Care - Asthma](#)