

Community Health Monitoring Plan

Prepared for:



The City of Orlando

Economic Development Department

400 S. Orange Avenue

Orlando, Florida 32802-4990

EPA Brownfield Cooperative Agreement BF-95498212

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1. Introduction

Brownfield Grant Funding

In September 2012, the City of Orlando received two US EPA Community-wide Brownfield Assessment grants to provide support in the City's efforts to perform community-wide hazardous substance and petroleum environmental site assessments on multiple properties located within the Parramore community.

The Small Business Liability Relief and Brownfields Revitalization Act provides opportunities for communities to consider the health impacts of brownfields by providing funds in Brownfield Assessment Grants to conduct community health monitoring activities. The Act allows local governments to spend up to 10% of a brownfields grant for community health monitoring. Health monitoring has the ability to provide an opportunity to create safer, healthier communities through the redevelopment process and use of smart growth principles. Redevelopment focused on improving health may increase recreational or green space creation to encourage physical activity, community gardens and restful public spaces that encourage interaction while also reducing the effects of heat islands and improving stormwater management.

The City of Orlando has elected to utilize 10% of their assessment grant funds to conduct Asthma-Friendly School Assessments* at several elementary, middle and high-schools located within and near Parramore community.

Asthma in School Aged Children

The number of school aged children with asthma is on the rise in Florida and across the nation. Schools are increasingly burdened by the poor outcomes resulting from the disease, namely increased absenteeism, decreased academic performance, and limitations on participation in physical activity. The recently released fact sheet from the Florida Department of Health (FDOH) Asthma Program, provides data on the impact of asthma on Florida students (see Fact Sheet in Attachment A). Additionally, the September 2013 report from the Florida Department of Health titled "Burden of Asthma in Florida, 2013" highlights the burden of asthma in Florida and assists stakeholders, policymakers, and other interested parties in their efforts to reduce asthma emergency department visits and hospitalizations, associated costs, and improve the health of Floridians with asthma (see Attachment B).

Asthma is the most common chronic disease in children under 18, affecting more than 5 million children in the U.S. It is the leading cause of school absenteeism due to chronic disease. Each day, in the U.S., over 40,000 people miss school or work due to asthma. When a child misses school, a parent also misses work. Research has shown there is a direct connection between the prevalence of asthma and poverty. In the Parramore community nearly 51% of families live below the poverty level. While the cause of asthma is unknown, it can be controlled and episodes can be avoided by knowing the warning signs of an episode, staying away from things that trigger an episode, and following the advice of a doctor. The Asthma-Friendly School Award is an opportunity for participating school staff to receive asthma training, provide support to children and their families who are dealing with asthma, and



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manage and control asthma triggers in the school setting. Furthermore, in addition to having an opportunity to be recognized for their efforts to become a more Asthma Friendly School, staff will be educated and equipped to provide a comprehensive asthma management program for benefiting all enrolled children with asthma. By partnering with parents, schools can help to improve the quality of life for a child with asthma, reduce missed school days and reduce missed days of work for parents.



2 Asthma-Friendly School Recognition

Collaboration With the Florida Asthma Coalition

The Florida Asthma Coalition (Coalition) is a statewide coalition that was established in 2009 to eliminate asthma disparities, improve quality of life, and reduce costs. It is comprised of volunteers and several local coalitions in Florida working to improve asthma outcomes within their areas. Members promote asthma awareness and disease prevention at the community level and work to expand and improve the quality of asthma education, management, and services through system and policy changes. In collaboration with the Centers for Disease Control and Prevention (CDC) and the FDOH Asthma Program, the Coalition has developed a comprehensive Program to reduce asthma attacks in children that attend an Asthma-Friendly School. The Florida Asthma-Friendly School Award (Award) was developed to recognize schools that meet criteria for excellence in asthma management. Schools that achieve recognition are schools where administrators, staff, nurses, faculty, families, and clinical partners are working together to help students with asthma properly manage their disease. Coalition partners include the American Lung Association, the Florida Department of Health, the Center for Disease Control and four local asthma coalitions.

Award Recognition Process

The Coalition has developed a systematic process that will help schools assess current asthma management activities and take steps to receive an Award. Award winners enjoy a healthier student body and opportunities to show off their school's success through local and state marketing efforts. With the goal of improving student health, attendance, and academic achievement, the Florida Asthma Coalition established a voluntary recognition opportunity to acknowledge schools with exceptional asthma management programs. The award is offered at four levels (bronze, silver, gold, and platinum) based on the number and type of criteria achieved by each school. These four levels of recognition are based on national, evidence-based guidelines.

The most basic and essential activities fall under the Bronze level. Successive recognition levels include additional activities and require more effort, resulting in progressively stronger programs and culminating in a Platinum level recognition. The recognition levels represent points of progress toward a goal of improved asthma management, because every small step makes a difference. For the purposes of this grant funding, a Bronze Award will be the goal of participating schools. Participating schools will be encouraged to achieve a higher level of Award by completing additional activities.

Florida Asthma Coalition Bronze Award

1. A school based Asthma Leadership Team is established (may align with an existing health team).
2. School nurses, faculty, and staff participate in asthma training at least every other school year.

Percentage of participants increase by award level:

Award Level	Bronze	Silver	Gold	Platinum
Required Percentage	More than 25%	More than 50%	More than 75%	More than 75%



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3. School ensures immediate access to asthma medications per Florida statute.
4. School provides student centered asthma management support (includes identifying children with asthma at the beginning of the school year and having asthma action plans on file for students with known asthma).

Percentage of children with asthma with an asthma action plan increases by award level:

Award Level	Bronze	Silver	Gold	Platinum
Required Percentage	More than 25%	More than 50%	More than 75%	More than 90%

5. School posts asthma posters in high-traffic areas.
6. Physical education and activity opportunities meet needs of children with asthma.

Asthma-Friendly School Award Target Schools

The following schools are either located in the Parramore community or receive children from the District and will be targeted for the Program. Five out of six of the schools listed are Title 1 (No Child Left Behind) schools. Research studies completed over the last 30 years show conclusively that schools with high concentrations of economically disadvantaged students generally demonstrate lower levels of achievement than do schools with lower concentrations of economically disadvantaged students. Under Title 1, schools with the highest concentrations of poverty receive supplemental federal funding from the U.S. Department of Education to meet school educational goals.

Name	Address	Title 1 School?	Percent Poverty
Elementary Schools			
Nap Ford Community School	648 W. Livingston Street	yes	89.57%
Rock Lake Elementary	408 North Tampa Avenue	yes	95.51%
Orange Center Elementary	621 S. Texas Avenue	yes	97.86%
Princeton Elementary	311 W. Princeton Street	no	
Middle School			
Howard Middle School	800 E. Robinson Street	yes	75.78%
High School			
Jones High School	801 S. Rio Grande Avenue	yes	86.69%

Project Approach

The City will utilize the Brownfield Assessment Grant funding and the program developed by the Florida Asthma Coalition to conduct the activities listed below. There are six main steps to becoming an Asthma-Friendly School:

1. Establish a Leadership Team
2. Professional Development for School Nurses, Faculty, and Staff on Asthma Management
3. Access to Asthma Medication
4. Student Centered Asthma Management Support
5. Awareness Posters
6. Physical Education and Activity



Bronze Criteria 1. Asthma Leadership Team

An Asthma Leadership Team and designated a leader for that team, the “Asthma Champion” will be established for each school. The success of a school-based asthma effort is strongly linked to having the right people to plan, lead, and monitor the effort. It is important to get Administrative buy-in and then build a team of enthusiastic staff to support the initiative.

The purpose of the Asthma Leadership Team is to assess current efforts, conduct planning for improvement, and monitor asthma management activities at the school on a continual basis. Creating and sustaining an asthma-friendly school effort is a long-term proposition. The Asthma Leadership Team will provide the creative and resourceful thought, cooperation, and facilitate action among the range of individuals and organizations needed to achieve success. Identifying a school based asthma champion is frequently cited in the literature as key to becoming a more asthma-friendly school. Members of the Asthma Leadership Team will have multiple responsibilities, therefore it is critical that one leader, or champion, is clearly defined to ensure and facilitate ongoing communication, implementation, and system improvement.

Sign up for an Asthma-Friendly School Mentor

The first step in establishing a school’s asthma leadership team is signing up for an Asthma-Friendly School Mentor. Mentors are located across Florida and are available to answer questions or provide support and technical assistance as the Team works through the application process. Mentors are trained on the Asthma-Friendly School criteria and are familiar with the evidence-based clinical asthma guidelines and tools for school-based asthma management.

Schools are encouraged to have their Asthma Leadership Team overlap or align with an existing school wellness team or healthy school team. In addition, consideration is made to make the Team part of an existing committee that is required by schools. Types of individuals to invite to the Asthma Leadership Team include:

- | | | |
|---|------------------------------|-----------------------------|
| • Parent of a child with asthma | • Local clinicians | • Physical Educator |
| • Students | • Pulmonologist or Allergist | • School Social Worker |
| • School Advisory Council Member | • Respiratory Therapist | • School Psychologist |
| • District Health or Wellness Coordinator | • Certified Asthma Educator | • Teachers |
| • School Wellness Coordinator | • Administrator | • School Counselor |
| • Health Department Personnel | • PTA Representative | • Support Staff |
| • Health Educator | • Nurse | • American Lung Association |

Using Data to Gain and Maintain Support

Several studies have shown the value of using data to document the need for asthma education among students and staff. Gathering and presenting the types of data below can be used to engage new team members, including the administrator:



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- Number and percent of students with asthma in the school.
- Number of days of absenteeism for students with asthma.
- Number of students with asthma medication at school.
- Number of students with permission to carry or self-administer asthma medication.
- Number of students with asthma action plans on file.
- Number of nurse visits due to asthma symptoms.
- Number of 911 calls or calls to parents for students with asthma.

These data points will also be useful for monitoring and evaluating improvements in asthma outcomes based on the overall asthma-friendly school initiative.

Facilitating Team Meetings and Maintaining Momentum

Once the mentor is assigned and the leadership team membership is decided, the team will need to establish a process and timeline for working together. It is important to schedule a meeting with the school administration (principal or assistant principal) to obtain support and ensure collaboration in achieving the desired level of recognition. The first meeting may serve as an orientation to members and help them understand the levels of recognition and the steps needed to achieve them. This is also the time to assess what the school already has in place for asthma management using the Asthma-Friendly Schools Checklist/Application (see Attachments C and D). Once the team knows what is already in place, a timeline for completing the remaining criteria can be established. Using the list of unmet criteria, the team can talk with school staff to determine the order for achieving the remaining criteria.

An early priority for the team is to decide on the level of recognition that the team would like to achieve and the timeframe for achieving higher levels. For example, a school may make take a multi-year approach, with the goal of achieving higher levels of recognition in later school semesters or years. Once the team agrees on the timeline and goals, meetings will be ongoing to identify problems, plan next steps, discuss progress using data, and ensure consistent implementation.

Bronze Criteria 2. Professional Development for School Nurses, Faculty, Staff - Asthma Management

School nurses or their equivalent will participate in a free online asthma education program that aligns with their background, role, and skill sets within 3 months. In addition, other school faculty and staff members will participate in basic asthma education through the American Lung Association's (ALA) Asthma 101 course. See Attachment E for the American Lung Association's Asthma 101 Program Instructions.

Professional Development for Nurses

School Nurses have a special role in asthma management. In accordance with the Standards of Practice and Professional Performance for School Nursing, they provide care to students as well as provide support and education to those around them on asthma management. To support school nurses in their important role, they will be given professional development opportunities that are appropriate to their



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nursing training and skill sets. It is recommended that school nurses complete both of the free trainings listed below. However, only one is required to achieve all levels of recognition.

The Asthma Management and Education On-line Training from the Asthma and Allergy Foundation of America is a recommended training for school nurses because it is an interactive web-based course structured around the National Heart, Lung, and Blood Institute's "Four Components of Asthma Management." This free program consists of 12 self-paced study modules and has been approved for 7 CE hours for nurses and 7 CRE hours for regulatory therapists. The program is found at www.aafa.org and Online Training Instructions are found in Attachment F.

The School Nurse Online-Module from "Teaming up for Asthma Control" and the Children's Hospital University of Missouri Health Care free online training program provides school nurses with a 2-hour web-based course utilizing the Expert Panel, Report 3: Guidelines for the Diagnosis and Management of Asthma (EPR3-2007) and provides clear, evidence-based approaches for improving asthma care. <http://video.eskn.tv/player.php?p=z80240ko>.

Professional Development for School Faculty and Staff

Faculty and staff training is critical for effective asthma management in Florida schools. The ALA's Asthma 101 course provides faculty and staff with the knowledge to support students with asthma and to prevent and respond to asthma emergencies. For the Bronze award more than 25% of school faculty and staff must have participated in an Asthma 101 program (or comparable approved course) within the past 24 months. Therefore, training under this initiative of 35% of school staff will occur within 3 months after the project is initiated with the first meeting of the Asthma Leadership Team. Participating staff will be drawn from the health services staff, teachers, physical education teachers, coaches, cafeteria workers, bus drivers, administrators, playground supervisors and anyone who may be the adult first responding to an asthma episode. The ALA's Asthma 101 program is recommended for all school staff because it is an evidence-based, evaluated curriculum that meets the needs of adult learners and covers knowledge areas that are critical safeguards to preventing asthma crises at a school. This program is delivered in a one-time 60- to 90 minute session and prepares faculty and staff to support students with asthma and improves their confidence in dealing with and preventing asthma-related incidents at school. Free or low cost in person trainings may be available from the ALA. A free online version of ALA's Asthma 101 is available at: <http://flasthma.files.wordpress.com/2013/11/asthma101-instructions1.pdf>.

Bronze Criteria 3. Access to Asthma Medication

To achieve criterion number three, schools must ensure students with asthma have immediate access to appropriate medications before and during events. According to Florida State Statute Title XLVIII K 20-1002.20(3) (h) schools must have a policy or process that enables students with parent and physician approval to carry and self-administer metered dose inhalers.



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The school's plan for medication management and administration must be in compliance with state regulations and nursing practice standards. Having a plan will help ensure students have immediate access to all medications as approved by the pediatrician/primary care provider and parents, regardless of the availability of the school nurse. This includes self-carry and self-administration of medication as appropriate.

Access to "quick relief" or "rescue" medication is critical, as these will immediately open the airways during an asthma episode. The longer it takes to administer quick-relief medications, the worse the episode may become. Assuring immediate access to medications will help prevent asthma emergencies by allowing students to manage their asthma as their physician prescribes. The school is responsible for having a plan or process that assures true immediate access. For example, medications cannot be locked in the school nurse's desk, with only the nurse and a few staff members having access to the medications. Such a situation could result in a lack of access to the medication in an emergency, should those few individuals not be in the school and available at the time of an asthma attack.

If self-carry/self-administration is not the school policy, the school is responsible for having a plan that assures true immediate access. Through this training the school will develop a School Medication Policy.

Bronze Criteria 4. Student Centered Asthma Management Support

Providing student centered asthma support involves collaboration between all school staff with the leadership of the school nurse. To achieve criterion number four, schools must carry out the following five actions / processes – many of which are already part of their routine school health services. School nurses are at the center of providing student health care services, but they can't do it alone. Nurses carry out activities in accordance with the Standards of Practice and Professional Performance for School Nursing and in accordance with the Florida Department of Health's Guidelines for the Delegation of Care for Students with Asthma. By carrying out the activities described below, school nurses, individuals delegated to provide care, and other school faculty and staff can be very effective in helping children with asthma manage and control their symptoms. The steps for providing student support include:

- Identify and track students with asthma.
- Have an Asthma Action Plan on file for all students with an asthma diagnosis, or known asthma. The required percentage of students with Asthma Action Plans on file increases with the increasing award levels.
- Have a standard emergency protocol for students that don't have an Asthma Action Plan.
- Maintain a positive partnership between school staff, parents, students, pediatricians, and other primary care providers.
- Provide linkages to medical care or insurance for children in need.

Identify and Track Children with Asthma



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It is important for schools to know which students have asthma in order to ensure they have what they need to keep asthma under control and not miss school due to symptoms. The process of identifying students with asthma should be done annually (at minimum) and ideally at the beginning of each school year. Research suggests focusing attention on identifying those students with asthma diagnoses, particularly those who are experiencing symptoms due to uncontrolled asthma. Children with asthma like symptoms that do not have a diagnosis may be referred to a healthcare provider for consultation, but school nurses and staff should be sure to keep a focus on students with a diagnosis. The school nurse or delegated staff may consider one or all of the factors below when identifying children with asthma:

- A healthcare provider diagnosis of asthma (including exercised-induced asthma) and current asthma medication prescription.
- A provider diagnosis and symptoms in the past 12 months (as reported by parents, nurse visits, or directly by older students).
- A parent report of asthma or wheezing and provider-prescribed asthma medication for recurrent symptoms in the past 12 months.
- Students with diagnoses of reactive airway disease, wheezy bronchitis, or similar diagnoses for which an authorized individual has prescribed albuterol or a controller medication treatment.
- Students who have any asthma medication or medication orders sent to school.

This type of information may be gathered through multiple channels such as annual emergency cards, school entry physical examination forms, medication administration forms, and health room visits. Steps should be taken to build relationships with the family and health care provide so that the child can be properly assessed according to the EPR-3-2007 Guidelines.

Have an Asthma Action Plan on File for Students with Asthma

Once students with asthma are identified, schools will focus attention on obtaining Asthma Action Plans, developing Individual Health Care Plans (if needed) and tracking students with asthma to make sure their asthma is under control.

An Asthma Action Plan is a written plan to help monitor and control asthma. It is typically developed by the doctor or primary care provider with input from the parents. The Asthma Action Plan shows the student's daily asthma treatment plan, such as what kind of medicines the student should take, specific doses, and when to take them. If a doctor prescribes medicine for the student to take every day (also known as controller medicine), it is because the student experiences asthma symptoms too often. The student must take the medicine every day to stay well, even on days they are not experiencing any symptoms. Daily medications won't prevent every asthma attack but if they are used every day, the student won't have attacks as often. The Asthma Action Plan should also describe the student's asthma triggers and provide instructions for how to handle worsening asthma symptoms or episodes – including when to call the parents and when to call 911.

Bronze Criteria 5. Awareness Posters



Achieving criterion number five is as simple as printing and posting the recommended Asthma Awareness posters in high-traffic areas at the school. The outreach effort aligns with Next Generation Sunshine State Standards. Posters serve as easy reminders to staff, parents, and students about what to do in an emergency and how to avoid asthma triggers. Schools are encouraged to post them in areas that are frequently visited by the target audience and near the health room in addition to other high-traffic areas. See Attachment G for copies of awareness posters.

Bronze Criteria 6. Physical Education and Activity

To achieve criterion number six, physical education (PE) teachers need to have participated in the Asthma 101 course. In addition, PE teachers must sign up to receive free air quality alerts so they can make decisions about when to avoid conducting activity outside. They also need to have a plan in place for alternative indoor activities on poor air quality days. Signing up for the alerts is easy from this EPA website: www.airnow.gov. These steps will help PE teachers ensure that students with asthma are given the opportunity to participate in physical education fully, safely, and in accordance with their Asthma Action Plan.

Applying for Recognition

Seeking recognition is easy once asthma management processes are in place. To complete the Asthma-Friendly School Application, school staff or members of the Leadership Team must provide the information as requested on the form and the school administrator/principal must provide his or her signature where indicated for verification. Once the application is complete, schools will submit a scanned version and the necessary attachments to the Florida Asthma Coalition. The application will be reviewed by members of the Coalition and once the application is approved a certificate will be presented and the school will be listed on the Florida Asthma Coalition's website.



3 Plan Implementation

This Florida Asthma-Friendly Schools program has been developed working in collaboration with and utilizing the Application Guide provided by the Florida Asthma Coalition. The table below provides a timeline for implementation of the program in four elementary, one middle and one high school that serve children from the Parramore community.

Name	Address	Start Date
Elementary Schools		
Nap Ford Community School	648 W. Livingston Street	30 days after school district approval
Rock Lake Elementary	408 North Tampa Avenue	45 days after school district approval
Orange Center Elementary	621 S. Texas Avenue	60 days after school district approval
Princeton Elementary	311 W. Princeton Street	75 days after school district approval
Middle School		
Howard Middle School	800 E. Robinson Street	60 days after school district approval
High School		
Jones High School	801 S. Rio Grande Avenue	90 days after school district approval

Initial Visit

- Introduction, administrative, registration
- Explanation of the program, processes, advantages
- Assessment of current asthma management practices and staff training
- Identification of Asthma Champion
- Identification of staff to receive training
- Roster of students with asthma
- Review of environmental triggers in the school environment
- Distribute ALA Asthma 101 worksheet to facilitate access to free training module
- Provide school nurse with a copy of the Asthma-Friendly School Resource Guide, educational posters and brochures provided by the Asthma Coalition

Second Visit

- Identification and welcome to Asthma Leadership Team
- Distribute ALA Asthma 101 worksheet to facilitate access to free training module for additional staff
- Discussion of environmental trigger assessment and asthma triggers observed at the School with Champion
- Provide copies of the Asthma-Friendly School Resource Guide, educational posters and brochures as needed
- Encourage school/parent communication and the use of Asthma Action Plans for asthmatic children enrolled in the school



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Third Visit

- Distribute ALA Asthma 101 worksheet to facilitate access to free training module for additional staff
- Provide educational posters and brochures for educational purposes
- Review list of students with asthma and inventory Asthma Action Plans on file
- Develop list of staff who have received ALA Asthma 101 training
- Help school prepare the Asthma-Friendly School Application



Additional Resources

ALA's Asthma-Friendly School Toolkit: <http://www.lung.org/lung-disease/asthma/creatingasthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/aboutasthma-friendly-schools-initiative/educate-school-staff.pdf>

Includes the following:

- Background on the need for school staff education,
- A sample district policy requiring asthma education,
- Michigan State Board of Education's Policy on the Management of Asthma in Schools,
- Sample letter to school districts about the need for asthma education, and
- Outlines for presentations to PTA/PTO or School Board and Administrators.

NAEPP: Asthma Basics for Schools: These PowerPoint slides provide updated information about the problem of asthma among school-age youth, the causes, signs and symptoms of asthma, the impact of asthma on student learning, asthma triggers, the control of asthma, assessing how asthma-friendly is your school, and how to handle an asthma episode.

http://rover.nhlbi.nih.gov/health/prof/lung/asthma/basics_schools/

*This plan has been developed in collaboration with the Florida Asthma Coalition Florida Asthma-Friendly Schools Recognition Program.

Attachment A

Florida Department of Health Asthma Program Fact Sheet

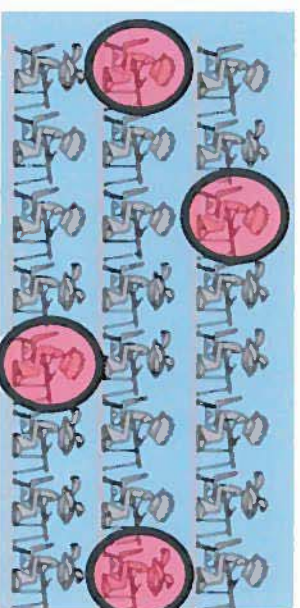
ASTHMA IN SCHOOL-AGED CHILDREN, FLORIDA 2013

If you think asthma isn't impacting your students – THINK AGAIN!

Approximately 461,200 instructional hours were lost due to asthma in school year 2012-2013

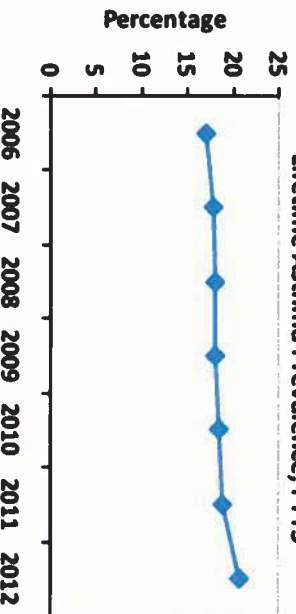
Asthma among Florida Students

In 2012, approximately 1 out of 5 Florida public middle and high school students (20.5%) had been told by a doctor or nurse that they have asthma at sometime in their life (lifetime asthma).ⁱ In addition, approximately 1 out of 6 middle and high school students (17%) reported having had an asthma attack in the past year. This means that in a classroom of 24 students, approximately 4 have had a recent asthma attack.



Students with a Recent Asthma Attack

Lifetime Asthma Prevalence, FTYs



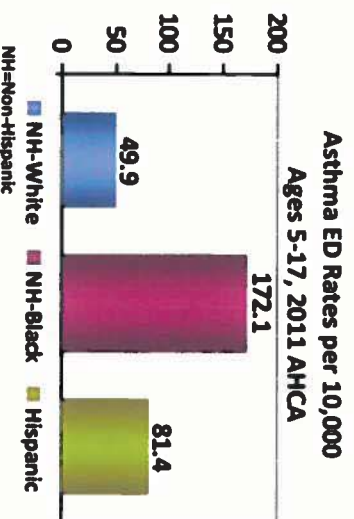
Asthma is On the Rise

Asthma prevalence is increasing among all ages in Florida and nationally. From 2006 to 2012, the prevalence of lifetime asthma among Florida public middle and high school increased by 21% from 17.0% to 20.5%.ⁱ

Disparities and the Achievement Gap

Emergency department (ED) visits are a key indicator of asthma severity and/or poor asthma control.

Among Florida residents ages 5-17, the rate of ED visits among non-Hispanic blacks (172.1 per 10,000) was more than 3 times the rate for NH-whites (49.9 per 10,000) and more than twice the rate for Hispanics (81.4 per 10,000).ⁱⁱ The impact of uncontrolled asthma on academic achievement should not be overlooked.



The subgroups disproportionately impacted by asthma mirror the subgroups identified by a recent Florida Department of Education (DOE) report as having lower levels of academic proficiency. The more severe a child's asthma, the more likely they are to miss school and have symptoms that interfere with participation in class and physical activity.ⁱⁱⁱ

Schools can Help Control Asthma

Implementing robust, school-based asthma management programs, starting in elementary school, could enable significant health and educational achievement gains for those students most in need. Visit www.floridasthmacoalition.com/schools to learn how your school can take action.

What Can You Do? Become an Asthma-Friendly School!!

ⁱ Data from the Florida Youth Tobacco Survey, www.floridachronicdisease.org/FYTS/intro.htm

ⁱⁱ Rates calculated using data from the Agency for Health Care Administration and population estimates from www.FloridaCharts.com

ⁱⁱⁱ Moonie, S. A., Sterling, D. A., Figgs, L. Castro, M. Asthma Status and Severity Affects Missed School Days. 2006. Journal of School Health, 76.



Florida Asthma-Friendly School Award 2012-2013 Award Criteria

www.FloridaAsthmaCoalition.com/schools

Bronze

1. Establish an Asthma Leadership Team (may align with an existing health or wellness team).
2. School nurses, faculty and staff participate in asthma training at least every other school year. (Includes the American Lung Association's (ALA) Asthma 101 program for faculty and staff and FREE On-line Asthma Management Training for Nurses from the Asthma and Allergy Foundation of America: <http://www.myfloridaeh.com/medicine/Asthma/asthmaonline training.pdf>). Note: Participation requirements increase based on award level – See Resource Guide.
3. School ensures immediate access to asthma medications per Florida statute. <http://www.doh.state.fl.us/environment/medicine/asthma/SelfAdministrationStatute.pdf>
4. School provides student centered asthma management support (includes identifying children with asthma at the beginning of the school year, having asthma action plans on file for students with known asthma, and coordinating between parents and health care providers as needed). Note: Requirements increase based on award level – See Resource Guide.
5. School posts asthma posters in high-traffic areas. <http://www.doh.state.fl.us/environment/medicine/Asthma/Resources.html#school>
6. Physical education and activity opportunities meet needs of children with asthma. Physical education teachers participate in general asthma education and sign up for www.airnow.gov air quality alerts.

Silver

7. School works with community partners to provide self management education to students with asthma (such as the ALA's Open Airways for Schools Program). Note: Participation requirements increase based on award level – See Resource Guide.
8. School works with community partners to offer and provide education to parents about asthma management (such as ALA's Asthma 101 program).

Gold

9. School maintains a healthy school environment through implementation of an indoor air quality program (such as the Environmental Protection Agency's Tools for Schools Program: <http://www.epa.gov/iaq/schools/>).

Platinum

10. School implements comprehensive asthma procedures or a policy which includes the activities listed in criterion 1-9 and a comprehensive tobacco free campus policy.

Developed in collaboration with:



Healthy Children are our Priority!



Attachment C

Asthma-Friendly Schools Checklist/Application



Florida Asthma-Friendly School Recognition 2013-2014 Application Packet

This packet includes general information about the Asthma-Friendly School Award from the Florida Asthma Coalition and the Planning Checklist / Application Form. It accompanies the Coalition's **Asthma-Friendly Schools Application Guide** (<http://floridasthmacoalition.com/schools/>), which provides detailed instructions and tips on how to complete each criterion required for the award.

Florida Asthma Friendly School Recognition Criteria 2013-2014

Bronze

1. **Asthma leadership team established.** Includes a Coalition mentor and may align with health/wellness team. *Mentor sign up:* <http://www.sureymonkey.com/s/AsthmaFriendlySchoolSignUp>
2. **School nurses, faculty and staff participate in asthma training at least every other school year.** (Includes the American Lung Association's (ALA) FREE on-line Asthma 101 program for faculty and staff and FREE On-line Asthma Management Training for Nurses from the Asthma and Allergy Foundation of America: <http://www.floridahealth.gov/diseases-and-conditions/asthma/documents/aafa-training.pdf>). *Note: Participation requirements increase based on award level – See Application Guide.*
3. **School ensures immediate access to asthma medications per Florida statute.**
4. **School provides student centered asthma management support** (includes identifying children with asthma at the beginning of the school year, having asthma action plans on file for students with known asthma, and coordinating between parents and health care providers as needed). *Note: Requirements increase based on award level – See Application Guide.*
5. **School posts asthma posters in high-traffic areas.** <http://floridasthmacoalition.com/schools/>
6. **School provides physical education and activity opportunities that meet needs of children with asthma.** Physical education teachers participate in general asthma education (such as ALA's Asthma 101 program) and sign up for www.airnow.gov air quality alerts.

Silver (All Bronze and Criterion 7 and 8)

7. **School works with community partners to provide self management education to students with asthma** (such as the ALA's Open Airways for Schools Program). *Note: Participation requirements increase based on award level – See Application Guide.*
8. **School works with community partners to offer and provide education to parents about asthma management** (such as ALA's Asthma 101 program).

Gold (All Bronze, Silver and criterion 9)

9. **School maintains a healthy school environment through implementation of an indoor air quality program** (such as the Environmental Protection Agency's Tools for Schools Program: <http://www.epa.gov/iaq/schools/>).

Platinum (All Bronze, Silver, and Criterion 10)

10. **School implements comprehensive asthma procedures or a policy which includes the activities listed in criterion 1-9 & the district meets the 12 criteria for a comprehensive tobacco-free schools policy.**

Developed in collaboration with:



Healthy Children are our Priority!

Asthma-Friendly School Recognition 2013-2014 Planning Checklist & Application

This document serves as the planning checklist and application for an Asthma-Friendly School Award from the Florida Asthma Coalition. It accompanies the Coalition's **Asthma-Friendly Schools Application Guide**, which provides detailed instructions and tips on how to complete each criterion required for the award. Schools working towards the award are encouraged to use Part 3 as a checklist at the beginning the planning process. When planning "check off" the criteria that have already been achieved then focus efforts on those needing more work. Questions can be sent to FLAsthmaCoalition@gmail.com.

To apply for an Asthma-Friendly School Award, schools must:

- (1) Review the Asthma-Friendly School Application Guide and implement criteria for the desired award level.
- (2) Complete **ALL three parts** of this Application, thus verifying implementation of the criteria.
- (3) Provide documentation for criterion 10 (if applying for the Platinum award).
- (4) Scan and submit the completed and signed Application and necessary documentation via e-mail to FLAsthmaCoalition@gmail.com.

Part 1: General Information about your school

School:	District:	
Grades Taught:	Number of Students:	Number of Faculty and Staff:
Principals Name:		Principals Phone:
Principals Email:		
School Nurse's Name(s) and Email:		

Part 2: Award level achieved by your school

Please check the box to indicate the award level achieved by your school. The signature of the school administrator/principal is required. **By signing below the administrator/principal verifies the achievement of the stated criteria level as of the date indicated.**

<input type="checkbox"/>	BRONZE Criterion 1-6	<i>I attest that our school achieved the criteria level of bronze and that the information provided related to criterion 1-6 on the following pages is accurate.</i> Principal Signature: _____ Date: _____
<input type="checkbox"/>	SILVER Criterion 1-8	<i>I attest that our school achieved the criteria level of silver and that the information provided related to criterion 1-8 on the following pages is accurate.</i> Principal Signature: _____ Date: _____
<input type="checkbox"/>	GOLD Criterion 1-9	<i>I attest that our school achieved the criteria level of gold and that the information provided related to criterion 1-9 on the following pages is accurate.</i> Principal Signature: _____ Date: _____
<input type="checkbox"/>	PLATINUM Criterion 1-10	<i>I attest that our school achieved the criteria level of platinum and that the information provided related to criterion 1-10 on the following pages is accurate.</i> Principal Signature: _____ Date: _____

Part 3: Criterion specific verification. Check where complete and provide requested info.

BRONZE LEVEL (1-6)

☐ **Criterion 1 – Asthma Leadership Team:** Our school has an Asthma Champion who leads our school's Asthma Leadership Team. (Note: This team may align with or interface with the existing school wellness team or other similar school health and or safety team(s).)

• Name of Asthma Champion: _____ Email Address: _____

• Please list up to three additional active Asthma Leadership Team members and provide their titles:

1. _____
2. _____
3. _____

• If your Asthma Leadership Team aligns with the school wellness team or other existing school health or safety team please describe: _____

☐ **Criterion 2 – Professional Development for School Nurses, Faculty, and Staff on Asthma Management:** Our school nurse, faculty, and staff participated in one of the recommended trainings on asthma management within the past 24 months. **Please check the fulfilled requirements and provide additional details where indicated with “*”.**

☐ **2.1. School Nurses:** Our school's nurse(s) participated in the following: (select all that apply)

☐ AAFA - Asthma Management and ☐ University of Missouri Health Care -
Education Online Training Teaming Up for Asthma Control

*Date Completed: _____ *Date Completed: _____

*Nurse Signature: _____ *Nurse Signature: _____

☐ **2.2: Faculty & Staff:** School faculty and staff participated in general asthma education (such as the American Lung Association's Asthma 101 course, or other pre-approved course).

• *Total Number of Faculty and Staff: _____ *Total Participated: _____ *Percent: _____
Reminder: The required percent of faculty and staff that participated increases by award level:

- *Bronze: More than 25% of faculty and staff*
- *Silver: More than 50% of faculty and staff*
- *Gold: More than 75% of faculty and staff*
- *Platinum: More than 75% of faculty and staff*

• *Did faculty and staff participate in the ALA's Asthma 101 Program? ☐ Yes ☐ No

*If no, Program Name: _____ Length: _____ Provider: _____

☐ **Criterion 3 – Access to Medication:** Per Florida Statute Title XLVIII K 20-1002.20 (3) (h) our school has a policy or process that enables students with parent or physician approval to carry and self-administer metered dose inhalers and students with asthma have immediate access to appropriate medications.

☐ **Criterion 4 – Student Centered Asthma Management and Support:** Our school provides student centered asthma management and support including 4.1-4.5 below. [Note: 4.1-4.5 align with the Asthma EPR-3 Guidelines and Standards of Practice & Professional Performance for School Nursing]. Please check the fulfilled requirements and provide additional details where indicated with “a”.

☐ 4.1. Students with asthma have been identified. *Number of students with known asthma: _____

☐ 4.2. Asthma Action Plans are on file for students with asthma.

*Number of students with known asthma with an Asthma Action Plan on file: _____

*Percent of students with known asthma that have an Asthma Action Plan on file: _____

Reminder: The required percent of students with known asthma that have an Asthma Action Plan on file increases by award level:

▪ **Bronze:** More than 25% of students with know asthma have an asthma action plan on file.

▪ **Silver:** More than 50% of students with known asthma have a plan on file.

▪ **Gold:** More than 75% of students with known asthma have a plan on file.

▪ **Platinum:** More than 90% of students with known asthma have a plan on file.

☐ 4.3. Our school has a standard emergency protocol for students that don't have an Asthma Action Plan.

☐ 4.4. Our school staff maintains a positive partnership through effective communication between parents, students, pediatricians, and other primary care providers.

☐ 4.5. Linkages to medical care are made for children in need (i.e. a school social worker or staff provides information about insurance or medical care to families with children in need.)

☐ **Criterion 5 – Asthma Awareness Posters:** Our school displays the recommended posters in one or more of the following high-traffic areas. The recommended posters include:

1. Steps to Follow for an Asthma Episode.

2. Common Asthma Triggers.

• Please indicate where the posters are displayed: Date Complete: _____

☐ Health Room ☐ Main Hallways ☐ Physical Education Room

☐ Cafeteria ☐ Other: _____

☐ **Criterion 6 – Physical Education & Activity Opportunities for Individuals with Asthma:** Students with asthma are given the opportunity to participate in physical education fully, safely, and in accordance with the students' Asthma Action Plan / IHCP. Please check the fulfilled requirements and provide additional details where indicated with “a”.

☐ Our PE teacher(s) participated in ALA's Asthma 101 or other pre-approved program.

*Name of PE Teacher: _____ *Email Address: _____

*Date training completed: _____

☐ Airnow.gov alerts are received and our school has a plan for indoor activities on poor air quality days.

SILVER LEVEL

- ☐ **Criterion 7 – Asthma Self-Management Education for Students:** Students with asthma at our school participated in an age appropriate self-management education program within the past 24 months. Provide additional details where indicated with “**”.

Reminder: The required percent of students with known asthma that participated increases by award level:

- *Silver: More than 25% of students with known asthma.*
- *Gold: More than 50% of students with known asthma.*
- *Platinum: More than 75% of students with known asthma.*

- ☐ **Elementary:** Students in grades 3-5 with known asthma participated in the American Lung Association’s Open Airways for Schools Program (or comparable pre-approved self management education program) within the last 24 months.
- *Number of students with known asthma (consider those in grades 3-5 only): _____
 - *Number that participated in self-management education: _____
 - *Percent: _____
 - School year education provided: _____

- ☐ **Criterion 8 – Asthma Education for Parents & Caregivers:** Parents and caregivers were provided an opportunity to participate in the ALA’s Asthma 101 Course (or comparable program) within the past 24 months.

- *Date education offered: _____ *Number of Participating Parents: _____
- *Please describe a efforts to educate parents and caregivers about asthma management (i.e. brochure distribution, e-mail/facebook announcements about on-line courses, etc):

GOLD LEVEL

☐ **Criterion 9 – Healthy Schools Environment & Indoor Air Quality (IAQ) Program:** Our school works to systematically identify and minimize asthma triggers at school. Please check the fulfilled requirements and provide additional details where indicated with “a”.

☐ School has a Healthy School Environment / Indoor Air quality Team (Note: This team may align with the existing school wellness or other team if the team addresses indoor and outdoor air quality issues.)

• *Team Representative Name: _____

• *E-Mail Address: _____

• *Date Established: _____

☐ School implements a no idling policy or procedure. *Date Established: _____

☐ School implements a Healthy Schools Environment / Indoor Air Quality Program such as EPA’s Tools for Schools program

PLATINUM LEVEL

☐ **Criterion 10 – Comprehensive Asthma Policy / Procedures and District Level Tobacco Free**

Schools Policy: Our school or district adopted policies/ procedures incorporating requirements for ALL items listed below and our district has a comprehensive tobacco-free schools policy meeting all 12 criteria defined by the Bureau of Tobacco-Free Florida. Copies of all of the policies / procedures must be submitted along with this application.

*Date Comprehensive Asthma Policy Established: _____

*Date Comprehensive District Level Tobacco-Free Schools Policy Established: _____

Please check below to verify all aspects of asthma management are covered in your school’s policy

☐ Asthma Leadership Team

☐ Professional Development for School Nurses and School Staff

☐ Access to Medication

☐ Student Center Asthma Management Support

☐ Awareness Posters

☐ Physical Education Opportunities for Students with Asthma

☐ Self-Management Education for Students with Asthma

☐ Asthma Education for Parents and Caregivers

☐ Healthy School Environment / Indoor Air Quality Program

☐ No Idling

☐ No Tobacco

Attachment D

Florida Asthma-Friendly Schools 2013-2014 Application Guide

Florida Asthma-Friendly Schools 2013-2014 Application Guide



***A Guide to Help Florida Elementary Schools Achieve
An Asthma-Friendly School Recognition***

Developed in collaboration with:



Healthy Children are our Priority!



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<u>I. Introduction</u>

Background & Purpose

Asthma is chronic lung disease that cannot be cured, but can be controlled. For children with asthma, the influence of schools can be life saving! Schools can help by adopting asthma-friendly policies and procedures; coordinating communication with physicians, school personnel, patients, and families to

better serve students with asthma; and providing asthma education for students and staff. Many schools in Florida are already working to minimize the effects of asthma on students and school staff. This guide will help schools assess current asthma management activities and take steps to receive an Asthma-Friendly School Award from the Florida Asthma Coalition.

Two Main Reasons to Improve Asthma Management at Your School

1. When a student's asthma is not under control, it negatively impacts academic performance and limits participation in school activities and sports.
2. Asthma is a leading cause of school absenteeism. In fact, more than 441,000 instructional hours were lost in Florida due to asthma-related absences in the 2011-2012 school year.

The Florida Asthma Coalition's Asthma-Friendly School Recognition Criteria

With the goal of improving student health, attendance, and academic achievement, the Florida Asthma Coalition established a voluntary recognition opportunity to acknowledge schools with exceptional asthma management programs. Coalition partners, including the Florida School Health Association, American Lung Association in Florida, Florida Association of School Nurses, Coordinated School Health Partnership, and the Florida Association of School Administrators, defined four levels of recognition (Bronze, Silver, Gold, and Platinum) based on national, evidence-based guidelines. The most basic and essential activities fall under the Bronze level. Successive recognition levels include additional activities and require more effort, resulting in progressively stronger programs and culminating in a Platinum level recognition. The recognition levels represent points of progress toward the goal of improved asthma management, because every small step makes a difference! A summary of the criteria for each award level is provided below.

Bronze

1. A school based Asthma Leadership Team is established (may align with an existing health team)
2. School nurses, faculty, and staff participate in asthma training at least every other school year

Percentage of participants increases by award level:

Award Level	Bronze	Silver	Gold	Platinum
Required Percentage	More than 25%	More than 50%	More than 75%	More than 90%

3. School ensures immediate access to asthma medications per FL statute
4. School provides student centered asthma management support (includes identifying children with asthma at the beginning of the school year and having asthma action plans on file for students with known asthma)

Percentage of children with asthma with an asthma action plan increases by award level:

Award Level	Bronze	Silver	Gold	Platinum
Required Percentage	More than 25%	More than 50%	More than 75%	More than 90%

5. School posts asthma posters in high-traffic areas
6. Physical education and activity opportunities meet needs of children with asthma

Silver: All above and...

7. School works with community partners to provide self-management education to students with asthma, such as the American Lung Association's Open Airways for Schools program.

Percentage of Students with Known Asthma who Received

Self-Management Education in the Past 2 School Years increases by award level:

Award Level	Silver	Gold	Platinum
-------------	--------	------	----------

- | | Required Percentage | More than 25% | More than 50% | More than 75% |
|---|---------------------|---------------|---------------|---------------|
| 8. School works with community partners to offer and provide education to parents about asthma management | | | | |

Gold: All above and...

- Schools maintain a healthy school environment through implementation of an indoor air quality program, such as the Environmental Protection Agency's Tools for Schools Program.

Platinum: All above and...

- Schools implement comprehensive asthma procedures or a policy which includes the activities listed in criterion 1-9 and schools is in a district with a comprehensive tobacco free school policy meeting all 12 criteria defined by the Bureau of Tobacco Free Florida.

What's In It for Our School?

In addition to helping address the growing statewide burden of asthma, your school will benefit in several ways. First, schools with an effective and systematic approach to asthma management will enable students with asthma to gain and keep control of their disease, resulting in a healthier student body.

When asthma is under control, students are ready and able to learn and less likely to miss school. Studies have also shown an increase in academic performance and test scores. Second, your school will receive recognition from the Florida Asthma Coalition and its partners in the following ways:

- Awarded schools will receive a certificate from the Florida Asthma Coalition recognizing the school, the administration, and members of the school's Asthma Management Team. The certificate will be presented to the school in person by a member of the Florida Asthma Coalition and local partners. The award certificate may be presented during an existing school event or at another time agreed upon by the school administration.
- Schools will be listed on the Florida Asthma Coalition's Asthma-Friendly Schools website along with the date of their award. Press releases can be coordinated if desired.
- School Nurses of awarded schools will receive a certificate and will be recognized at the annual Florida School Health Association (FSHA) and annual Florida Association of School Nurses (FASN) meetings.
- Physical Education Teachers of awarded schools will receive a certificate and will be recognized at the annual Florida Alliance for Health, Physical Education, Recreation, Dance, and Sport (FAHPERDS) meeting.
- Local partners, such as participating hospitals, health plans, non-profit organizations or foundations, may also offer incentives to schools that achieve the award.

How to Use This Resource Guide

This guide was specifically developed to assist schools in improving asthma management practices and achieving the Florida Asthma Coalition's Asthma-Friendly School Award. Detailed information on how to achieve all four levels of recognition (Bronze, Silver, Gold and Platinum) is included. The criteria needed to achieve each level are discussed individually and applicable resources are provided for each criterion.

Resources related to each criterion are categorized as general resources or policy resources. Resources needed to achieve the criteria are highlighted in gray in order to distinguish them from the other more general resources. The policy resources are separated out to assist schools seeking to achieve the highest level of recognition, Platinum, which is awarded to schools that adopt and implement comprehensive asthma policies/procedures.

This guide is not intended to replace the numerous other guides, tool kits, and resources developed by leading experts in school-based asthma management, but rather to draw attention to how Florida schools can use existing resources to implement robust asthma management programs and achieve recognition for their efforts. This guide is designed to help a wide range of school staff to get involved, including administrators/principals, teachers, nurses, health aids, office staff, and others.

This guide is considered a living document to allow for the addition of new resources as they become available. If you identify a useful resource that is not already included, please contribute to this guide by e-mailing the link to the materials to the following e-mail address: Flasthmacoalition@gmail.com. Please note: Links to the full text of materials from outside organizations are included as resources throughout. While we provide these links for your convenience, their content does not necessarily reflect the opinion of the Florida Asthma Coalition or participating partners.

Evidence Base for Clinical Management and National Guidelines for School-Based Asthma Management

When undertaking efforts to improve existing practices or establish new initiatives, schools must consider the effectiveness of the proposed effort in the context of available resources, and other critical factors. Therefore, a brief description of the clinical evidence base for asthma management and an overview of the national guidelines for school-based asthma management are presented below.

Evidence-based guidance for asthma management from a clinical perspective is found in the *Expert Panel Report 3 (EPR-3) Summary Report 2007: Guidelines for the Diagnosis and Management of Asthma*.¹ These guidelines, developed by the National Asthma Education and Prevention Program (NAEPP), define four evidence-based components of asthma care.

- 1) Assessing and monitoring asthma severity and asthma control
- 2) Education for a partnership in care
- 3) Control of environmental factors and co-morbid conditions that affect asthma
- 4) Medications

The importance of clinical partners, communities (including school staff), and families working together to enable individuals with asthma to effectively manage their disease is highlighted in each component. According to the guidelines, “proven school-based programs should be considered for implementation because of their potential to reach large numbers of children who have asthma and provide an asthma-friendly learning environment for students who have asthma.”²

Specific guidance for asthma management in schools has been refined over the years based on evaluation findings and through collaboration between the Department of Health and Human Services, the Department of Education, the American Lung Association and other national and local school partners. The NAEPP, coordinated by the National Heart, Lung and Blood Institute (NHLBI), released *Managing*

*Asthma A Guide for Schools*³ in 2003. This guide identifies how various individuals in the school setting can lead or contribute to school-wide asthma management programs. In 2006, the Centers for Disease Control

¹ Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma Summary Report. National Asthma Education and Prevention Program, 2007. Available online at: <http://www.nhlbi.nih.gov/guidelines/asthma/asthsumm.pdf>

² National Asthma Education and Prevention Program, Third Expert Panel on the Diagnosis and Management of Asthma. Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. Bethesda (MD): National Heart, Lung, and Blood Institute (US); 2007 Aug. Section 3, Component 2: Education for a Partnership in Asthma Care. Available online at: <http://www.ncbi.nlm.nih.gov/books/NBK7239/>

³ Managing Asthma, A Guide for Schools. National Asthma Education and Prevention Program. 2003. Available online at: http://www.nhlbi.nih.gov/health/prof/lung/asthma/asth_sch.pdf

and Prevention (CDC) built on this guidance when they released an additional document: [*Strategies for Addressing Asthma within a Coordinated School Health Program*](#).⁴ The CDC guide connects the asthma guidelines and the NAEPP recommendations to six specific asthma goals and aligns the goals with the well known tenants of a coordinated school health approach.

Building on these resources and findings, the American Lung Association (ALA), in partnership with the CDC, conducted a pilot test of core school-based strategies and released the comprehensive [*Asthma-Friendly Schools Initiative Toolkit*](#). The information and resources provided in the ALA toolkit are based on real-life examples that have been implemented in schools throughout the United States. The ALA Toolkit provides approaches that can and should be customized depending on local variables, priorities, and current situations. References to specific sections of this toolkit will be provided throughout this document.

II. Earning the Florida Asthma-Friendly School Recognition

This section includes guidance for completing each criterion and award level. The criterion are listed in order and labeled under the respective award level (Bronze, Silver, Gold and Platinum). Each level builds on the previous level, to encourage sustained implementation and ongoing improvement. The levels create an opportunity for schools to achieve one at a time, or several at once. For example a school may achieve bronze recognition during the fall semester and gold by the end of the school year. Another school may plan ahead to achieve additional levels of recognition in a following school year.

Schools should apply for recognition as soon as the criteria for a specific level are completed. Applying for recognition is simple using the Asthma-Friendly School Recognition Application. Additional information about the application process is provided in the next section, called "Applying for Recognition".

BRONZE Level Recognition: Criterion 1-6

The six bronze level criteria are the foundation to all other levels of recognition. These criteria represent the core of any school based asthma management program. Schools may find it helpful to achieve them in the order that they are presented, but this is not a requirement.

BRONZE 1. Asthma Leadership Team

To achieve criterion number 1, schools must establish an Asthma Leadership Team and designate a leader for that team, the "Asthma Champion". The success of a school-based asthma management effort is strongly linked to having the right people to plan, lead, and monitor the effort. It is important to get administrative buy-in and then build a team of enthusiastic people to support the initiative.

⁴ Strategies for Addressing Asthma Within a Coordinated School Health Program. Centers for Disease Control and Prevention. 2006. Available online at: <http://www.cdc.gov/HealthyYouth/asthma/pdf/strategies.pdf>

Purpose of the Asthma Leadership Team and Role of the Asthma Champion

The purpose of the Asthma Leadership Team is to assess current efforts, conduct planning for improvement, and monitor asthma management activities at the school on a continual basis. Creating and sustaining an asthma-friendly school effort is a long-term proposition. The Asthma Leadership Team will provide the creative and resourceful thought, cooperation, and facilitate action among the range of individuals and organizations needed to achieve success. Identifying a school based asthma champion is frequently cited in the literature as key to becoming a more asthma-friendly school.⁵ Members of the Asthma Leadership Team will have multiple responsibilities, therefore it is critical that one leader, or champion, is clearly defined to ensure and facilitate ongoing communication, implementation, and system improvement.

Step 1: Sign up for an Asthma-Friendly School Mentor

The first step in establishing your school's asthma leadership team is signing for an Asthma-Friendly School Mentor. Asthma-Friendly School Mentors are located across Florida and are available to answer questions or provide support and technical assistance as your Asthma Leadership Team works through the application process. Mentors are trained on the Asthma-Friendly School criteria and are familiar with the evidence-based clinical asthma guidelines and tools for school-based asthma management. Click the following link to sign-up for a mentor: <http://www.surveymonkey.com/s/AsthmaFriendlySchoolSignUp>

Schools are encouraged to have their Asthma Leadership Team overlap or align with an existing school wellness team or healthy school team. In addition, consider making the Asthma Leadership Team part of an existing committee that is required by schools, such as the safety committee of the School Advisory Council (SAC). If possible, have your team made up of volunteers who have commitment to the cause, rather than those who are appointed. Types of individuals to invite to the Asthma Leadership Team include:

- | | | |
|---|------------------------------|-----------------------------|
| ● Parent of a child with asthma | ● Local clinicians | ● Physical Educator |
| ● Students | ● Pulmonologist or Allergist | ● School Social Worker |
| ● School Advisory Council (SAC) member | ● Respiratory Therapist | ● School Psychologist |
| ● District Health or Wellness Coordinator | ● Certified Asthma Educator | ● Teachers |
| ● School Wellness Coordinator | ● Administrator | ● School Counselor |
| ● Health department personnel | ● PTA Representative | ● Support Staff |
| | ● Nurse | ● American Lung Association |
| | ● Health Educator | |

⁵ Wheeler, L. S., Merkle, S. L., Gerald, L. B., and Taggart, V. S. Managing Asthma in Schools: Lessons Learned and Recommendations. *Journal of School Health*. 2006. 76: 340-344.

The **school administrator**, (principal or assistant principal) is one of the most important members or advisors to a school Asthma Leadership Team. The administrator is vital to team success because he or she provides permission to follow through on team initiatives and may provide your team with time to meet during regularly scheduled meetings, shortened days, etc. Administrators can become great champions when they clearly understand the disease's impact on attendance and academic achievement, and recognize the opportunity for staff development, parent involvement, and safe school environments.⁶

Using Data to Gain and Maintain Support

Several studies have shown the value of using data to document the need for asthma education among students and staff. Consider gathering and presenting the types of data below (when available) to engage new team members, including the administrator:

- Number and percent of students with asthma in the school.
- Number of days of absenteeism for students with asthma.
 - Although schools don't typically track the reason for absences, a comparison between the average number of school day absenteeism for students with asthma compared to the average number of absences for students that do not have asthma can tell a great deal about the possible impact of the disease on attendance. When asthma is well controlled, students with asthma average the same absentee rates as students without asthma.
- Number of students with asthma medication at school.
- Number of students with permission to carry or self-administrator asthma medication.
- Number of students with asthma action plans on file.
- Number of nurse visits due to asthma symptoms.
- Number of 911 calls or calls to parents for students with asthma.³

These data points will also be useful for monitoring and evaluating improvements in asthma outcomes based on the overall asthma-friendly school initiative.

Facilitating Team Meetings and Maintaining Momentum

Once your mentor is assigned and leadership team membership is decided, the team will need to establish a process and timeline for working together. It is important to schedule a meeting with your school administration (principal or assistant principal) to obtain support and ensure collaboration in achieving the desired level of recognition. The first meeting may serve as an orientation to members and help them understand the levels of recognition and the steps needed to achieve them. This is also the time to assess what the school already has in place for asthma management using the Asthma-Friendly Schools Checklist / Application. Once the team knows what is already in place, a timeline for completing the remaining criteria can be established. Using the list of unmet criteria, the team can talk with school staff to determine the order for achieving the remaining criteria.

Deciding on the initial level of recognition that the team would like to achieve and the timeframe for achieving higher levels is also an early priority for the team. For example, a school may take a multi-year approach, with the goal of achieving higher levels of recognition in later school semesters or years. Once the team agrees on the timeline and goals, meetings should be ongoing to identify problems, plan next steps, discuss progress (using data), and ensure consistent implementation.

⁶ Langenfeld, N. A., Bonaio, M. M., and Edmonds, E. O. Garnering Administrative Support for School-Based Asthma Education Programs. *Journal of School Health*. 2006. 76: 250-254.

General Resources

- **How Asthma Friendly is Your School?** A checklist from the National Heart Lung and Blood Institute. <http://www.nhlbi.nih.gov/health/public/lung/asthma/friendly.pdf>
- **American Association of School Administrators: Asthma Communication Toolkit.** This site includes resources for communicating the benefits of asthma management and building partnerships with school administrators, superintendents and school boards. <http://aasa.org/astmatoolkit.aspx>
- **Charting Your Schools Course to Wellness: Creating a Healthy School Team:** A resource from the Florida Department of Education. <http://www.fldoe.org/BII/CSHP/pdf/WellnessGuide.pdf>
- **National Asthma Control Initiative: Making Asthma a Priority for Schools and Childcare Centers**
<http://www.nhlbi.nih.gov/health/prof/lung/asthma/naci/audiences/schools-childcare.htm>
- **School Asthma Education Slide Set:** This two-part slide presentation on the NHLBI/NAEPP Web site offers background information about the growing problem of asthma in the U.S., what asthma is, what school staff should know about helping students to manage their asthma, including triggers and warning signs of asthma episodes. It can be used to help motivate and orient new members of the asthma-friendly school team.
http://hin.nhlbi.nih.gov/naepp_slides/menu.htm
- **School Health Index:** This Self-Assessment & Planning Guide enables schools to:
 - Identify strengths and weaknesses of health and safety policies and programs
 - Develop an action plan for improving student health, which can be incorporated into the School Improvement Plan
 - Engage teachers, parents, students, and the community in promoting health-enhancing behaviors and better health<http://www.cdc.gov/healthyyouth/shi/introduction.htm>
- **Centers for Disease Control and Prevention: Division of Adolescent and School Health Initiating Change: Creating an Asthma-Friendly School:** This site includes pod casts and presentations to help you raise awareness about what it takes to create an asthma-friendly school.
 - <http://www.cdc.gov/HealthyYouth/asthma>
 - <http://www.cdc.gov/HealthyYouth/asthma/creatingafs/>

BRONZE 2. Professional Development for School Nurses, Faculty, and Staff on Asthma Management

To achieve criterion number 2, school nurses need to have participated in a recommended asthma education program (free online trainings listed below) that aligns with their background, role, and skill sets within the past 24 months. In addition, other school faculty and staff members need to have participated in basic asthma education through the ALA's Asthma 101 course (or other comparable course) within the past 24 months.

2.1 Professional Development for School Nurses

School nurses have a special role in asthma management. In accordance with the *Standards of Practice and Professional Performance for School Nursing*, they provide care to students as well as provide support and education to those around them on asthma management. To support school nurses in their important role, they should be given professional development opportunities that are appropriate to

their nursing training and skill sets. It is recommended that school nurses complete both of the **FREE trainings listed below. However, only one is required to achieve all levels of recognition.**

a. The **Asthma Management and Education** On-line Training from the Asthma and Allergy Foundation of America's (AAFA) is a recommended training for school nurses because it is an interactive web-based course structured around the National Heart, Lung, and Blood Institute's "Four Components of Asthma Management." This **FREE** program consists of 12 self-paced study modules and has been approved for 2 CE hours for nurses and 7 CRCE hours for respiratory therapists. The training includes information on:

- Assessment and monitoring
- Control of environmental factors
- Pharmacologic management
- Patient education

Follow the instructions below to access the Asthma Management and Education On-line Training

- 1) Go to www.aafa.org and click the "Education" tab at the top of the page.
- 2) Next select "Health Professionals" from the left-hand menu.
- 3) The first listing is the **FREE Asthma Management and Education Online** program. Click "**More >>**" to go to the program's main webpage for step by-step instructions to register and how to get your CE certificate.
- 4) When registering for the course, be sure to enter **AAFA** as the organization code and **FL-DOH** as the group code.

You can also download this instructional flyer to share with your colleagues or for future reference: <http://www.floridahhealth.gov/diseases-and-conditions/asthma/documents/aafa-training.pdf>

b. **School Nurse Online-Module from "Teaming up for Asthma Control" and the Children's Hospital - University of Missouri Health Care.** This free online training program provides school nurses with a 2-hour web-based Asthma Best Practices course utilizing the Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma (EPR3-2007) and provides clear, evidence-based approaches for improving asthma care. Several references are made to Missouri asthma statistics and guidelines, however, the other information is fully relevant to Florida school nurses.

<http://video.espn.tv/player.php?p=780240&o>

2.2 Professional Development for School Faculty and Staff

Faculty and staff training is critical for effective asthma management in Florida schools. The ALA's Asthma 101 course provides faculty and staff with the knowledge to support students with asthma and to prevent and respond to asthma emergencies. For the bronze award, more than 25% of school faculty and staff must have participated in an Asthma 101 program (or comparable approved course) within the past 24 months. Each subsequent award level requires that a greater percentage of faculty and staff participate. Please note the levels in the table below.

Percentage of Faculty and Staff who Received Asthma Education in the Past 2 Years				
Award Level	Bronze	Silver	Gold	Platinum
Required Percentage	More than 25%	More than 50%	More than 75%	More than 75%

All school faculty and staff will benefit greatly from this type of general asthma education. Participating staff should include school health services staff, teachers, physical education teachers, coaches, cafeteria workers, bus drivers, administrators, playground supervisors - anyone who may be the adult

first identifying and responding to an asthma episode. Staff training should focus on asthma basics, emergency response, and trigger management. Other important topics for consideration in staff asthma training include information about school, district, and state policies, legal issues such as the Family Educational Rights and Privacy Act and “[Section 504](#)” (of the Rehabilitation act of 1973), and emergency protocols. This general education will complement the one-on-one training and guidance provided by school nurses as part of the delegation of care.

The American Lung Association’s Asthma 101 program is recommended for all school staff because it is an evidence-based, evaluated curriculum that meets the needs of adult learners and covers knowledge areas that are critical safeguards to preventing asthma crises at your school. This program is delivered in a one time 60 to 90 minute session and prepares faculty and staff to support students with asthma and improves their confidence in dealing with and preventing asthma-related incidents at school.

A free On-line version of ALA’s Asthma 101 is available here:

<http://asthma.files.wordpress.com/2013/11/asthma101-instructions.pdf>

Free or low cost in person trainings may be available. Call **1-800-LUNGUSA** to reach your local American Lung Association office and discuss program delivery options.

General Resources

- **Asthma Control: Are You Doing YOUR Part? An Update for School Nurses in School-based Asthma Management:** This webinar provides school nurses with information on the six guidelines-based priority messages from the NAEPP’s Guidelines Implementation Panel (GIP) Report, as well as advances in school-based asthma management and techniques to overcome barriers to controlling asthma in the school setting. Hosted by Dr. Stephen Conley, the American School Health Association’s (ASHA) Executive Director, the panelists include Dr. Lani Wheeler, Pediatric Asthma Specialist; Dr. Benjamin Francisco, Director of Asthma Ready® Communities; and Deborah Cook, RN, Director of Health Services, Kennett Public Schools, Missouri. <http://www.ashaweb.org/laa/pages/index.cfm?pageid=3423>
- **NAEPP: Asthma Basics for Schools:** These PowerPoint slides provide updated information about the problem of asthma among school-age youth, the causes, signs and symptoms of asthma, the impact of asthma on student learning, asthma triggers, the control of asthma, assessing how asthma-friendly is your school, and how to handle an asthma episode. http://rover.nhlbi.nih.gov/health/prof/lung/asthma/basics_schools/

Policy Resources

- **ALA’s Asthma-Friendly School Toolkit:** <http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/educate-school-staff.pdf>
Includes the following:
 - Background on the need for school staff education,
 - A sample district policy requiring asthma education,
 - Michigan State Board of Education’s Policy on the Management of Asthma in Schools,
 - Sample letter to school districts about the need for asthma education, and
 - Outlines for presentations to PTA/PTO or School Board and Administrators.

BRONZE 3. Access to Asthma Medication

To achieve criterion number three, schools must ensure students with asthma have immediate access to appropriate medications before and during events. According to Florida State Statute Title XLVIII K 20-1002.20(3) (h) schools must have a policy or process that enables students with parent and physician approval to carry and self-administer metered dose inhalers.

Florida Self-Administration Statute:

http://flasthma.files.wordpress.com/2013/11/flastatute_1002-20-inhaleruse.pdf

Your school's plan for medication management and administration must be in compliance with these state regulations *and* nursing practice standards. Having a plan will help ensure students have **immediate** access to all medications as approved by the pediatrician/primary care provider and parents, regardless of the availability of the school nurse. This includes self-carry and self-administration of medication as appropriate.

Access to “quick-relief” or “rescue” medications is critical, as these will immediately open the airways during an asthma episode. **The longer it takes to administer quick-relief medications, the worse the episode may become.** Assuring immediate access to medications will help prevent asthma emergencies by allowing students to manage their asthma as their physicians prescribe. The school is responsible for having a plan or process that assures true immediate access. For example, medications cannot necessarily be locked in the school nurse's desk, with only the nurse and a few staff members' having access to the medications. Such a situation could result in a lack of access to the medication in an emergency, should those few individuals not be in the school or available at the time.

General Resources

- **ALA's Asthma-Friendly School Initiative Toolkit: Assure Immediate Access to Medications as Prescribed.** This section includes a discussion of an asthma management plan and provides a sample Self-Carry/Self-Administration Form and a Sample Self-Carry/Self-Administration Contract between a student and a school.
<http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/assure-access-to-medications.pdf>
- **The National Heart, Lung and Blood Institutes Guidelines: When Should Students with Asthma or Allergies Carry and Self-Administer Emergency Medications at School?**
http://www.nhlbi.nih.gov/health/prof/lung/asthma/emerg_med.htm

Policy Resources

- **National Association of School Nurses: Position Paper on Self Administration of Rescue Inhalers in the School Setting (2011):**
<http://www.nasn.org/PolicyAdvocacy/PositionPapersandReports/NASNIssueBriefsFullView/tabid/445/smId/853/ArticleID/122/Default.aspx>
- **ALA's Asthma-Friendly School Initiative Toolkit: Sample School Medication Policy (Page 135)**
<http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/assure-access-to-medications.pdf>

BRONZE 4. Student Centered Asthma Management Support

Providing student centered asthma support involves collaboration between all school staff with the leadership of the school nurse. To achieve criterion number four, schools must carryout the following five actions / processes – many of which are already part of their routine school health services. School nurses are at the center of providing student health care services, but they can't do it alone. Nurses carry out activities in accordance with the Standards of Practice and Professional Performance for School Nursing and in accordance with the Florida Department of Health's Guidelines for the Delegation of Care for Students with Asthma. By carrying out the activities described below, school nurses, individuals delegated to provide care, and other school faculty and staff can be very effective in helping children with asthma manage and control their symptoms.

4.1 Identify and track students with asthma.

4.2 Have an Asthma Action Plan on file for students with an asthma diagnosis, or known asthma. The required percentage of students with Asthma Action Plans on file increases with the increasing award levels (see below).

4.3 Have a standard emergency protocol for students that don't have an Asthma Action Plan.

4.4 Maintain a positive partnership between school staff, parents, students, pediatricians, and other primary care providers.

4.5 Provide linkages to medical care or insurance for children in need.

4.1. Identify and Track Children with Asthma

It is important for schools to know which students have asthma in order to ensure they have what they need to keep asthma under control and not miss school due to symptoms. The process of identifying students with asthma should be done annually (at minimum) and ideally at the beginning of each school year. Research suggests focusing attention on identifying those students with asthma diagnoses, particularly those who are experiencing symptoms due to uncontrolled asthma. Children with asthma like symptoms that do not have a diagnosis may be referred to a healthcare provider for consultation, but school nurses and staff should be sure to keep focus on students with a diagnosis. The school nurse or delegated staff may consider one or all of the factors below when identifying children with asthma:⁷

- A healthcare provider diagnosis of asthma (including exercise-induced asthma) and current asthma medication prescription
- A provider diagnosis and symptoms in the past 12 months (as reported by parents, nurse visits, or directly by older students)
- A parent report of asthma or wheezing and provider-prescribed asthma medication for recurrent symptoms in the past 12 months
- Students with diagnoses of reactive airway disease, wheezy bronchitis, or similar diagnoses for which an authorized individual has prescribed albuterol or a controller medication treatment
- Students who have any asthma medication or medication orders sent to school

This type of information may be gathered through multiple channels such as annual emergency cards, school entry physical examination forms, medication administration forms, and health room visits. However, there are limitations, such as forms that don't collect information about asthma and poor or lack of reporting by parents or physicians. **Ensure that school health inquiry forms include necessary**

⁷ Wheeler, L. S. and Boyle, S. Attempting to Use a District-Wide Asthma Case Identification System for Asthma Prevalence. *Journal of School Health*. 2006. 76: 219-222.

items so that parents and providers are submitting the necessary information about a student's health. It may take multiple attempts to get the correct information from families and providers; persistence is key.

Nurses often bring up challenges related to children with asthma-like symptoms that don't have a formal asthma diagnoses, and these cases can be cause for concern. Steps should be taken to build relationships with the family and health care provider so that the child can be properly assessed according to the EPR-3 Guidelines. It should be noted that while there are several types of programs to identify undiagnosed children with symptoms of asthma, CDC and NHLBI/NAEPP do not recommend conducting mass school-based asthma screening (with spirometry) or mass case detection (with symptom questionnaires) in most schools. These programs can be very costly, and research does not indicate that they make a difference for the students who are identified. Further, they do not meet the World Health Organization or American Academy of Pediatrics criteria for appropriate school screening programs.⁸ These programs also frequently divert limited resources away from students who need them most help -- those with uncontrolled asthma.

4.2. Have an Asthma Action Plan on File for Students with Asthma (Note: Some students may also require an Individual Health Care Plans (IHPs) which can incorporate Asthma Action Plans)

Once students with asthma are identified as discussed above, schools can focus attention on obtaining Asthma Action Plans, developing Individual Health Care Plans (if needed) and tracking students with asthma to make sure their asthma is under control. All are discussed in more detail below.

Asthma Action Plans

All students with known asthma must have an asthma action plan on file at school. Faculty, including physical education teachers, and other school staff that interact with the child frequent should have a copy or should have quick access to this plan in case of an emergency. Sample plans can be found via the following link:

Sample Asthma Action Plans in multiple languages are available here:

<http://www.floridapublichealth.gov/diseases-and-conditions/asthma/resources.html#AAP>

An Asthma Action Plan is a written plan to help monitor and control asthma. It is typically developed by the doctor or primary care provider with input from the parents. The Asthma Action Plan shows the student's daily asthma treatment plan, such as what kind of medicines the student should take, specific doses, and when to take them. If a doctor prescribes medicine for the student to take every day (also known as controller medicine), it is because the student experiences asthma symptoms too often. The student must take the medicine every day to stay well, even on days they are not experiencing any symptoms. Daily medicines won't prevent every asthma attack but if they are used every day, the student won't have attacks as often. The Asthma Action Plan should also describe the student's asthma triggers and provide instructions for how to handle worsening asthma symptoms or episodes – including when to call the parents and when to call 911.

⁸ Wheeler, L. S. and Boyle, S. Attempting to Use a District-Wide Asthma Case Identification System for Asthma Prevalence. *Journal of School Health*. 2006. 76: 219-222.

The required percentage of students with Asthma Action Plans on file increases with the increasing award levels. The required percentages for each level are shown in the following table.

Percentage of Students with Known Asthma with Asthma Action Plans on File				
Award Level	Bronze	Silver	Gold	Platinum
Required Percentage	More than 25%	More than 50%	More than 75%	More than 90%

If an Asthma Action Plan is not already on file for students with diagnosed asthma, school nurse or delegated staff should connect with parents (in person, on the phone, or through a letter home) asking for their assistance in obtaining Asthma Action Plan from their child's doctor. In some instances, the school may consider requesting authorization from the parent to contact the child's doctor directly. Some schools do this at the beginning of each school year when they collect information about the child's health and or emergency information card. Keep in mind that confidentiality laws (HIPAA, FERPA, and Florida statute) require authorization to contact the child's doctor from the parent be in writing and kept on file with the child's records. If the child does not have a healthcare provider, this is an opportunity to help connect a family to local resources, such as a federally qualified health center or other community clinics. Also, see 4.3 below.

A Note about Individual Health Care Plans and Section 504

School nurses follow school, district, state, and federal guidelines in developing Individual Health Care Plans (IHCPs), Emergency Plans, and carrying out other school health services. Per federal, state and local guidelines, the school nurse's care plan documents a student's health management needs and addresses how those needs will be met at school, including delegation of care. Asthma Action Plans should be incorporated by reference into these plans. It is also important to note that school health services are a related service under the Individuals With Disabilities Education Act (IDEA), Section 504 of the Rehabilitation Act of 1973 (Section 504), and Title II of the Americans With Disabilities Act (ADA). School health services must be provided to individual students if indicated on the student's Individualized Education Program (IEP) under the IDEA, or if deemed necessary in providing a free, appropriate public education to students who are covered by Section 504 and Title II of the ADA. Not all students with asthma are covered by the IDEA. Students who experience difficulty breathing at school because of asthma may have a disability under Section 504 and Title II, which may qualify them to receive services under these laws. With respect to students who are covered under one or more of these laws, the individual situation of any particular student with asthma will affect what services are legally required for that particular student. For more information about these laws, please contact the [U.S. Department of Education's Office of Civil Rights](#).

4.3. Standardized Emergency Protocol for Children who don't have an Asthma Action Plan

School wide standardized emergency protocols can be used for those with asthma who don't have their own Asthma Action Plan or undiagnosed students who develop respiratory distress unexpectedly. The Florida Department of Health's Bureau of Emergency Medical Services released the [2011 Florida Edition of the Emergency Guidelines for Schools](#). These guidelines include specific emergency protocol for children with asthma or respiratory distress. To Request a copy of the Emergency Guidelines for Schools, 2011 Florida Edition in PDF format, please contact Melissa Keahey, EMSC Program Manager at 850-245-4440 ext. 2686.

4.4. Maintain a Positive Partnership between School Staff, Parents, Students, Pediatricians, and other Primary Care Providers

Managing asthma takes teamwork. A positive partnership between school staff, parents, students, pediatricians, and other primary care providers must be maintained to support proper asthma management. It is essential that there is good communication between school staff, parents, and medical professionals. As discussed above, school staff should check in with parents and family members frequently to get updates regarding their child's medication or treatment as described in the Asthma Action Plan. Communicate with parents or guardians and healthcare providers (with parental permission) about acute episodes that occur at school, if any, and about changes in students' health status to track asthma control away from school. Discuss situations of suspected undiagnosed or poorly controlled asthma with the students, parents, or guardians, and **suggest referral to their physician** for a proper diagnosis or a treatment update. The Asthma Control Test™ is a resource that school staff may find valuable: <http://www.asthma.com/resources/asthma-control-test.html>

4.5. Provide Linkages to Medical Care or Insurance for Children in Need

In addition, schools must continue working to provide linkages to medical care or insurance for children in need. Managing asthma requires consistent care, therefore when lack of a medical provider or health insurance stands in the way of that care, schools are encouraged to work with families to make connections to resources such as KidCare, Medicaid, or other healthcare services in the community such as those provided through a Federally Qualified Health Center, a non-profit organization such as the American Lung Association, or other resource like a pharmaceutical company that can provide free or reduced cost medications.

General Resources

- **American Academy of Pediatrics (AAP) Schooled in Asthma Website**
<http://www2.aap.org/schooledinasthma/tools.htm> The site includes the following:
 - A.S.T.H.M.A. Form (a communication form to obtain an asthma history based on symptoms both at home and school, as well as an opportunity for the physician to receive the school contact information for their files)
 - Dear Doctor Letter (a communication tool for nurses when they notice a need for physician involvement / input when managing a child's asthma in school):
 - HIPAA/FERPA Authorization Form
 - Asthma Encounter Form and Asthma Action Plan
- **Top Ten Tips on School-based Asthma Management for School Nurses:**
http://www.ashaweb.org/files/public/Asthma/Top%20Ten%20Tips%20on%20School%20based%20Asthma_072110.pdf
- **Mastering the Metered Dose Inhaler - a Primer for School Health Nurses:**
<http://highertlogitdownload.s3.amazonaws.com/NAPNAP/83b565aa-94a3-4b29-9bed-16f119340879/UploadedImages/Inhalers%20-%20Corjulo.pdf>
- **National Association of School Nurses (NASN) Asthma Management Resources:**
<http://www.nasn.org/ToolsResources/Asthma>
- **Is the Asthma Action Plan Working? -- A Tool for School Nurse Assessment:**
This brief assessment tool offers guidance to school nurses in determining how well an asthma action plan is working for a student. It includes information about good asthma control and a checklist of assessment items. This tool can also be used by asthma educators, primary care providers and asthma specialists. This is a joint NAEPP and NASN document. It has been

updated with information from EPR-3. The electronic version can be found at

http://www.nhlbi.nih.gov/health/prof/lung/asthma/asth_act_plan_frm.pdf

- **ALA's Asthma Friendly School Initiative Tool Kit: School Health Services Section:**
<http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/identify-and-track-students.pdf>
- **Florida Department of State General Records Schedule GS7:**
http://dis.dos.state.fl.us/barm/GenSchedules/GS7_Updates.cfm
- **Suggested Emergency Nursing Protocol for Students with Asthma Symptoms Who Don't have a Personal Asthma Action Plan: A resource from the National Asthma Education and Prevention Program (NAEPP):**
<http://www.ashaweb.org/files/public/Asthma/Management%20of%20Asthma%20Exacerbation%20Students%20Without%20Plan.pdf>

Policy Resources

- **American Lung Association's Guide for Asthma Policy for Housing and Schools:**
 - Asthma Action Policy Sample for Schools: <http://action.lung.org/site/DocServer/school-policy-asthma-action-plan-sample.pdf>
 - Sample Field Trip Medication Policy for Schools:
<http://action.lung.org/site/DocServer/field-trip-medication-policy-sample.pdf>

BRONZE 5. Awareness Posters

Achieving Criterion number five is as simple as printing and posting the recommended posters in high-traffic areas at the school. This outreach effort aligns with Next Generation Sunshine State Standards: HE.3.C.1.4; HE.4.P.1.2; HE.4.P.1.3. Posters serve as easy reminders to staff, parents, and students about what to do in an emergency and how to avoid asthma triggers. Schools are encouraged to post them in areas that are frequently visited by the target audience. Consider posting near the health room in addition to other high-traffic areas.

1. **Steps to Follow for an Asthma Episode:** This poster was designed to serve as a reminder of "what to do" in an emergency asthma situation. An asthma episode can be a very scary situation that may cause you to forget some key rules to follow during an attack.
http://flasthma.files.wordpress.com/2013/11/steps-to-follow_schools.pdf

2. **Common Asthma Triggers:** Reducing asthma triggers requires ongoing monitoring and action. This poster serves as a reminder about the most important triggers to be aware of and to manage in a school environment.
http://flasthma.files.wordpress.com/2013/11/flcommonasthmatrigger_schools.pdf

Promoting comprehensive understanding among school staff on what to do in an asthma emergency can be carried out in additional ways too. Some schools have gone further by placing the posters in every classroom and distributing free informational materials to staff; other schools have developed cards describing what to do in an asthma emergency that can be carried with staff and faculty identification badges. To learn more about these efforts visit the Public Health Foundation's Teacher Asthma Reference Card link below.

General Resources

- **The Environmental Protection Agency:** Provides many awareness raising materials on their website. Many resources are provided in multiple languages:
 - Asthma Awareness Month (May) planning kit:
http://www.epa.gov/asthma/pdfs/awm/event_planning_kit.pdf
 - Publications (many can be ordered for free):
<http://www.epa.gov/asthma/publications.html>
- **Public Health Foundation's Teacher Asthma Reference Cards:**
http://www.phf.org/programs/PMQ/Pages/Asthma_Demonstration_Projects.aspx

BRONZE 6. Physical Education and Activity

To achieve criterion number six, physical education teachers need to have participated in the Asthma 101 course, <http://nondasthmacoalition.com/schools/Asthma101>. . In addition, physical education teachers must sign-up to receive free air quality alerts so they can make decisions about when to avoid conducting activity outside. They also need to have a plan in place for alternative indoor activities on poor air quality days. Signing up for the alerts is easy from this EPA Website: www.airnow.gov. These steps will help physical education teachers ensure students with asthma are given the opportunity to participate in physical education fully, safely, and in accordance with their Asthma Action Plan/IHCP. These efforts align with the Next Generation Sunshine State Standards PE.3.L.2.3; PE.4.L.1.1; PE.5.r.1.1.

Promoting participation in physical activity and sports among young people is a critical national priority. Children with well-controlled asthma are able to participate and should be encouraged to participate in all forms of physical activity. For those students whose asthma is not well controlled, however, vigorous exercise may cause asthma symptoms. Furthermore, both ozone air pollution (smog) and particle pollution (due to forest fires, prescribed burns, or other sources) can be powerful triggers for students with asthma. Schools must be prepared to limit students' exposure on days with poor outdoor air quality.

The following are recommended in CDC's booklet, *Strategies for Addressing Asthma within a Coordinated School Health Program* and in the ALA's *Asthma-Friendly School's Toolkit*.

- Encourage full participation in physical activities when students are well.
- Provide modified activities as indicated by a student's Asthma Action Plan, 504 Plan, and/or IEP or IHCP.
- Ensure that students have access to preventive medications before activity and immediate access to emergency medications during activity as indicated in the student's Asthma Action Plan.
- Consider modified exercise such as specific, extended warm-up and cool-down periods, adjustments to the type, length, and/or frequency of an activity.

General Resources

- ***Asthma and Physical Activity in the School:*** This document from NHLBI/NAEPP provides comprehensive guidance for physical education teachers and activity monitors.
http://www.nhlbi.nih.gov/health/public/lung/asthma/phv_asth.pdf

- **American Association of School Superintendents and National School Board Association Resource Sheet on Asthma and Physical Activity:**
[http://aasa.org/uploadedFiles/Resources/Toolkits/Other Toolkits/PhysicalActivity.pdf](http://aasa.org/uploadedFiles/Resources/Toolkits/Other%20Toolkits/PhysicalActivity.pdf)
- **Asthma and Physical Activity in the School**, a guide from the NHLBI:
http://www.nhlbi.nih.gov/health/public/lung/asthma/phy_asth.pdf
- **ALA's Asthma-Friendly School Initiative's Tool Kit**
 - Solutions for Physical Education and Recess on High Ozone Days:
<http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/manage-student-exposure.pdf>
 - Sample School Policy for Managing Students' Exposure to Outdoor Air Pollution (Page 243)
- **Breathing Difficulties Related to Physical Activity for Students With Asthma: Exercise-Induced Asthma, Information for coaches, physical education teachers, and trainers (ALA):**
<http://action.lung.org/site/DocServer/breathing-difficulties-students.pdf>
- **The Coach's Clipboard Program: Winning with Asthma:** This free 30-minute educational program encourages those involved in youth sports, especially coaches, to better understand how to help athletes properly manage their asthma during athletic events. It teaches proper medication management, ways to prevent exercise-induced asthma, steps to take when athletes are experiencing asthma attacks, asthma triggers – what they are and what can be done to avoid them, and guidelines specific for cold-weather sports. The program was developed as a collaborative effort of the Minnesota and Utah Departments of Health through funding from CDC asthma cooperative agreements and the Minnesota Steps Initiative.
<http://www.winningwithasthma.org>
- **Ready? Set? Go With Asthma! Exercise-Induced Asthma:** Defines and describes exercise-induced asthma, identifies common asthma triggers, such as exercise, and distinguishes early warning signs of asthma attacks. Based on the NAEPP's *Expert Panel Report III: Guidelines for the Diagnosis and Management of Asthma*. Developed by the Asthma and Allergy Foundation of America with funding from the American Legion Child Welfare Foundation, Inc.
<http://aafa.org/display.cfm?id=4&sub=82&cont=703>

Policy Resources

- **ALA's Asthma-Friendly School Initiative's Tool Kit Sample School Policy for Managing Students' Exposure to Outdoor Air Pollution (Page 243)** <http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/manage-student-exposure.pdf>

SILVER: All Bronze Criteria and Criterion 7 & 8

After completing the activities above for bronze level recognition, schools are encouraged to take extra steps to achieve silver recognition status by coordinating the provision of self-management education for students with asthma and providing general asthma education opportunities for parents. In addition, schools must reach the levels shown below for criterion 2 and 4.

Required Levels of Achievement for Silver Award

Criterion 2: More than 50% of faculty and staff received asthma education in the past two years.

Criterion 4: More than 50% of students with known asthma have Asthma Action Plans on file.

SILVER 7. Student Self-Management Education

To achieve criterion number seven, schools must enable students with asthma to participate in a self-management education program. ALA's Open Airways for Schools Program is the recommended self-management education program for children in grades 3-5. Self-management education is a critical component of care for children and has been shown to be effective in the school-based setting.^{9, 10} It is most successful when provided in conjunction with a comprehensive school-based asthma program, including all of the activities included in the bronze level criteria. Participation by students with asthma helps them understand their disease and maintain their health, which can minimize absenteeism, thereby improving students' ability to learn. Provision of this type of education meets several of the Next Generation Sunshine State Standards, including HE.3.C.1.1; HE.3.C.1.4; HE.4.B.3.4; HE.4.B.4.1; HE.4.P.1.2; HE.4.P.1.3.

For silver level recognition, more than 25% of students with known asthma must have participated in self-management education within the past 2 school years. This increases for additional recognition levels as shown below.

Percentage of Students with Known Asthma who Received Self-Management Education in the Past 2 School Years			
Award Level	Silver	Gold	Platinum
Required Percentage	More than 25%	More than 50%	More than 75%

About the Open Airways for Schools Program

To schedule an Open Airways for Schools or Asthma 101 Program at your school, contact your local ALA office by calling 1-800-LUNGUSA. The Open Airways for School Program is a major ALA initiative to help children in elementary schools (aged 8-11 years) better manage their asthma. The program is school-based, designed by physicians, and operates in a variety of elementary school settings throughout the United States. It is comprised of six, forty-five minute sessions, but is sometimes condensed into four, one-hour sessions to accommodate certain school schedules. OAS was designed to be a child-centered educational program. It is based on the premise that an educational program would increase parents' and children's ability to manage asthma and thus reduce the number of emergency room visits, hospitalizations, missed school days, and disruptions in family life that are caused by asthma. To address the parental component, supplemental materials are sent home with the student after each session to review with their parent the lessons they learned in that day's class. Additional information is provided on the following webpages.

⁹ Evans, D., Clark, N. M., Feldman, C. H., Rips, J., Kaplan, D., Levinson, M. J., Wasilewski, Y., Levin, B., and Mellings, R. B. A school health education program for children with asthma aged 8-11 years. *Health Education Quarterly*. 1987. 14(3): 267-279.

¹⁰ Kaplan, D. L., Rips, J. L., Clark, N. M., Evans, D., Wasilewski, Y., and Feldman, C. H. Transferring a Clinic-based Health Education Program for Children with Asthma to a School Setting. *Journal of School Health*. 2009. 56: 267-271.

- o <http://www.lung.org/associations/states/florida/educational-programs/open-airways-for-schools/open-airways-for-schools.html>
- o <http://www.cdc.gov/asthma/interventions/openairway.htm>

General Resources

- **ALA's Asthma-Friendly School's Initiative Took Kit:** The student education section includes sample letters home to parents about asthma education. <http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/educate-students.pdf>

Policy Resources

- **American Lung Association's Guide to Asthma Policy in Housing and Schools:**
<http://www.lung.org/lung-disease/asthma/becoming-an-advocate/guide-to-asthma-policy-for-housing-and-schools/asthma-policy-for-schools.html>

SILVER 8. Parent / Caregiver Education

To achieve criterion number eight, school staff must provide opportunities for parents and caregivers to participate in a general asthma education program at least once within the past 24 months. The American Lung Association's Asthma 101 program is recommended because it is a proven, evidence-based program that takes the needs of adult learners into consideration. The on-line Asthma 101 program can be found here: <http://flasthma.files.wordpress.com/2013/11/asthma101-instructions.pdf>

As previously discussed, asthma control often requires a robust partnership between parents, school staff, physicians, pediatricians, and other primary care providers. School staff have an important relationship with parents and can help empower parents to learn more about asthma by inviting them to participate in general asthma education sessions. Schools wanting to do more can take advantage of the plethora of additional education materials in multiple languages targeting parents available through the following websites.

General Resources

- **Environmental Protection Agency:** This site includes multiple education resources, including free brochures and health education materials that schools may consider distributing to parents at least once per year. The following brochures can be downloaded and printed or ordered for free. www.epa.gov.
 - **Help Your Child Gain Control Over Asthma:**
http://www.epa.gov/asthma/pdfs/ll_asthma_brochure.pdf
 - **Asthma and Outdoor Air Pollution:**
http://www.epa.gov/airnow/health-prof/Asthma_Flyer_Final.pdf
 - **Dusty the Asthma Goldfish and his Asthma Triggers Fun book:**
http://www.epa.gov/asthma/pdfs/dustythegoldfish_en.pdf
 - **Asthma Prevention Tri-fold:**
http://www.epa.gov/asthma/pdfs/asthma_prevention_trifold_en.pdf

GOLD: All Bronze and Silver Criteria and Criterion 9

After completing the activities above for bronze and silver level recognition, schools are encouraged to take an extra step to achieve gold recognition status by ensuring a healthy school environment as discussed below. In addition, schools must reach the levels shown below for criterion 2, 4, and 7.

Required Levels of Achievement for Gold Award
Criterion 2: More than 75% of faculty and staff received asthma education in the past two years.
Criterion 4: More than 75% of students with known asthma have Asthma Action Plans on file.
Criterion 7: More than 50% of students with known asthma received self-management education in the past two years.

GOLD 9. Healthy School Environment / Indoor Air Quality (IAQ)

To achieve criterion number 9, schools must have an Indoor Air Quality (IAQ) management plan and an IAQ team that works to promote a healthy school environment (one that minimizes human exposure to indoor and outdoor hazardous chemicals, allergens, irritants, and pollutants). The IAQ team may align with an existing school wellness team or other existing teams that cover indoor and outdoor air quality issues. Many schools in Florida currently use the EPA's Tools for Schools program to guide their IAQ efforts.

Both indoor and outdoor pollutants can be asthma triggers for students and/or school staff. Special attention should be paid to prohibiting tobacco use at all times, preventing indoor air quality triggers by reducing or eliminating allergens and irritants, and use of integrated pest management.

Secondhand smoke can trigger asthma episodes and increase the severity of attacks. Secondhand smoke must be eliminated from the school property, school vehicles, and at school sponsored functions away from school property and facilities if the school system is effectively going to eliminate exposure to this asthma trigger. Promotion of living smoke free and providing smoking cessation services for both students and staff will support them directly as your school or district works to meet policies for a comprehensive tobacco free school or campus. Helping smokers quit will increase the chances that your policy will have fewer violations, and that students and staff will be healthier. Resources are available for free through TobaccoFreeFlorida.com. Promoting students being smoke free aligns with the Next Generation Sunshine State Standards: HE.3.C.1.1; HE.4.B.3.4; HE.4.P.1.2; HE.4.P.1.3.

General Resources

- **The Impact of School Buildings on Student Health and Performance (February 2012):** Jointly released by the McGraw Hill Foundation and the Center for Green Schools, this paper is an accessible account of current research connecting school buildings with student health and performance. <http://centerforgreenschools.org/studies.aspx>

TOBACCO PREVENTION AND CESSATION RESOURCES

- Tobacco-Free Florida: www.TobaccoFreeFlorida.com
- ALA's Asthma-Friendly School Initiative's Tool Kit- Providing Smoking Cessation Services for Students and Staff: <http://www.lung.org/lung-disease/asthma/creating-asthma-friendly->

- [environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/smoking-cessation-services.pdf](http://www.ahectobacco.com/schools-initiative/smoking-cessation-services.pdf)
- **Florida Area Health Education Centers Resources on Tobacco Cessation:**
<http://www.ahectobacco.com/>
- **Florida Statewide Tobacco Prevention Course for School Teachers and Guidance Counselors:**
(Provides 60 teacher in-service credits as approved by your district)
<http://www.tobaccopreventiontraining.org/>
- **CDC, *Guidelines for School Health Programs to Prevent Tobacco Use and Addiction***
<http://www.cdc.gov/mmwr/preview/mmwrhtml/00026213.htm>.
- **National Association of State Boards of Education – *Fit, Healthy, Ready to Learn – Tobacco Chapter*:** http://www.nasbe.org/healthy_schools/FHRL_tobacco_chapter_web.pdf.
- **National School Boards Association, National Consortium on Tobacco Use Prevention through Schools:** <http://www.nsba.org/MainMenu/SchoolHealth/TobaccoConsortium.aspx>.

AIR QUALITY PROGRAM RESOURCES

- **Environmental Protection Agency's Tools for Schools website:** <http://www.epa.gov/iaq/schools>
 - **Recorded EPA Webinars:** <http://www.epa.gov/iaq/schools/webconferences.html>
- **ALA's Asthma Friendly Schools Tool Kit:** Fact Sheet - EPA's Easy-To-Use School Environmental Management Tools (page 213): <http://www.lung.org/lung-disease/asthma/creating-asthma-friendly-environments/asthma-in-schools/asthma-friendly-schools-initiative/about-asthma-friendly-schools-initiative/maintain-healthy-indoor-air.pdf>
- **Indoor Air Quality Manual for Broward County School District:**
<http://www.broward.k12.fl.us/tm/PDF%20IAQ%20Manual.pdf>
- **What's Your IEQ (Indoor Environmental Quality)? A Roadmap to School Indoor Environmental Quality:** Developed by National Education Association's Health Information Network as part of NEA's Online Academy, this 4.5 hour course provides education on how to identify, prevent, and resolve indoor environmental quality (IEQ) issues like mold and moisture problems, chemical exposure, asbestos, radon, and more. The course's design incorporates nationally recognized, research-based standards for online professional development and provides teachers and education support professionals (ESPs) with the opportunity to obtain certificate hours and other professional development credit. A total of 5.56 certificate hours can be earned.
<http://www.neacademy.org/leader-to-leader/whats-your-ieg-a-roadmap-to-school-indoor-environmental-quality.html>
- **Managing Asthma in the School Environment: What National Education Association (NEA) Members Need to Know:** This 1.5 hour course addresses better asthma management while at school. It reviews the causes, signs, and symptoms of asthma; asthma triggers; key elements of asthma control; and strategies for creating asthma-friendly schools. The course design incorporates nationally recognized, research-based standards for online professional development for teachers and education support professionals. A total of 2.5 certificate hours can be earned. Developed by NEA HIN and the Merck Childhood Asthma Network (MCAN).
 - <http://www.neacademy.org/leader-to-leader/managing-asthma-in-the-school-environment-what-nea-members-need-to-know.html>
 - <http://www.neahin.org/health-safety/environmental/managing-asthma-in-the-school.html>

DIESEL POLLUTION PREVENTION & CONTROL RESOURCES

- **EPA National Idle Reduction Campaign:** <http://www.epa.gov/cleanschoolbus/antiidling.htm>
- **Massachusetts Department of Environmental Protection: Best Management Practices for Reducing Diesel Pollution at Schools:** <http://www.mass.gov/dep/air/community/schbusir.htm>

Policy Resources

- **Tobacco Free Florida – Tobacco Free Schools:**
 - <http://www.tobaccofreeflorida.com/Contents-13/Tobacco-Free-Schools-The-Issue/>
- **American Lung Association's Guide to Asthma Policy In Housing and Schools:**
 - **Integrated Pest Management Policy Sample:**
http://action.lung.org/site/DocServer/integrated_pest-mgt-policy-sample.pdf
 - **Carpeting Policy Sample for Districts:**
<http://action.lung.org/site/DocServer/district-policy-carpeting.pdf>
 - **Bus Idling Policy:** <http://action.lung.org/site/DocServer/nh-bus-idling-factsheet.pdf>
 - **Fragrance Free Policy Sample:**
<http://action.lung.org/site/DocServer/fragrance-free-policy-sample-updated.pdf>

PLATINUM: All Bronze, Silver, and Gold Criteria and Criterion 10

After completing the activities above for bronze, silver, and gold level recognition, schools are encouraged to take the final step to achieve the platinum award. Achieving platinum level recognition involves establishing policies and procedures that encompass all criteria in the previous three levels of recognition as well as having a comprehensive tobacco free campus policy. In addition, schools must reach the levels shown below for criterion 2, 4, and 7.

Required Levels of Achievement for Platinum Award	
<u>Criterion 2:</u>	More than 75% of faculty and staff received asthma education in the past two years.
<u>Criterion 4:</u>	More than 90% of students with known asthma have Asthma Action Plans on file.
<u>Criterion 7:</u>	More than 75% of students with known asthma received self-management education in the past two years.

PLATINUM 10. Comprehensive Asthma Policies / Procedures & District Level Comprehensive Tobacco-Free Schools Policy

Policy development and implementation offers one of the greatest opportunities for lasting and sustainable change that support students and staff with asthma. However, policies can take considerable time and effort to establish and may require a multi-year systematic approach.

School Based Asthma Policies

Policies should be specific to each school, or district wide, and must ensure items in criteria 1-9 occur and are monitored at least annually. A copy of the school's policy or procedures document(s) must be submitted with the application for the platinum level award. Policy resources are provided for nearly all of the criteria above under the heading "Policy Resources" below. Use these resources to develop your school or district level policies. Additional general policy information is provided below.

District Level Comprehensive Tobacco-Free Schools Policies

Comprehensive tobacco-free school policies are an important step in building a healthier future for our youth. These policies create a safe and healthy environment for students, faculty, and

staff, while sending a clear message that tobacco use is not a socially acceptable behavior and about the dangers of tobacco use. The Bureau of Tobacco Free Florida identifies [12 criteria](#) for a comprehensive tobacco-free school policy at the district level. Many districts in Florida already meet these criteria. Contact your local School Health Advisory Committee or your local Tobacco Free Partnership to find out more about policy efforts already underway in your district.

To learn more visit:

<http://www.tobaccofreeflorida.com/Contents-13/Tobacco-Free-Schools/>

Policy Resources

- **National Asthma Education and Prevention Program Resolution on Asthma Management at School:** <http://www.nhlbi.nih.gov/health/public/lung/asthma/resolution.htm>
- **American Lung Association's Guide to Asthma Policy in Housing and Schools:** <http://www.lung.org/lung-disease/asthma/becoming-an-advocate/guide-to-asthma-policy-for-housing-and-schools/asthma-policy-for-schools.html>
- **Association of School Administrators – Asthma Wellness:** <http://www.aasa.org/uploadedFiles/Resources/files/AASAAsthmaWellness.pdf>
- **American School Health Association: School Based Asthma Management Resolution (2004):** http://www.ashaweb.org/files/public/Resolutions/School_Based_Asthma.pdf
- **Montana Asthma Program's School Asthma Policy Checklist:** <http://asthamontana.com/wp-content/uploads/2012/05/Assessing-Asthma-Friendly-School-Policies-and-Practices-Checklist.pdf>

III: Applying for Recognition

Seeking recognition is easy once asthma management processes are in place. To complete the **Asthma-Friendly School Application**, school staff or members of the Asthma Leadership Team must provide the information as requested on the form and the school administrator/ principal must provide his or her signature where indicated for verification. For platinum recognition, a copy of the school's asthma policies and procedure are required. Once the application is complete, submit a scanned version and the necessary attachments to FAsthmacoalition@gmail.com.

Your application will be reviewed by members of the Florida Asthma Coalition and you may be contacted to answer additional questions about your activities. Once the application is approved a certificate will be presented and the school will be listed on the Florida Asthma Coalition's website. See page 4 *What's in it for Our School* for more information about the recognition opportunities.

If you have questions about the recognition process, please feel free to e-mail the coalition at FAsthmacoalition@gmail.com.

Attachment E

American Lung Association Asthma 101 Program Instructions



Creating your TRAIN Florida Account

→ It's a New Day in Public Health

Instructions to register for the American Lung Association's Asthma 101 Program and create TRAIN Florida User Account

Note: Please use Sentence Case for all text fields. (Example: John Smith)

Step 1: Go to: [FDOH American Lung Association Asthma 101](#) and click on the Registration tab.

Click on the **Create Account** button. *

**Note to Florida Department of Health employees including County Health Departments: An account has already been created for you using your People First ID as your login name. Do NOT create a new account. Click on the login button and enter your UserID and password. Refer to the following instructions if this is your first time logging into the TRAIN Florida system: [Updating your initial TRAIN Florida Account](#)*

Step 2: Review the TRAIN Policies, and then check the box next to "I agree to these TRAIN Policies". Click the **I Agree** button.



Step 3: Fill in all of the **Required Fields** and any of the relevant **Optional Fields**.

- A. For Login Name please use your "First name.Last name"
Example: John.Smith
- B. Ensure the answer to your secret question is only one word.
- C. Once you are done, click the **Next** button.

Step 4: Click the **Select Groups** button to the right of **State Portal**.

- A. A new window will open. Choose "Florida" from the **Select State** dropdown menu.
- B. This will bring up a **Select Affiliation** dropdown menu. Choose "Florida – General" and click the **Submit** button.

C. You should now see your **Selected Group** listed as: **National/Florida/Florida – General**.
Select the state or territory in which you work, study, or reside - or select "International"
State Portal **Select Groups** **Remove Groups**
Selected Groups
National/Florida/Florida - General

- D. Click the **Next** button to continue.



NOTE: If at any point the system prompts you with the following Security Warning, Always Select "Yes"



Step 5: The system will redirect you to your **Learner Professional Roles** information page.

- A. Please take a minute to review all roles before making your selection.
- B. You may select up to three (3) Professional Roles that best match your profession and select Specialization where available. If the "Other" option is selected, please enter specialization.
- C. Verify your information, and then click the **Next** button.

Step 6: The system will redirect you to your **Learner Work Settings** information page

- A. Please select up to three (3) Work Settings that best fit your work environment. Choose Subcategories where applicable.
- B. Verify your information, and then click the **Next** button.

Step 7: The system will redirect you to your **Demographic Information**.

- A. This area is optional. Complete the information and click the **Next** button.

Step 8: The system will redirect you to your **Learner Professional License** information page

- A. If you hold a professional license, select "Yes" and follow the instructions.
- B. If you do not hold a professional license, select "No".
- C. Verify your information, and then click the **Next** button.

Step 9: You have now created your TRAIN Florida account and registered for Asthma 101. The next step is to complete the Asthma 101 pre-course assessment and watch the presentation.



Creating your TRAIN Florida Account

→ It's a New Day in Public Health

Step 10: When you have finished watching the presentation, complete the assessment and evaluation in order to complete the course. To do so, click the **Current Courses** button. You will be directed to the **My Learning** page. This page gives you access to the course presentation, as well as any assessments or evaluations attached to the course.

Step 11: From the **My Learning** page, click on the **Manage** button. This will take you to the **Course Registration Management** page.

Step 12: From the **Course Registration Management** page, click on the **Completed** button to access the assessment and evaluation.

A pop-up window will open and warn you that if you proceed with the completion of the course that it will be permanently set as completed and sent to your Transcript Tool. It will ask you if you are sure you want to mark the class as Completed. To proceed to the assessment and evaluation and complete the course, you must click OK. Once you click OK in the warning window, the screen will refresh.

Step 13: On the **Course Registration Management** screen, the registration status for the course should now read "Post-Assessment Pending". Click the **Assessment** button.

Step 14: The assessment will open in a new browser window and you will be re-directed to the **Start Assessment** page for your course. Click the **Start Assessment** button and proceed through the course assessment questions as they are presented. After answering each question, click the **Next** button to proceed to the next question. When you are complete your score will be presented. The course status will be changed and you will receive an e-mail from TRAIN confirming your completion.

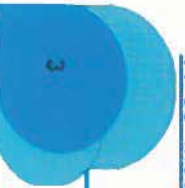
Step 15: Click on the **Close** button to close the assessment. You will then be taken to the **Course Evaluation** page. The evaluation is an anonymous review of the training course that will help the program maintain the quality of future courses. The evaluation is not scored, but must be completed in order to properly complete your training course.

Step 16: To begin the evaluation, click the **Start Evaluation** button. After answering each question, click the **Next** button to proceed to the next question.

Step 17: Click on the **Close** button to close the evaluation. **You have now completed the course!**

References: TRAIN FL – How to Complete a Course:

http://www.floridahealth.gov/AlternateSites/DOH_LMS_Resources/TRAIN_FL_HowToCompleteACourse_Module/TRAIN_FL_HowToCompleteCourse_Guide.pdf



Attachment F

Asthma and Allergy Foundation of America

Free Asthma Management and Education Online Training Instructions



Free CE and CRCE Opportunity

Asthma Management and Education Online Training

from the:



About the Training

This **FREE** program consists of 12 modules of self-paced study and has been approved for **7 CE hours for nurses** and **7 CRCE hours for respiratory therapists**.

The Asthma and Allergy Foundation of America's (AAFA) Asthma Management and Education Online Program is an interactive web-based course structured around the National Heart, Lung, and Blood Institute's "Four Components of Asthma Management." This includes information on:

- assessment and monitoring,
- control of environmental factors,
- pharmacologic management, and
- patient education.



How to Access This Course

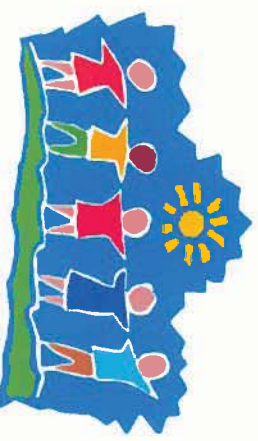
For more information and to access the course, follow the instructions below:


- 1) Go to <http://www.aaafa.org/display.cfm?id=4&sub=79&cont=432>
- 2) Follow the step-by-step instructions to register for the training, being sure to enter **FL-DOH** as the group code and **AAFA** as the organization code.


Attachment G


Asthma Awareness Posters


Top Ten Actions to Reduce Asthma Triggers in the Child Care Setting





- 


1) Dust often with a clean, damp disposable cloth when children are not present
- 


2) Encourage the use of allergen impermeable nap mats or crib/mattress covers and wash bedding in hot water weekly
- 


3) Prohibit pets (particularly furred or feathered pets)
- 


4) Prohibit smoking inside the facility and on the playground
- 

5) Discourage the use of perfumes, scented cleaning products and other fumes
- 

6) Quickly fix leaky plumbing or other sources of excess water
- 

7) Ensure frequent vacuuming of carpet and upholstered furniture at times when the children are not present
- 

8) Store all food in airtight containers, cleaning up all food crumbs or spilled liquids, and properly disposing of garbage and trash
- 

9) Use integrated pest management techniques to get rid of pests (use the least hazardous treatments first and progress to more toxic treatments only as necessary)
- 

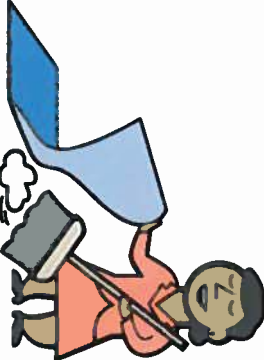



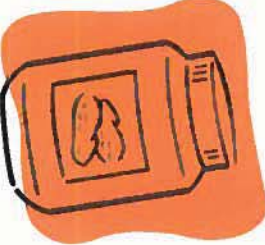
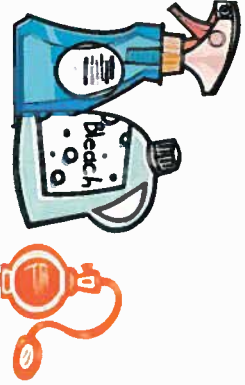


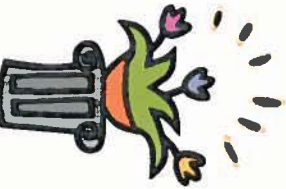


10) Keep children indoors when local weather forecasts predict unhealthy air quality. For Florida air quality information, visit: airnow.gov

Common Asthma Triggers

An asthma trigger is something that causes an asthma attack or episode. Asthma triggers are different from person to person.

Triggers include:




<p>Dust, Mold, and Pollen</p> 	<p>Exercise</p> 	<p>Extreme Emotions (laughing, crying)</p> 
<p>Feathered and Furry Animals and Stuffed Dolls and Toys</p> 	<p>Food Allergies</p> 	
<p>Fumes, Odors, and Strong Scents</p> 	<p>Illness</p> 	<p>Pests and Pesticides</p> 
<p>Pollen</p> 	<p>Tobacco Smoke</p> 	<p>Weather and Air Pollution</p> 


Steps to Follow for an Asthma Episode in the Child Care Setting



EARLY WARNING SIGNS

- Cough, chest hurts, wheezing
- Changes in behavior: unusually tired, not wanting to play, restlessness, trouble sleeping
- An inhaled rescue/reliever drug causes no improvement
- Exposure to known triggers that result in symptoms

ACTIONS TO TAKE

- 1** Stop activity
Help child to an UPRIGHT position
Remove from trigger if possible

- 2** Follow Asthma Action Plan or health care provider's instructions for use of rescue/reliever medication

- 3** Look for improvement

- 4** Document in Medication Record

- 5** Contact the family

- 6** Watch for Late Warning Signs as listed below


LATE WARNING SIGNS of an emergency

- Chest/neck muscles are working hard
- Struggling to breathe
- Trouble walking or talking
- Breathing does not improve or is worse after treatment
- Lips/fingernails are gray or blue

**CALL 911
IMMEDIATELY**

- Follow the Actions to Take listed above
- Watch the child until help arrives

****NEVER LEAVE A CHILD WITH ASTHMA SYMPTOMS UNATTENDED****

Adapted with permission from a tool developed by the Pediatric/Adult Asthma Coalition of New Jersey
information in this publication is not intended to diagnose health problems or take the place of medical advice. For asthma or any medical condition, seek medical advice from your child's or your health care professional.

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Revised: August 2011

