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Introductory Statement

Recognizing the need to increase and promote asthma awareness, the New Mexico Department of Health-Asthma Program (NMDOH-AP) recommends the National Asthma Education and Prevention Program's Resolution on Asthma Management at School from the National Institute of Health-National Heart, Lung, and Blood Institute.

"Asthma affects nearly 5 million children in the United States - about 1 child in every 14. This chronic lung disease causes unnecessary restriction of childhood activities and is a leading cause of school absenteeism. Asthma is controllable, however. With proper treatment and support, children with asthma can lead fully active lives.

The National Asthma Education and Prevention Program (NAEPP) believes that schools should adopt policies for the management of asthma that encourage the active participation of students in the self-management of their condition and allow the most consistent, active participation in all school activities. These policies should allow:

A smoke-free environment for all school activities.

Access to health services supervised by a school nurse. These services should include identification of students with asthma; a written asthma management plan for each student with asthma; appropriate medical equipment; and the support of an adult, as appropriate, to evaluate, monitor, and report on the administration of medication to the parent/guardian and/or health provider.

A written medication policy that allows safe, reliable, and prompt access to medications in the least restrictive way during all school-related activities and self-managed administration of medication (including consideration of allowing students to carry and self-administer medications) consistent with the needs of the individual child and the safety of others.

A school-wide emergency plan for handling severe exacerbations of asthma.

Staff development for all school personnel on school medication policies, emergency procedures, and procedures for communicating health concerns about students.

Development of a supportive and healthy environment that respects the abilities and needs of each student with asthma."

It is the hope and expectation of the NMDOH-AP that school districts will use this manual as a guide to enlist the cooperation of all members of the school community. The sections on Asthma (3), the Student with Asthma (4), and the Asthma Friendly School (5) provide general information useful to all members of the community. Sections 6 - 14 contain more specific information pertinent to individual members of the community. Section 15 lists a variety of helpful resources for everyone's use.

A coordinated effort, as presented by Healthier Schools-New Mexico and illustrated by the yucca and the corn stock models, is essential in promoting a healthy school environment for everyone, especially for student and staff members who are coping with asthma or other respiratory problems. This approach provides a framework for linking health and education. The focus is on the **blossom** that represents the **healthy and successful student**. The **leaves** symbolize the eight components of coordinated school health – daily opportunities schools have to interact with children on health-related issues. The root system is the **nurturing network** that supplies the resources and energy for growth. The **tap root is the family**. The family provides the environment in which children thrive and grow. The other **roots** represent the **responsibilities** that culture, education, public services, media, community, businesses, and others have in fostering healthier students.

New Mexico's Coordinated School Health Model

The eight components of New Mexico's Coordinated School Health include:

Nutrition – The nutrition component supports the availability of healthy food that is the primary building block for each child's physical growth, brain development, and ability to resist disease. Food also affects a child's emotions, sense of well-being, and ability to learn.

Health Education and Life Skills – Health education and life skills, taught by a licensed health education specialist, is the school's instructional program that provides the opportunity for all students to understand and practice concepts related to health promotion and disease prevention.

Physical Education and Activity – Physical education, taught by a licensed physical education specialist, is the school's instructional program that provides the optimal opportunity for all students to learn and develop the skills, knowledge, and attitudes necessary to personally decide to participate in a lifetime of healthful physical activity.

Staff Wellness – Staff wellness promotes the health, safety, and well-being of school staff; the necessary support that maximizes the talents of all individuals; and creates an equitable, accessible, and productive work environment.

Family, School and Community Partnership – Family, school, and community partnership promotes long-term effective partnerships between families, schools, and communities in the planning and implementation of health promotion projects and events both within the school and throughout the community.

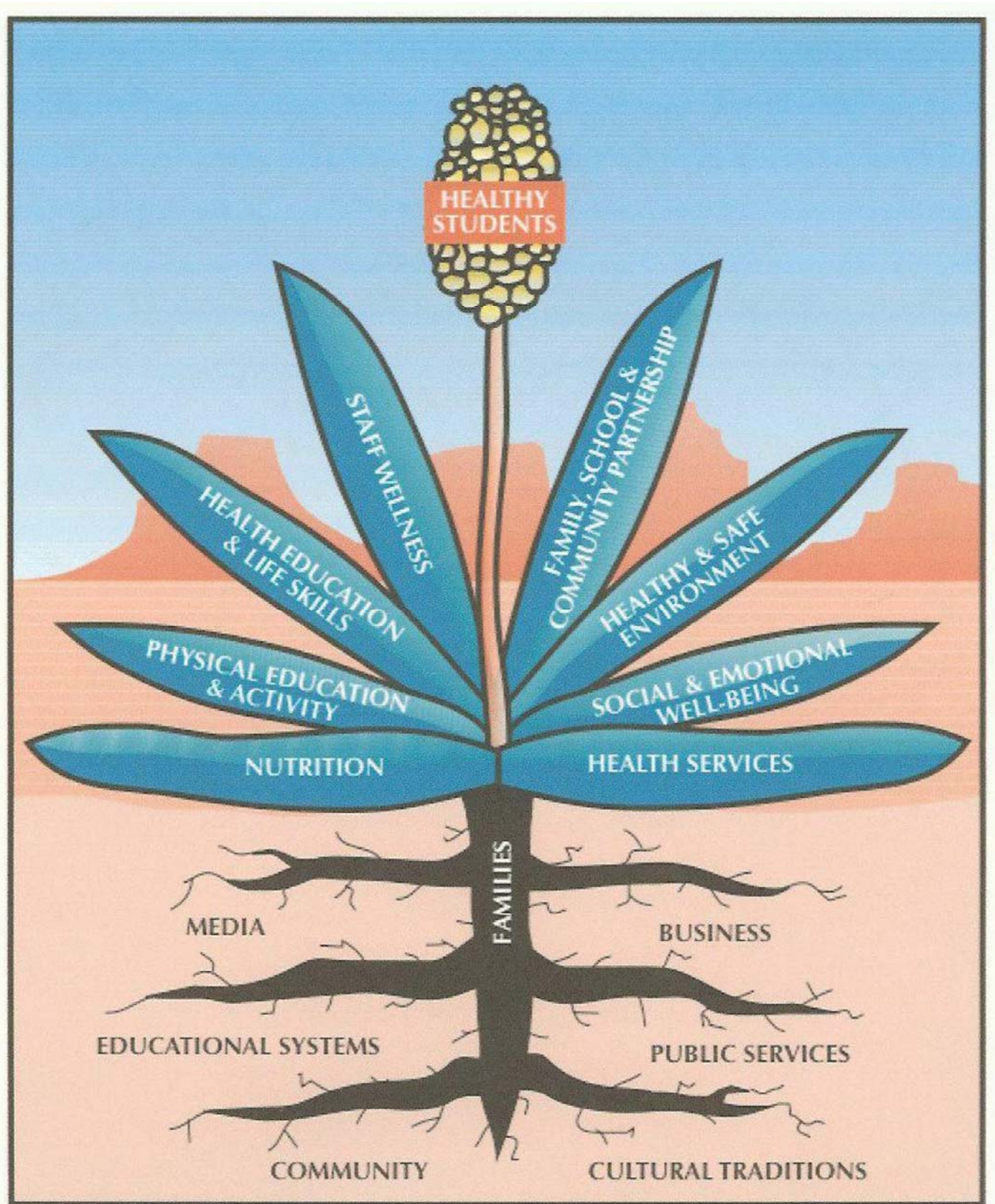
Healthy and Safe Environment – A healthy and safe school environment supports a total learning experience that promotes personal growth, healthy interpersonal relationships, wellness, and freedom from discrimination and abuse within a healthy physical environment.

Social and Emotional Well-Being – The social and emotional well-being supports a healthy school through programs and services that value the social and emotional well-being of students, families, and staff.

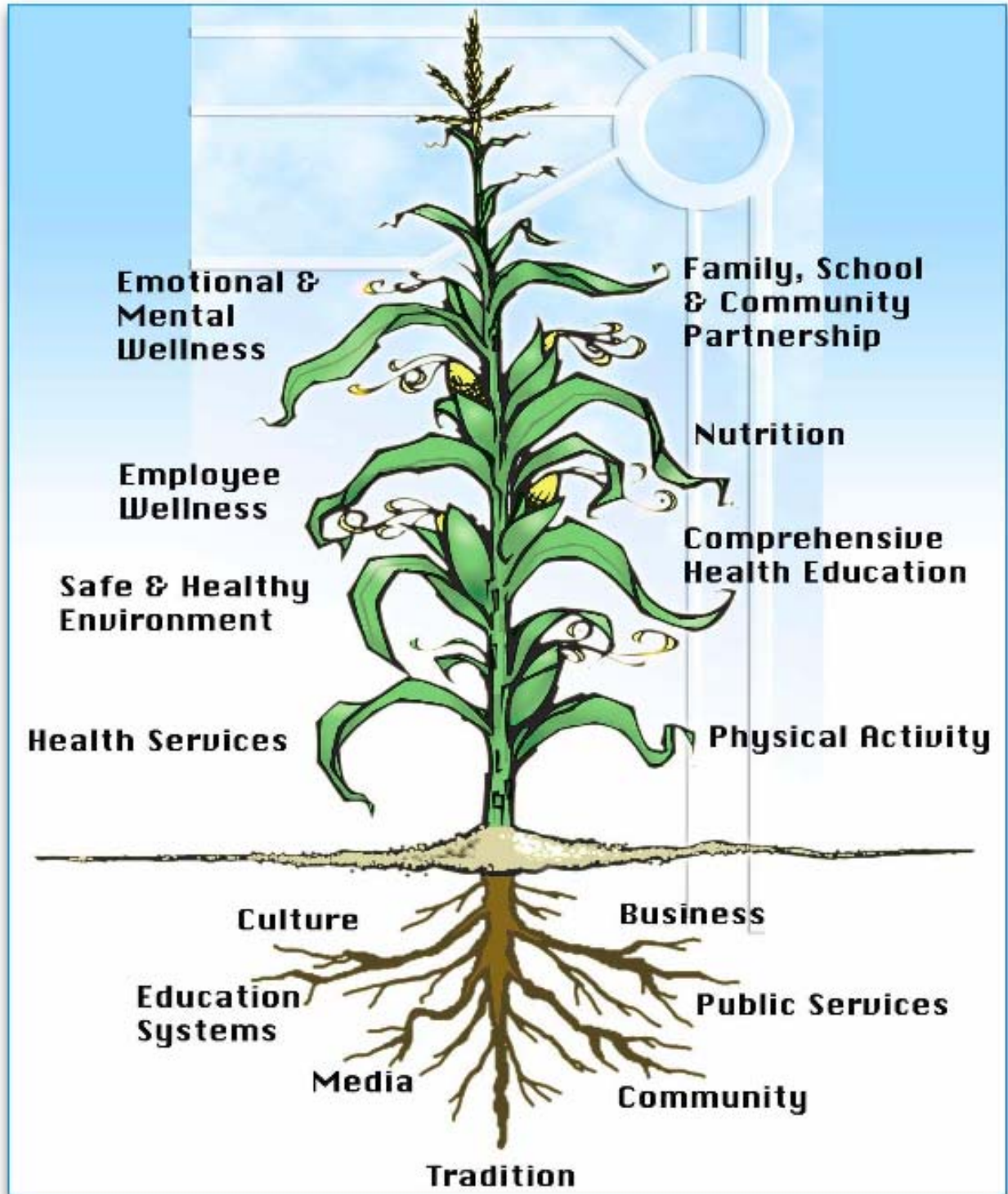
Health Services - The health services, staffed by qualified professional health care providers, provides a broad scope of services that address the physical and mental health needs of students and staff.

Further information about New Mexico's coordinated approach to school health is available from Healthier Schools at: www.healthierschools.org. The Centers for Disease Control (CDC) also provides strategies for addressing asthma within a coordinated school health program at: www.CDC.gov/HealthyYouth/asthma/strategies.htm

NEW MEXICO COORDINATED SCHOOL HEALTH



Navajo Coordinated School Health



**STRATEGIES FOR ADDRESSING ASTHMA WITHIN
A COORDINATED SCHOOL HEALTH PROGRAM**

CHECKLIST	ACTIONS FOR DISTRICTS AND SCHOOLS	NOTES
Mark 'X' if school or district has fully implemented each action. Mark 'S' if some implementation has occurred. Mark 'P' if implementation is planned. Leave blank if this action has not been implemented.		
1. Management and Support Systems for Asthma-Friendly Schools		
<input type="checkbox"/>	Are the school's or district's existing asthma needs, resources for meeting those needs, and potential barriers identified?	
<input type="checkbox"/>	Is a person designated to coordinate asthma activities at the district and school levels?	Who?
<input type="checkbox"/>	Does the district health council and the school health team review <i>Strategies</i> and ensure that school-based asthma management is addressed as a high priority?	Is a local asthma coalition involved?
<input type="checkbox"/>	Are written policies and procedures regarding asthma education and management developed and implemented?	Which policies?
<input type="checkbox"/>	Are the asthma programs used culturally and linguistically appropriate to students in your school/district?	
<input type="checkbox"/>	Are existing school health and/or health room records used or adapted to identify all students with diagnosed asthma?	
<input type="checkbox"/>	Are health room and attendance records used to track students with asthma?	
<input type="checkbox"/>	Does your school or district focus particularly on students with poorly managed, moderate-to-severe persistent asthma?	
<input type="checkbox"/>	Are 504 Plans or Individualized Education Plans (IEPs) appropriately used for health services and physical activity modifications?	
<input type="checkbox"/>	Do top administrators and community leaders support addressing asthma within a coordinated school health program?	Who?
<input type="checkbox"/>	Are there systems to promote ongoing communication among students, parents, teachers, school nurses, and health care providers to ensure that students' asthma is well-managed at school?	
<input type="checkbox"/>	Does the school or district apply for available federal, state, and private funding for school asthma programs?	
<input type="checkbox"/>	Are asthma program strategies and policies evaluated annually and used to improve programs?	
2. School Health and Mental Health Services		
<input type="checkbox"/>	Does each student with asthma have a written asthma action plan on file at school?	If not, what percent?
<input type="checkbox"/>	Do the asthma action plans include individualized emergency protocol, medications, peak flow monitoring, environmental triggers, and emergency contact information?	If not, what's missing?
<input type="checkbox"/>	Do students have immediate access to medications, as prescribed by a physician and approved by parents?	
<input type="checkbox"/>	Are students permitted to self-carry?	
<input type="checkbox"/>	Is an extra quick-relief inhaler available in the health room?	
<input type="checkbox"/>	Does the school or district have a standard emergency protocol for students in respiratory distress if they do not have their own asthma action plan?	
<input type="checkbox"/>	Is case management provided for students with frequent school absences, school health office visits, emergency department visits, or hospitalizations due to asthma?	How many?
<input type="checkbox"/>	Is there a full-time registered nurse all day, every day at each school?	If not, how many days/week? Hours per day? What's the student/nurse ratio?

**STRATEGIES FOR ADDRESSING ASTHMA WITHIN
A COORDINATED SCHOOL HEALTH PROGRAM**

CHECKLIST	ACTIONS FOR DISTRICTS AND SCHOOLS	NOTES
<input type="checkbox"/>	Is there a full-time trained and supervised health assistant?	If not, how many days/week? Hours per day?
<input type="checkbox"/>	Does each school have access to a consulting physician?	
<input type="checkbox"/>	Are students without a primary care provider referred to child health insurance programs and providers?	
<input type="checkbox"/>	Are school-based counseling, psychological, and social services for students with asthma provided, as appropriate?	
3. Asthma Education and Awareness Programs		
<input type="checkbox"/>	Do students with asthma receive education on asthma basics, asthma management, and emergency response?	
<input type="checkbox"/>	Are parents encouraged to participate in the asthma education programs?	
<input type="checkbox"/>	Do school staff receive education on asthma basics, asthma management, and emergency response as part of their professional development activities?	
<input type="checkbox"/>	Are all staff included?	
<input type="checkbox"/>	Are asthma awareness and lung health education lessons integrated into the health education curricula?	Which grades?
<input type="checkbox"/>	Are smoking prevention and cessation programs for students and staff provided and /or supported?	
4. Healthy School Environment		
<input type="checkbox"/>	Is tobacco use prohibited at all times, on all school property, in any form of school transportation, and at school-sponsored events on and off school property?	
<input type="checkbox"/>	Is the tobacco policy enforced?	
<input type="checkbox"/>	Are indoor air quality problems prevented by reducing or eliminating allergens and irritants, including tobacco smoke; dust and debris from construction and remodeling; dust mites, molds, warm-blooded animals, cockroaches, and other pests?	
<input type="checkbox"/>	Are integrated pest management (IPM) techniques used to control pests?	
5. Physical Education and Physical Activity		
<input type="checkbox"/>	Is full participation in physical activities encouraged when students are well?	
<input type="checkbox"/>	Are modified activities provided as indicated by a student's asthma action plan, 504 Plan, and/or individual education plan (IEP), as appropriate?	
<input type="checkbox"/>	Do students have access to preventive medications <i>before</i> activity and immediate access to emergency medications <i>during</i> activity?	
6. Family and Community Efforts		
<input type="checkbox"/>	Is written parental permission obtained for school health staff and primary care providers to share student health information?	
<input type="checkbox"/>	Are efforts made to educate, support, and involve family members in efforts to reduce students' asthma symptoms and school absences?	
<input type="checkbox"/>	Does your school or district work with local community programs and coordinate school and community services?	
<input type="checkbox"/>	Are interested school staff encouraged to participate in community asthma coalitions?	