



Asthma Friendly Schools Award Designation Criteria School Assessment Checklist

An asthma-friendly school supports the health and academic success of students through maximizing asthma management and reducing environmental asthma triggers in the school environment, and building asthma education and awareness programs for students and staff. Chances for success are better when the entire educational community takes part – school administrators, and staff along with the students and parents/guardians. Becoming an asthma-friendly school is not an additional program for students with asthma, but rather an effort to coordinate policies and programs under the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, the Individual with Disabilities Education Act and No Child Left Behind to effectively support students with asthma. Current school health services standards and the Code of Maryland Regulations support many elements of an Asthma Friendly School Initiative.

Read the following Asthma Friendly Schools Designation Criteria: School Assessment Checklist, and check the column that best describes the status of each activity in your school:

NOT YET – This activity has not yet been addressed in our district.

IN PROGRESS – This activity is in development or just beginning in our district.

Yes – This activity has been implemented in our district.

The assessment checklist is intended to be used by the school's designated asthma friendly schools team leader with the assistance of other school staff such as nurses, teachers, and coaches, as well as local school system staff. It should help your school and district assess and identify areas in which it is currently doing well, as well as areas in which it may want to focus more energy. Regardless of where your school is in instituting its asthma management programs, we encourage you and your team to use this checklist periodically to gauge your progress and to identify areas that could use more attention.

Once you have identified program areas in need of more attention within your school's asthma management program, school leaders may wish to use the CDC Asthma-Friendly Schools Tool Kit, the American Lung Association Asthma-Friendly Schools Tool Kit, and the Asthma-Friendly Schools training already provided, as well as any other federal and non-federal resources to help develop an action plan to improve asthma programs and policies.



**Asthma Friendly Schools Award Designation Criteria
School Assessment Checklist**

School Name: _____ **Jurisdiction:** _____

School Address: _____

School Year: _____

Enrollment (Check the boxes of all grades present in your school):

Pre-K	K	1	2	3	4	5	6	7	8	9	10	11	12

Name of person completing the assessment: _____

Date assessment completed: _____

Required Criteria

CHECK THE APPROPRIATE COLUMN		
NOT YET	IN PROGRESS	YES

Criteria #1: Policies are in place to make school buildings and grounds, all school buses, vans, and trucks, and all school events, like field trips and team games free of tobacco smoke at all times.

Rationale: Tobacco smoke is a significant indoor air quality issue and a major precipitant of asthma exacerbations, and asthma related morbidity such as decreased lung function and school/work absences. Students and staff with asthma should not smoke and should avoid exposure to second hand smoke.

Criteria Implementation Strategies:

Post "No Smoking" signs on schools' premises.			
Distribute and discuss the Smoke-Free Policy with all school staff.			
Incorporate smoking prevention education into the classroom curriculum.			
Display smoking prevention information on a hallway bulletin board(s).			
Make parents and staff aware of smoking cessation resources.			
Discuss the importance of smoking cessation at parent and staff meetings.			
Hold a smoking education event such as an art competition or "Stop-Smoking Day".			
Other:			

CHECK THE APPROPRIATE COLUMN		
NOT YET	IN PROGRESS	YES

Criteria #2: Implementation of §7-421 of the Annotated Code of Maryland that requires schools to allow students to self-carry asthma and anaphylaxis medications after an assessment.

Rationale: In an emergency, it is important that immediate access to emergency medications be ensured. According to §7-421 of the Annotated Code of Maryland, students must present an order from their physician authorizing self-carry and after an assessment by the school nurse, will be allowed to self-carry. As students mature, it is important for them to assume increasing responsibility to self-manage their asthma. The school nurse is an important resource and support for students to learn self-management and to assess their ability to self-carry safely while in school.

Criteria Implementation Strategies:

Students with asthma are encouraged to self-carry their medications as developmentally appropriate.			
The school nurse (i.e. the nurse who is assigned to the school) conducts an assessment of students with asthma to determine ability to self-carry.			
If a student does not carry their asthma medicines, the school has a procedure to assure they have quick and easy access to their medicines.			
If students are not self-carrying, the school has a procedure for ongoing assessment and education to move student toward self-carrying.			
Other:			

Criteria #3: Written policies and practices are in place and implemented to assure appropriate emergency care for students with asthma or anaphylaxis; OR Maryland School Health Services *Guidelines for the Care of Students with Asthma* are implemented.

Rationale: Students with asthma may have an exacerbation without warning or known trigger exposure. It is important for schools to document and share with all appropriate staff what to do in case of an emergency. Since an emergency may occur at any time and in any part of the school building, it is important that the school implement policies to address emergencies for students with asthma. While each student should have an emergency plan, a school wide policy will supplement that plan with general emergency including communication, when to call 911 and how emergencies will be communicated to parents/guardians.

Criteria Implementation Strategies:

A metered dose inhaler and spacer device(s) or nebulizer is available for emergency use in the event of a fire, weather, or lockdown, or if a student forgets his/her medicine.			
The school has a written emergency plan for teachers and staff to follow to take care of a student who has an asthma attack.			
Individualized Emergency Care Plans are shared with staff that has contact with students with asthma.			
Asthma First Aid posters are on display.			
Other:			

CHECK THE APPROPRIATE COLUMN		
NOT YET	IN PROGRESS	YES

Criteria #4: All students with moderate to severe asthma have a written Asthma Action Plan, an emergency plan or an individualized health plan on file at the school and kept in a central location as well as shared and kept with appropriate school staff.

Rationale: The National Asthma Education and Prevention Program and the National Heart, Lung, and Blood Institute recommend the development of an asthma action plan to guide daily asthma management. An action plan is an important educational tool, communication tool and management tool. Students with moderate to severe asthma are at greater risk for asthma exacerbations and school absences due to asthma. Sharing the asthma action plan with appropriate school staff will allow all those in contact with the student to be able to respond to their student's trigger avoidance needs.

Criteria Implementation Strategies:

School health services staff develop a strategy to work with local providers to encourage their development of asthma action plans.			
The school nurse constructs an asthma action plan for each student with moderate to severe asthma when needed based on information from their healthcare provider.			
The school nurse develops an individualized health plan for each student with asthma who does not have an asthma action plan.			
The school nurse develops an emergency care plan for each student with asthma to assure appropriate treatment in the event of an emergency.			
The emergency care plan and/or asthma action plan is shared with appropriate school staff who may be required to respond to an emergency.			
All students with moderate to severe asthma have an asthma action plan.			
Other:			

Criteria #5: There is a school nurse assigned to your school building during all school hours to monitor and coordinate the care of students with asthma.

Rationale: In Maryland, there may be a nurse in every school or a nurse that is shared by several schools. In either case, the assigned school nurse is responsible for working with the school, school's certified nursing assistant and others to monitor the status of students with asthma. According to the Maryland School Health Services Guidelines, there are many nursing functions necessary to adequately care for students with asthma.

Criteria Implementation Strategies:

There is a school nurse in the school at all times during school hours OR if a school nurse is not full-time in the school, is a nurse is regularly available to write plans and give the school guidance on issues related to asthma care and management.			
The school nurse identifies, assesses, monitors, and coordinates the care of students with asthma at the school as outlined in the Maryland School Health Services Guidelines.			
The school nurse identifies children with asthma and monitors their progress by keeping track of medical office visits.			
Medication usage is tracked for students with asthma.			

The school nurse performs follow-up with children with multiple asthma exacerbations during school-hours.			
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	CHECK THE APPROPRIATE COLUMN		
	NOT YET	IN PROGRESS	YES
Follow-up on children whose medication forms do not include controller medications, but whose symptoms seem to warrant the medication (based on frequency of exacerbations in school or absences due to asthma).			
Publicize and distribute asthma action plan forms to parents of asthmatic children who do not have an asthma action plan on file.			
For public schools with school based health centers: Utilize/implement a system for identifying, managing, and clinical follow up on asthmatic students.			
Other:			

Criteria #6: The school nurse or other qualified or certified professional provides asthma education or educational resources to students and school staff on asthma awareness, asthma action plans, asthma management concepts, asthma medicines, procedures to follow during an asthma attack, how to help a classmate who has asthma, and the importance of keeping healthy classrooms.

Rationale: The school setting provides an opportunity to educate students, staff and families about asthma, asthma triggers, trigger avoidance, asthma management, and how the school environment can be improved to support the needs of students and staff with asthma. The Centers for Disease Control and Prevention recommends asthma education for school staff and students. Maryland Asthma Control Program partners are available to assist in the implementation of educational activities within the school setting.

Criteria Implementation Strategies:

The school designates a day for staff development with specific information provided regarding asthma and asthma friendly schools.			
Develop a procedure to follow during an asthma attack and ensure that these procedures are available in every classroom.			
Provide all new members of staff with asthma awareness material upon hire and ensure that all new staff members receive training or instruction on the emergency procedures to follow during an asthma attack.			
Integrate asthma education into the existing science or health education curriculum (e.g. while teaching about respiratory health or air pollution).			
Provide the <i>Open Airways for Schools</i> (OAS) training program to students annually.			
Hold an Asthma Awareness program/education project for the entire student population not just those who have asthma.			
Other:			

	CHECK THE APPROPRIATE COLUMN		
	NOT YET	IN PROGRESS	YES
Criteria #7: Students with asthma fully and safely join in physical education, school sponsored sports, recess, and field trips.			
<p>Rationale: It is important for students with asthma to participate in sports and physical education. Except in extreme cases, most students with asthma should be able to participate. A physician should determine the appropriate level of physical activity for students with asthma. Schools should have policies and procedures in place to support the physician's recommended level of activity. Many of these policies support other activities that support asthma management and emergency intervention in the even of an asthma exacerbation.</p>			
Criteria Implementation Strategies:			
Students' quick relief medications are readily available, before and after exercise including self-carrying of medication.			
Students with asthma may choose a physical activity that is different from others in the class when it is medically necessary and documented by their health care provider.			
Students with asthma who choose a physical activity that is different from others in the class do so without fear of being ridiculed or receiving reduced grades.			
A plan is in place for managing asthma during school sporting activities, excursions or camps.			
Training/resources are provided to physical education teachers and coaches on providing safe physical education for students with asthma including awareness of distress signs and what to do in the event of an asthma attack during physical activity.			
Coach is aware of all students with asthma and he/she follows each student's Asthma Action Plan.			
Each student's medications are available for exercise activities that take place away from the school or after regular school hours.			
The coaches clipboard program is promoted, with the school and coaches document completing the program.			
Other:			

Criteria #8: Does the school have good indoor air quality (IAQ)? The school addresses issues of air quality, allergens and asthma triggers.	CHECK THE APPROPRIATE COLUMN		
	NOT YET	IN PROGRESS	YES
Rationale: Good indoor air quality is an important factor in maintaining the health of students and staff with asthma. In addition to being free from tobacco smoke, other asthma triggers and allergens can significantly affect the ability of students with asthma to be free from asthma symptoms while in school. There are many contributors of poor air quality. Understanding the factors related to good indoor air quality within a school and the ability to address any identified issues is an important way schools can support healthy indoor environments.			
Criteria Implementation Strategies:			
The school has a process to follow-up on and a mechanism for addressing identified IAQ issues.			
Potential asthma triggers are minimized within the school environment. How:			
The school uses Green-Seal products to clean the school.			
Ensure that all custodial and maintenance personnel are properly trained to reduce allergens in the school building. How is training is documented:			
Keep an inventory of the cleaning products that your school uses.			
The school uses an integrated pest management (IPM) program.			
Conduct EPA's Indoor Air Quality Tools for Schools to ensure a healthy school environment.			
The EPA Indoor Air Quality Tools for School Training course is completed by the building maintenance supervisor.			
Healthy SEAT or other management process is developed to ensure follow-up of identified environmental issues to determine the results are sustained over time.			
Encourage teachers to create healthy classrooms which include limiting clutter which can accumulate dust, wiping down common areas such as computer keyboards, tables, etc to limit the spreading of viruses which can trigger asthma, having tissues available to limit the spread of respiratory viruses, etc.			
The school has a written IAQ management plan.			
Other:			

		CHECK THE APPROPRIATE COLUMN		
		NOT YET	IN PROGRESS	YES
Criteria #9: The school monitors outdoor air quality and modifies outdoor activities when appropriate.				
<p>Rationale: There are many outdoor irritants that can exacerbate asthma. The Air Quality Index is an important tool that allows schools to know the air quality and level of possible health effects from poor air quality. There is particular concern during certain seasons/ time of year when outdoor air quality is of particular concern. Ozone Action Days are often reported and schools can support the health of all students and staff by monitoring for Ozone and other pollutant levels and adjusting school activities to minimize health effects.</p>				
Criteria Implementation Strategies:				
Monitors the Air Quality Index				
Reports AQI to staff and students				
Limits or reschedules outdoor activities as appropriate				
Displays No-idling information on a hallway bulletin board(s) including weather related idling concerns.				
Plans and implements a “No-idling campaign” OR hold a “Stop-idling Day” for parents and bus drivers.				
Other:				
Criteria #10: There are policies, procedures, and activities in place to provide nursing education/professional development on asthma, asthma management guidelines, asthma friendly schools, and environmental issues related to asthma.				
<p>Rationale: School nurses are at the forefront of caring for students with asthma while they are in school. It is important that school nurses stay abreast of the latest recommendations and guidelines in asthma care and management. To adequately support the needs of students with asthma, school nurses should attend one of several available trainings on asthma management.</p>				
Criteria Implementation Strategies:				
Each school nurse receives training on asthma management in the school setting provided by a trainer recommended by MSDE and/or DHMH.				
The EPA Indoor Air Quality Tools for School Training course is completed by the school nurse.				
In-service training on asthma is provided or is arranged to be provided to the school nurse by the local school health services program.				
Other:				

		CHECK THE APPROPRIATE COLUMN		
		NOT YET	IN PROGRESS	YES
Criteria #11: The school has or acts as a resource for programs, activities, and materials in place and available to provide asthma awareness education to the community and asthma education and support to the families of students with asthma				
Rationale: Health education is an important part of any coordinated school health program. The National Asthma Education and Prevention Program recommends asthma education to individuals with asthma. Within a school setting, school health services programs and health education programs can collaborate to make educational opportunities available to schools and the community. While school staff may not always be involved in the delivery of these activities, serving as a resource along with local school health councils, asthma coalitions, and local hospitals is important.				
Criteria Implementation Strategies:				
Provide asthma education materials to parents/guardians of students with asthma.				
Host asthma workshops for parents and other caregivers of children with asthma.				
Have an annual health promotion activity (e.g. health fair) and invite local hospitals and community-based organizations to participate.				
Provide information to parents and students on smoking cessation programs in the community.				
There are support groups available for students with asthma who wish to talk about their asthma with fellow students.				
Other:				

Recommended Criteria

		CHECK THE APPROPRIATE COLUMN		
		NOT YET	IN PROGRESS	YES
Criteria #12: Health and education data and information is made available to monitor the asthma friendly schools activities and outcomes for students with asthma.				
Rationale: The effectiveness of asthma related activities within a school is important to program improvement and program development. In order to be sure that health related activities in a school help to meet the schools educational mandate it is important for programs to collect data. Educational outcomes are an important element in data gathering and communication for each student and programs in general.				
Criteria Implementation Strategies:				

The school collects and monitors absenteeism for students with asthma (aggregated data).			
Educational outcomes for students with asthma are tracked and correlated with health information as needed.			
Other:			