Florida Asthma-Friendly Schools

2012-2013 Application Guide

A Guide to Help Florida Schools Achieve
An Asthma-Friendly School Award

Also in collaboration with:
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I. Introduction

Background & Purpose
Asthma is a 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 the 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 Award Criteria
With the goal of improving student health, attendance, and academic achievement, the Florida Asthma Coalition established a voluntary award 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 award. Successive award levels include additional activities and require more effort, resulting in progressively stronger programs and culminating in a Platinum level award. 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. Establish a school-based Asthma Leadership Team (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:*
   
<table>
<thead>
<tr>
<th>Award Level</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
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<tbody>
<tr>
<td>Required Percentage</td>
<td>More than 25%</td>
<td>More than 50%</td>
<td>More than 75%</td>
<td>More than 75%</td>
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3. Schools ensure immediate access to asthma medications per FL statute
4. Schools provide 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:*
   
<table>
<thead>
<tr>
<th>Award Level</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Percentage</td>
<td>More than 25%</td>
<td>More than 50%</td>
<td>More than 75%</td>
<td>More than 90%</td>
</tr>
</tbody>
</table>

5. Schools post asthma posters in high-traffic areas
6. Physical education and activity opportunities meet needs of children with asthma
Silver: All above and...
7. Schools work with community partners to provide self-management education to students with asthma, such as the American Lung Associations 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:

<table>
<thead>
<tr>
<th>Award Level</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
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</thead>
<tbody>
<tr>
<td>Required Percentage</td>
<td>More than 25%</td>
<td>More than 50%</td>
<td>More than 75%</td>
</tr>
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</table>

8. Schools work with community partners to offer and provide education to parents about asthma management

Gold: All above and...
9. 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...
10. Schools implement comprehensive asthma procedures or a policy which includes the activities listed in criterion 1-9 and a comprehensive tobacco free campus policy

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. 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.”

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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 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 and Prevention (CDC) built on this guidance when they released an additional document: Strategies for Addressing Asthma within a Coordinated School Health Program. 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 a Florida Asthma-Friendly School Award

Getting Started
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 attached 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.

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.

**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. 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.

**Establishing Your School’s Asthma Leadership Team**

The first step in establishing your school’s asthma leadership team is to sign-up 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](http://www.surveymonkey.com/s/AsthmaFriendlySchoolSignUp)

Take every opportunity to have the team overlap or align with an existing school wellness team or healthy school team established to implement the coordinated school health approach. 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
- Students
- School Advisory Council (SAC) member
- District Health or Wellness Coordinator
- School Wellness Coordinator
- Health department personnel
- Local clinicians
- Pulmonologist or Allergist
- Respiratory Therapist
- Certified Asthma Educator
- Administrator
- PTA Representative
- Nurse
- Health Educator
- Physical Educator
- School Social Worker
- School Psychologist
- Teachers
- School Counselor
- Support Staff
- American Lung Association

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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.⁵

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 membership is decided, the team will need to establish a process and timeline for working together to manage the school’s asthma-friendly school activities. 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 with the Asthma Leadership Team. 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 by 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 which procedures are already underway and which criterion will be addressed first, second, and third.

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.

**General Resources**

- **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/asthmatoolkit.aspx](http://aasa.org/asthmatoolkit.aspx)
- **Charting your Schools Course to Wellness: Creating a Healthy School Team:** A resource from the Florida Department of Education. [http://www.doh.state.fl.us/family/cshp/ChartingYourSchoolsCoursetoWellness.pdf](http://www.doh.state.fl.us/family/cshp/ChartingYourSchoolsCoursetoWellness.pdf)
- **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_slds/menu.htm](http://hin.nhlbi.nih.gov/naepp_slds/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
- **Centers for Disease Control and Prevention: Division of Adolescent and School Health Initiating Change: Creating an Asthma-Friendly School:** This site includes podcasts 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)
  - [http://www.cdc.gov/HealthyYouth/asthma/creatingafs/](http://www.cdc.gov/HealthyYouth/asthma/creatingafs/)

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**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 **7 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](http://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.myfloridaeh.com/medicine/Asthma/asthmaonlinetraining.pdf](http://www.myfloridaeh.com/medicine/Asthma/asthmaonlinetraining.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.esgn.tv/player.php?p=z80240ko](http://video.esgn.tv/player.php?p=z80240ko)

### 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.

American Lung Association in Florida: Free or low cost trainings may be available. Call 1-800-LUNGUSA to reach your local 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/i4a/pages/index.cfm?pageid=3423](http://www.ashaweb.org/i4a/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/](http://rover.nhlbi.nih.gov/health/prof/lung/asthma/basics_schools/)

Policy Resources

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.
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 Statue 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://www.doh.state.fl.us/environment/medicine/asthma/SelfAdministrationStatute.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.  
- The National Heart, Lung and Blood Institutes Guidelines: When Should Students with Asthma or Allergies Carry and Self-Administer Emergency Medications at School?  

Policy Resources
- ALA’s Asthma-Friendly School Initiative Toolkit: Sample School Medication Policy (Page 135)  
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 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.

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 asthma diagnoses. 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 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

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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 (ICHPs) 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 Plan in multiple languages are available here: http://www.myfloridaeh.com/medicine/Asthma/actionplan.html.

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.

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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.

<table>
<thead>
<tr>
<th>Award Level</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>Platinum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Percentage</td>
<td>More than 25%</td>
<td>More than 50%</td>
<td>More than 75%</td>
<td>More than 90%</td>
</tr>
</tbody>
</table>

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.

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):
  - HIPPA/FERPA Authorization Form
  - Asthma Encounter Form and Asthma Action Plan
- Top Ten Tips on School-based Asthma Management for School Nurses:
- Mastering the Metered Dose Inhaler - a Primer for School Health Nurses:
- 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


- Florida Department of State General Records Schedule GS7: http://dlis.dos.state.fl.us/barm/genschedules/GS7_Updates.cfm


Policy Resources

- American Lung Association’s Guide for Asthma Policy for Housing and Schools:

**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://www.myfloridaeh.com/medicine/Asthma/Steps-to-Follow.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://www.myfloridaeh.com/medicine/Asthma/Common_Asthma_Triggers.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](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](http://www.epa.gov/asthma/publications.html)

- **Public Health Foundation’s Teacher Asthma Reference Cards:** [http://www.phf.org/programs/PMQI/Pages/Asthma_Demonstration_Projects.aspx](http://www.phf.org/programs/PMQI/Pages/Asthma_Demonstration_Projects.aspx)

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### BRONZE 6. Physical Education and Activity

To achieve criterion number six, physical education teachers need to have participated in the Asthma 101 course, or other approved course. 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](http://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

• **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_Toolkits/PhysicalActivity.pdf)

• **Asthma and Physical Activity in the School**, a guide from the NHLBI:

• **ALA’s Asthma-Friendly School Initiative’s Tool Kit**
  o Solutions for Physical Education and Recess on High Ozone Days:
  o 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):**

• **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](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](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) 

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**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.
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. 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.

There are several education programs available depending on the age of the students in your school.

**Elementary (Grades 3-5):** ALA’s Open Airways for Schools Program

**Middle and High School (Grades 6-12):** ALA’s Asthma 101 or Asthma Basics Online Program: [http://www.lung.org/lung-disease/asthma/learning-more-about-asthma/asthma-basics.html](http://www.lung.org/lung-disease/asthma/learning-more-about-asthma/asthma-basics.html)

(Under limited circumstances, alternate self-management education programs may be approved to meet this criterion. Preference will be given to evidence based programs that are of the same duration or longer.)

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.

<table>
<thead>
<tr>
<th>Percentage of Students with Known Asthma who Received Self-Management Education in the Past 2 School Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Award Level</td>
</tr>
<tr>
<td>Required Percentage</td>
</tr>
</tbody>
</table>

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:

- [http://www.cdc.gov/asthma/interventions/openairway.htm](http://www.cdc.gov/asthma/interventions/openairway.htm)

**General Resources**


**Policy Resources**


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**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.

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](http://www.epa.gov).
  - [Help Your Child Gain Control Over Asthma](http://www.epa.gov/asthma/pdfs/l1_asthma_brochure.pdf)
  - [Asthma and Outdoor Air Pollution](http://www.epa.gov/airnow/health-prof/Asthma_Flyer_Final.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.

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

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

**TOBACCO PREVENTION AND CESSATION RESOURCES**

- Florida Area Health Education Centers Resources on Tobacco Cessation: [http://www.ahectobacco.com/](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/](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](http://www.cdc.gov/mmwr/preview/mmwrhtml/00026213.htm).

**AIR QUALITY PROGRAM RESOURCES**

- Environmental Protection Agency’s Tools for Schools website: [http://www.epa.gov/iaq/schools](http://www.epa.gov/iaq/schools)
- 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.neaacademy.org/leader-to-leader/whats-your-ieq-a-roadmap-to-school-indoor-environmental-quality.html](http://www.neaacademy.org/leader-to-leader/whats-your-ieq-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.neaacademy.org/leader-to-leader/managing-asthma-in-the-school-environment-what-nea-members-need-to-know.html](http://www.neaacademy.org/leader-to-leader/managing-asthma-in-the-school-environment-what-nea-members-need-to-know.html)
DIESEL POLLUTION PREVENTION & CONTROL RESOURCES

- EPA National Idle Reduction Campaign: [http://www.epa.gov/cleanschoolbus/antiidling.htm](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](http://www.mass.gov/dep/air/community/schbusir.htm)

Policy Resources

- Tobacco Free Florida – Tobacco Free Schools:
- American Lung Association’s Guide to Asthma Policy in Housing and Schools:

**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.

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

**PLATINUM 10. Comprehensive Asthma Policies / Procedures & Tobacco Free Campus**

Comprehensive Tobacco Policy: [http://www.doh.state.fl.us/environment/medicine/asthma/CompSchoolTobaccoPolicy.pdf](http://www.doh.state.fl.us/environment/medicine/asthma/CompSchoolTobaccoPolicy.pdf)

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.
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”. Use these resources to develop your school or district level policies. Additional general policy information is provided below.

**Policy Resources**


**III: Applying for the Award**

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 FlAsthmacoalition@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 FlAsthmacoalition@gmail.com.