



Advocates for Justice and Education, Inc.

The Parent Training and Information Center for the District of Columbia

Developing an Asthma Action Plan Policies and Procedures for Students in the District of Columbia

Asthma is the most chronic childhood illness in the United States today. Nationally, more than 10 million U.S. children under age 18 (14%) have ever been diagnosed with asthma; 6.8 million children still have asthma (9%).ⁱ It is also the leading cause of missed school days due to a chronic illness, accounting for more than 14 million missed school days per year. In 2008, an estimated 13,981 children in The District of Columbia had asthma. ⁱⁱ

With children spending a large part of their day at school, the Individuals with Disabilities Education Act of 2004 (IDEA) and Section 504 of the Rehabilitation Act of 1973 requires that schools promote the health, development, and achievement of students with disabilities, including children with chronic health illnesses. The law also requires caregivers and schools to work together as partners, to develop and implement health plans to protect the welfare of these children.

Specifically in D.C., the Student Access to Treatment Act of 2007 (DC Law 17-107) permits public, charter and private school students with a valid medication action plan to possess and self-administer lifesaving asthma medications at school. This law also allows such medications to be administered by a trained and certified school employee or agent. However, for young children who rely on adults to administer their medication, students with asthma must complete the DC Asthma Action Plan. The DC Asthma Action Plan developed by the District of Columbia's Department of Health (DOH) is a fill-in-the-blank form, and can be accessed at <http://doh.dc.gov/publication/doh-asthma-action-plan>.

An Asthma Action Plan provides a detailed outline of how to help a child or individual to manage asthma on a day-to-day basis and describes what to do in case of an emergency. An Asthma Action Plan should be completed by a healthcare provider in partnership with the patient and their guardian. The specific steps for managing your child's asthma at school should be written into your child's individualized asthma action plan.

The DC Asthma Action Plan uses a three-color (zone) system like that of a traffic signal green, yellow, and red. Each zone has assessment measures and tailored instructions specific to that zone. When you match the symptoms to the correct color section, you will find the steps to take.

Green Zone = Go

- NO asthma symptoms
- able to do usual activities

Children with Special Needs, need Parents with Special Skills!

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Asthma Action Plan

Green Zone: Go - Take these CONTROL (PREVENTION) Medicines EVERY Day

Yellow Zone: Caution! - Continue CONTROL Medicines and ADD RESCUE Medicines

Red Zone: Emergency! - Continue CONTROL & RESCUE Medicines and GO TO THE HOSPITAL

GREEN ZONE: GO - You have ALL of these: No cough or wheeze, No chest tightness, No trouble sleeping, No trouble with school or sports, No trouble with daily activities. You take your controller medicine every day as prescribed. You take your rescue medicine only when you need it. You have had no asthma symptoms for at least 2 weeks.

YELLOW ZONE: CAUTION! - You have ANY of these: Cough or wheeze, Chest tightness, Trouble sleeping, Trouble with school or sports, Trouble with daily activities. You take your controller medicine every day as prescribed. You take your rescue medicine only when you need it. You have had asthma symptoms for at least 2 weeks.

RED ZONE: EMERGENCY! - You have ANY of these: Severe cough or wheeze, Severe chest tightness, Severe trouble sleeping, Severe trouble with school or sports, Severe trouble with daily activities. You take your controller medicine every day as prescribed. You take your rescue medicine only when you need it. You have had asthma symptoms for at least 2 weeks.

- sleep without coughing, wheezing, or breathing difficulties

Yellow Zone = Caution

- symptoms may include coughing, wheezing, and mild shortness of breath
- nighttime asthma and daily activities may be disturbed
- may be more tired than usual

Red Zone = Danger or Urgent Medical Help

- frequent, severe cough,
- severe shortness of breath, wheezing,
- trouble talking, walking, and rapid breathing
- fingertips are blue, are grasping for air

By completing the asthma action plan, school officials will be more informed of your child's triggers, severity of the asthma, and common symptoms and effective treatment of your child's asthma. The plan should then be distributed to every school official who may care for your child, including the school nurse, counselor, teacher(s), and school administrators. Parents, children, physicians, and school officials must work together to keep asthma from interfering with normal school activities.

Resources:

DC Asthma Action Plan: <http://doh.dc.gov/publication/doh-asthma-action-plan>

DC Asthma Coalition: www.dcasthma.org

ⁱ Centers for Disease Control and Prevention (CDC). (2012) Summary of Health Statistics for U.S. Children: National Health Interview Survey. http://www.cdc.gov/nchs/data/series/sr_10/sr10_258.pdf

ⁱⁱ Centers for Disease Control and Prevention (CDC). (2008) Asthma State Profiles. http://www.cdc.gov/asthma/stateprofiles/Asthma_in_DC.pdf