

State-wide Legislation Positively Impacts Attendance for Students with Asthma

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INTRODUCTION

Asthma disproportionately affects students from lower-income areas. This study evaluates the outcomes for students in the two years following the passage of **Missouri House Bill 1188** (allows trained school employees to administer bronchodilator to students) and the implementation of the St. Louis Chapter of the Asthma & Allergy Foundation of America's (AAFA-STL) school nurse **RESCUE (Resources for Every School Confronting Unexpected Emergencies)** program, which provides schools with equipment and access to medications to treat asthma.



MO House Bill 1188 ¹

Allows a school nurse or other trained employee to administer asthma-related rescue medication to any student experiencing an asthma attack. *Sponsored in Missouri by Representative Sue Allen and Senator Eric Schmitt.*

RESCUE

Resources for Every School Confronting Unexpected Emergencies

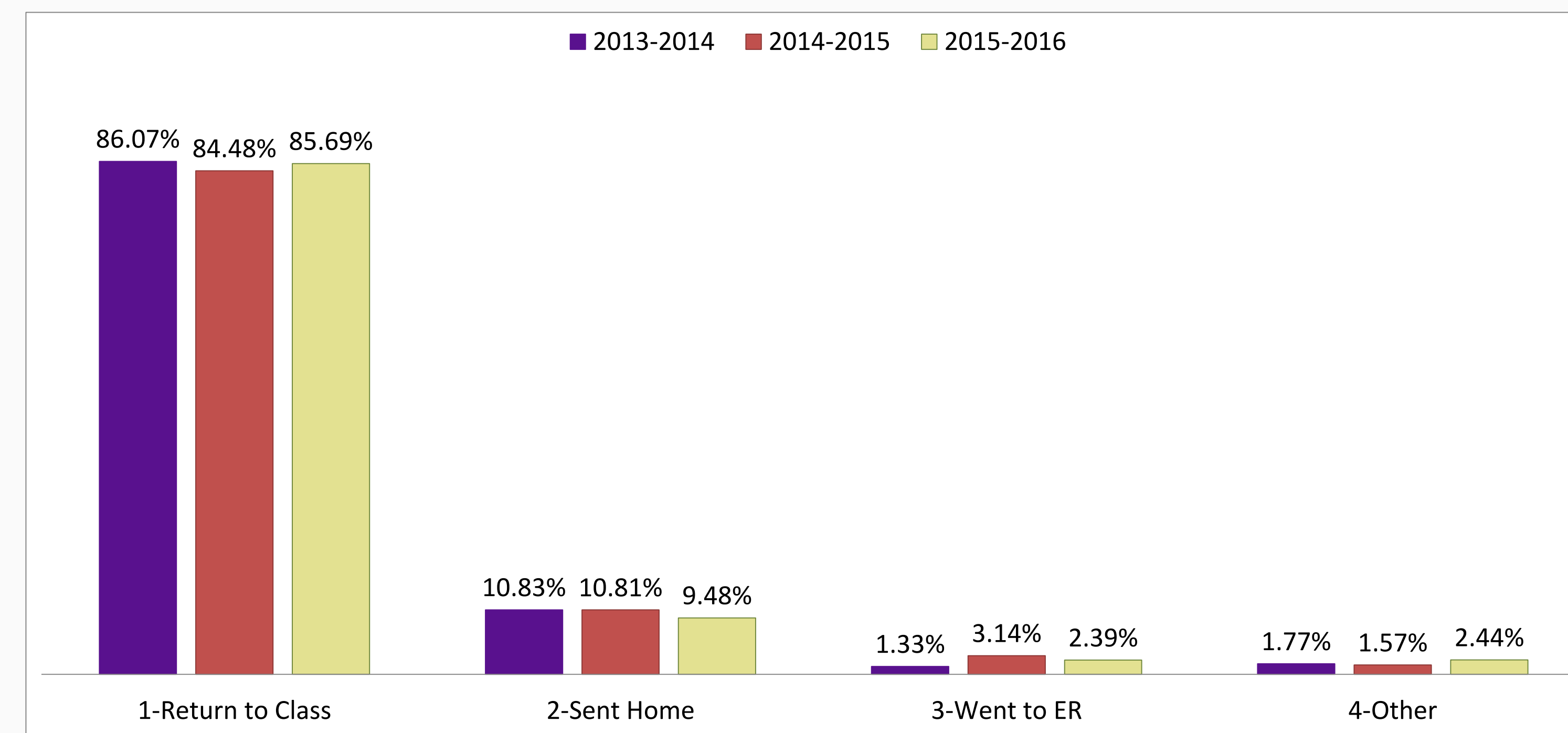
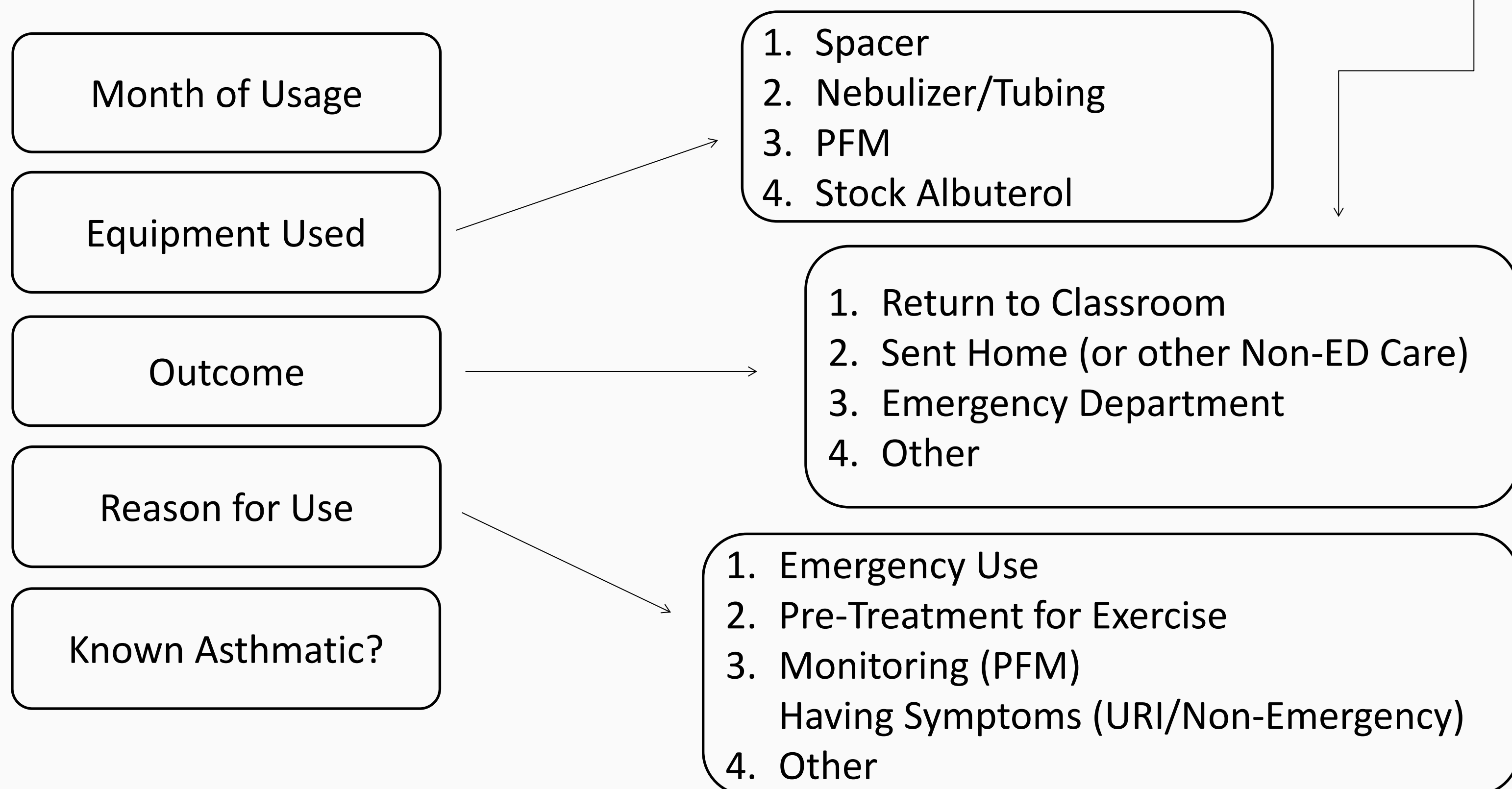
AAFA-STL's **RESCUE program** ² provides equipment used for asthma emergencies to school nurses at no cost. Qualifying schools typically have a free and reduced lunch percentage of 25% or greater for their population.

METHODS

AAFA-STL's RESCUE program mainly supports schools with lower-income populations. Participating schools were provided with a nebulizer, spacers, and supplies along with access to free albuterol. When RESCUE supplies were used, school nurses logged outcomes— return to classroom, sent home, sent to emergency department (ED) or other.

RESULTS

In the 2013-2014 school year, 103 of the 105 schools receiving equipment from RESCUE returned logs. Equipment was used 1357 individual times, with students going back to class 86.07%, sent home 10.83%, and sent to ED 1.33% of the time. In the 2014-2015 school year, 126 of the 207 schools returned logs. Equipment was used 1720 individual times, with students going back to class 84.48%, sent home 10.81%, and sent to ED 3.14% of the time.

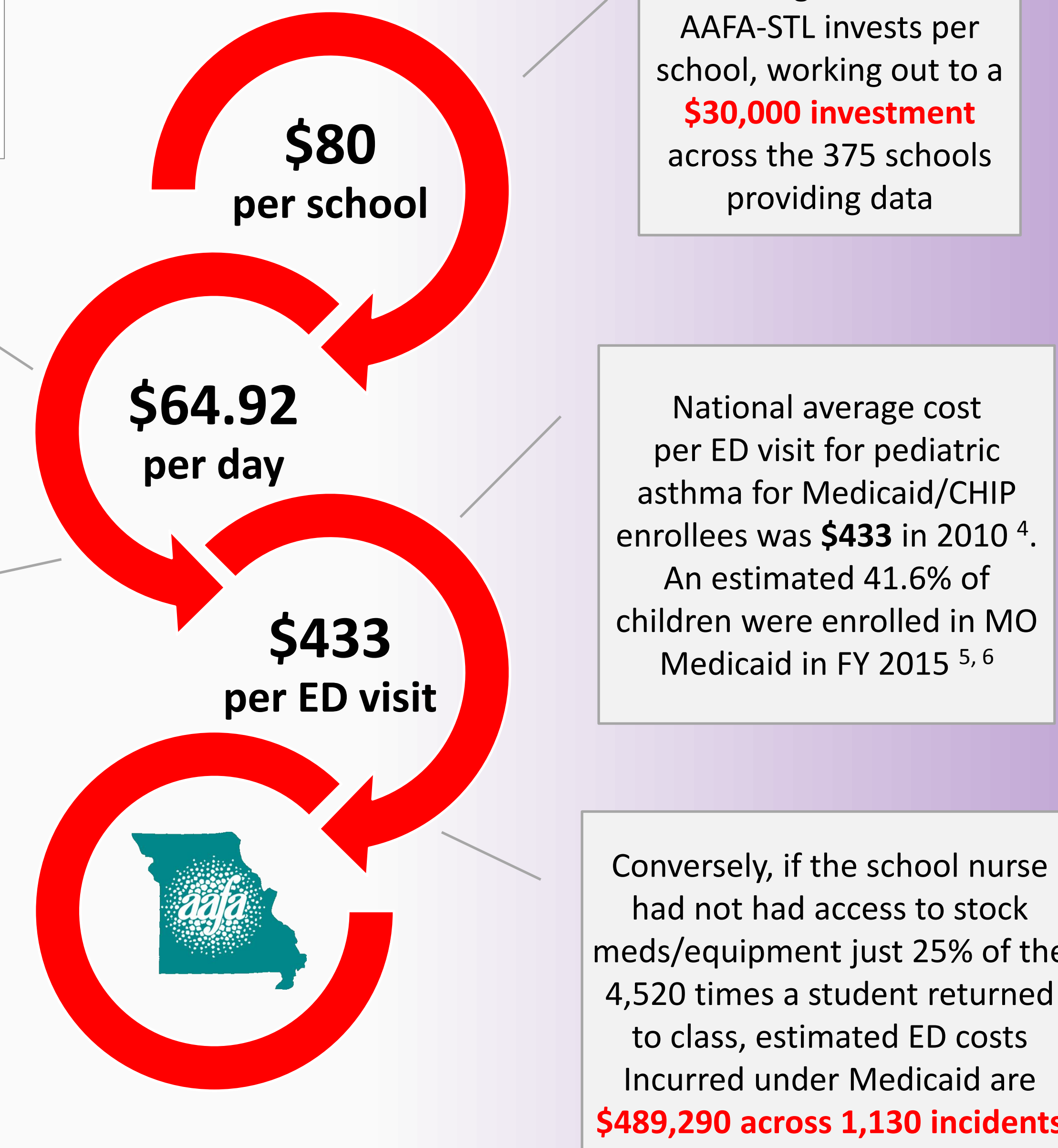
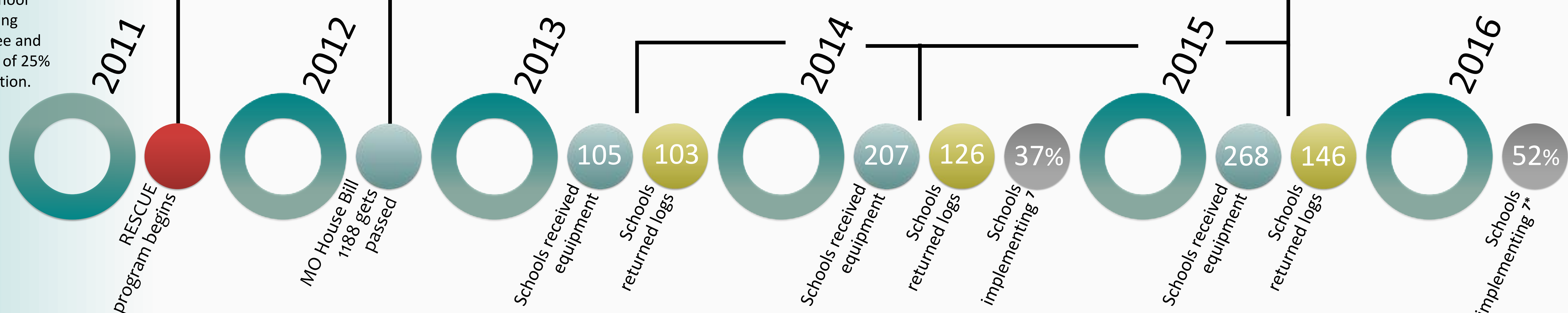


CONCLUSION

The RESCUE program ensures schools have access to the necessary equipment to treat acute asthma symptoms, thereby decreasing the need for ED visits and sending students home. **HB1188** ¹ ensures schools are allowed to stock asthma rescue medicine. This comprehensive approach decreases the economic costs to parents and society and improves student health as well as academic performance, especially in schools serving lower-income populations.

Average cost to area schools per student, per day across the 4 counties AAFA serves in MO ³

If access to these materials prevented an emergency situation just **25% of the 4,520 times** a student was reported returning to the classroom over the past three years **Schools saved \$73,359**



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- Missouri Department of Health and Senior Services. (2014). *Issue Brief: Evaluation Project Results Report School District Adoption of Policy to Maintain Stock Supply of Asthma-related Rescue Medication* [Data File]. Retrieved from <http://health.mo.gov/living/healthconditions/chronic/asthma/publications.php> *Spring 2016 data is still being collected; preliminary analysis based on sample size of 205 responding school districts; by comparison, Spring 2014 based on n = 434 (or 83.3% response rate of all public school districts in Missouri)