Edisford Primary School

Confidence. Persistence. Getting Along. Organisation. Resilience.

Asthma Policy

Contents

Policy statement

This policy has been written with advice from Asthma UK and the Department for Education in addition to advice from healthcare and education professionals.

This school recognises that asthma and recurrent wheezing are important conditions affecting increasing numbers of school age children.

This school encourages all children to achieve their full potential in all aspects of life by having a clear policy and procedures that are understood by school staff, parents/carers and pupils.

All staff who have contact with these children are given the opportunity to receive training from the school nursing team/specialist nurses. Updates for training are offered annually. We offer further training if there are pupils within school who have significant asthma symptoms or there are significant changes to the management of asthma in children.

All school staff will allow pupils **immediate** access to their own asthma medication when they need it.

What is Asthma?

Asthma is a common condition which affects the airways in the lungs. Symptoms occur in response to exposure to a trigger e.g. pollen, dust, smoke, exercise etc. These symptoms include cough, wheeze, chest tightness and breathlessness. Symptoms are usually easily reversible by use of a reliever inhaler, but all staff must be aware that sufferers may experience an acute episode which will require rapid medical or hospital treatment.

Some children show similar symptoms to asthmatics and need an inhaler to treat their condition (e.g. post-viral wheeze).

Medication

Generally, only reliever inhalers should be kept in school. Usually these are blue in colour.

Immediate access to reliever inhaler is vital.

All inhalers are kept within the children's classrooms in a labelled box somewhere easily accessible. Should a child require their inhaler during the course of the day, this will be recorded in our First Aid log and parents will be notified.

Record Keeping

When a child with asthma joins this school, parents/carers will be asked to complete a School Asthma Card, giving details of the condition and the treatment required. Information will be added to our medical register, which is updated annually. This register will be updated more frequently if required using the information supplied by the parent/carer.

Physical Education

Taking part in sports is an essential part of school life and important for health and well-being and children with asthma are encouraged to participate fully. Symptoms of asthma are often brought on by exercise and, therefore, each child's labelled inhaler will be available at the site of the lesson.

School Trips/Residential Visits

The child's reliever inhaler will be readily available to them throughout the trip, being carried either by the child themselves or by the supervising adult in the case of Key Stage 1 children.

For residential visits, trained staff will assist children with being able to administer their inhaler(s). This will be recorded in the same manner as at school and parents/carers will be notified. It is the responsibility of the

parent/carer to provide written information about all asthma medication required by their child for the duration of the trip. Parents must be responsible for ensuring an adequate supply of in-date medication is provided.

Group leaders will have appropriate contact numbers with them.

Training.

On an annual basis, **all** staff will receive training on signs and symptoms of asthma and how to treat it.

Asthma Education for pupils

All children are made aware of fellow classmates who are asthmatic and what to do in case of an emergency.

Concerns

If a member of staff has concerns about the progress of a child with asthma, which they feel may be related to poor symptom control, they will be encouraged to discuss this with the parent/carer and/or school nurse.

Storage of Inhalers

The following good practice guidelines for the storage of inhalers will be followed:

1. Inhalers will **NEVER** be locked away or kept in the school office.

2. All children with asthma will have rapid access to their inhalers as soon as they need them

3. Devices will always be taken with the child when moving out of the classroom for lessons, trips or activities.

N.B.

In the unlikely event of another pupil using someone else's blue inhaler there is little chance of harm. The drug in reliever inhalers is very safe and overdose is very unlikely.

Emergency Procedures

A flow chart is issued with this policy outlining the action to be taken in an emergency. Good practice suggests that copies are printed and displayed in the school office, staff room and relevant locations including classrooms where a pupil is known to have severe asthma.

Emergency Inhaler

From 1st October 2014 the Human Medicines Regulations will allow schools to keep a salbutamol inhaler (blue) for use in an **emergency**, for example where a child, who is a **known asthmatic, is experiencing significant symptoms and** has not got their own blue inhaler with them or it is found to be empty. We hold an emergency inhaler in school for use by children with asthma. Parents will be informed if the emergency inhaler has been used (Appendix B).

If a blue reliever inhaler is available follow flow chart.

Responsibilities

Parents/Carers have a responsibility to:

- Tell the school that their child has asthma.
- Ensure the school has complete and up to date information regarding their child's condition.
- Inform the school about the medicines their child requires during school hours.
- Inform the school of any medicines their child requires while taking part in visits, outings or field trips and other out of school activities.
- Inform the school of any changes to their child's medication.

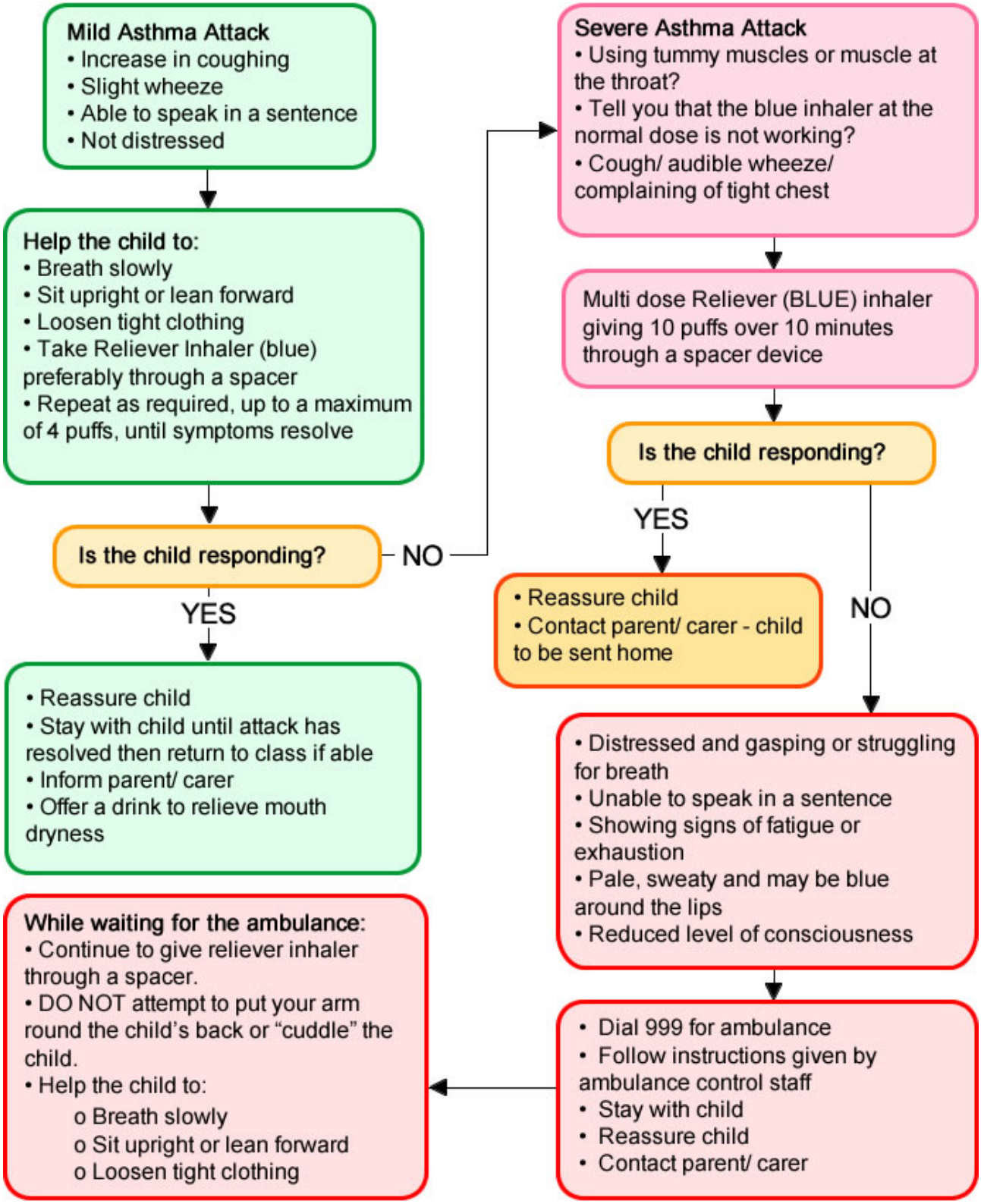
- Inform the school if their child is or has been unwell which may affect the symptoms e.g. symptoms worsening or sleep disturbances due to symptoms.
- Ensure their child's inhaler (and spacer where relevant) is labelled with their child's name.
- Regularly check the inhalers kept in school to ensure there is an adequate amount of medicine available and that it is in date.

All school staff (teaching and non-teaching) have a responsibility to:

- Understand the school asthma policy.
- Know which pupils they come into contact with have asthma.
- Know what to do in an asthma attack.
- Allow pupils with asthma immediate access to their reliever inhaler.
- Inform parents/carers if a child has had an asthma attack.
- Inform parents if they become aware of a child using more reliever inhaler than usual.
- Ensure inhalers are taken on external trips/outings.
- Be aware that a child may be more tired due to night time symptoms.
- Liaise with parents/carers, school nurse, SENCO, etc. if a child is falling behind with their work because of asthma

Updated July 2025.
Review date July 2026.

Asthma Management Flow Chart



Further Information

Asthma UK

Summit House

70 Wilson Street

London

EC2A 2DB

Specialist advice line: 0800 121 6244 www.asthma.org.uk

School Asthma Card

To be filled in by the parent/carer

Child's name

Date of birth D D M M Y Y

Address

Parent/carer's name

Telephone – home

Telephone – mobile

Email

Doctor/nurse's name

Doctor/nurse's telephone

This card is for your child's school. **Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year.** Medicines and spacers should be clearly labelled with your child's name and kept in agreement with the school's policy.

Reliever treatment when needed

For shortness of breath, sudden tightness in the chest, wheeze or cough, help or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.

Medicine	Parent/carer's signature

If the school holds a central reliever inhaler and spacer for use in emergencies, I give permission for my child to use this.

Parent/carer's signature Date

D D M M Y Y

Expiry dates of medicines

Medicine	Expiry	Date checked	Parent/carer's signature

Parent/carer's signature Date

D D M M Y Y

What signs can indicate that your child is having an asthma attack?

Does your child tell you when he/she needs medicine?

☐ Yes ☐ No

Does your child need help taking his/her asthma medicines?

☐ Yes ☐ No

What are your child's triggers (things that make their asthma worse)?

☐ Pollen ☐ Stress

☐ Exercise ☐ Weather

☐ Cold/flu ☐ Air pollution

If other please list

Does your child need to take any other asthma medicines while in the school's care?

☐ Yes ☐ No

If yes please describe

Medicine	How much and when taken

Dates card checked

Date	Name	Job title	Signature / Stamp

To be completed by the GP practice

What to do if a child is having an asthma attack

1. Help them sit up straight and keep calm.
2. Help them take one puff of their reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
3. **Call 999 for an ambulance if:**
   - their symptoms get worse while they're using their inhaler – this could be a cough, breathlessness, wheeze, tight chest or sometimes a child will say they have a 'tummy ache'
   - they don't feel better after 10 puffs
   - you're worried at any time.
4. You can repeat step 2 if the ambulance is taking longer than 15 minutes.

asthma UK

Any asthma questions?
Call our friendly helpline nurses
0300 222 5800
(Monday-Friday, 9am-5pm)
www.asthma.org.uk

Appendix B

Letter to inform parents of emergency SALBUTAMOL INHALER use

Child's name:…… Class:……

Date:……

Dear……

This letter is to formally notify you that…… has had problems with his/her breathing today. This happened when

……

……

……

*They did not have their own asthma inhaler with them, so a member of staff helped them use the emergency asthma inhaler containing salbutamol. They were given …….puffs.

* Their own asthma inhaler was not working, so a member of staff helped them use the emergency asthma inhaler containing salbutamol. They were given …….puffs.

*delete as appropriate

Although they soon felt better, we would strongly advise that you have your child seen by your doctor as soon as possible.

Yours sincerely

Elizabeth Hamilton-Thorpe
Headteacher