



Asthma Policy

Signed:

Chair of Governors: A. Jenkins *A. Jenkins*

Headteacher: S. Stevenson *S. Stevenson*

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This policy has been written with advice from Asthma UK and the School Health Service.

Crackley Bank Primary School: -

- welcomes all children with asthma
- recognises that asthma is an important condition affecting many children
- encourages and helps children with asthma to participate fully in school life
- recognises the need for immediate access to inhalers
- does all it can to make sure that the school environment is favourable to asthmatics
- ensures that all staff understand asthma and take part in asthma training
- understands what to do in the event of a child having an asthma attack and will, if necessary, give emergency treatment and inform parents accordingly
- works in partnership with children, parents, staff, governors and the school health service to ensure the successful implementation of this asthma policy.

Regulations regarding the emergency supply of salbutamol inhalers in schools have been changed. Amendments have been made to the Human Medicines Regulations 2012 to allow the supply of salbutamol inhalers to schools. Prior to the change in legislation it was illegal for schools to hold their own supplies of salbutamol inhalers due to its legal classification as a prescription only medicine (POM). The amendments that will come into effect from the 1st October 2014 will allow schools to keep small quantities of salbutamol inhalers onsite for emergency use in the treatment of acute asthma attacks. Crackley Bank Primary School has two inhalers for emergency use, along with two different types of spacer (younger child face mask and older child spacer). If this has to be used with any child in school, parents will be contacted immediately.

1. Crackley Bank Primary School recognises that asthma is important condition affecting many school children and positively welcomes all pupils with asthma.
2. This school encourages children with asthma to achieve their potential in all aspects of school by having a clear policy that is understood by school staff and pupils. Supply teachers and new staff are also made aware of the policy. Appropriate teaching staff and non-teaching staff receive asthma training from the school nurse and the training is updated at regular intervals. We also have fully trained first aiders.
3. When a child joins the school the parents are asked to inform us if their child has asthma. It is also important that parents inform the school if their child **subsequently** develops asthma. All parents of children with asthma are asked to give us information about their child's medication and their signs and symptoms of an asthma attack. Parents complete an asthma consent form which is kept in the School Office for our records. From this information the school puts together an Asthma care plan which details the medication, where the inhaler is kept, the expiry date of the inhaler. These plans are signed by the school staff and parents, by signing the care plan, parents are giving their permission for the emergency inhaler to be used if required. The care plans form our asthma register. If the child's medication changes parents are asked to inform the school. These care plans are reviewed annually and updated as needed.
4. Immediate access to reliever inhalers is vital. Children are encouraged to carry their own reliever inhaler as soon as the parent, doctor and class teacher agree they are mature enough.

The reliever inhalers of younger children are kept in the classroom storeroom, in a readily accessible place, depending on the child's needs. Reliever inhalers are taken with the children when they go on a school trip. All reliever inhalers must be labelled with the child's name by the parent. We have a register of all children who have an inhaler. School staff are not required to administer medication to children except in an emergency, however many of our staff are happy to do this. **All school staff will let children take their medication when they need to.**

5. Taking part in PE is an essential part of school life and children with asthma are encouraged to participate fully. Teachers are aware of which children in their class have asthma and they will remind children whose asthma is triggered by exercise to take their reliever inhaler before the lesson. If a child needs to use their reliever inhaler during the lesson they will be able to do so.
6. The school does all that it can to ensure that the school environment is favourable to children with asthma. The school has a non-smoking policy and is aware of the possible effects of keeping pets in the classroom. As far as is possible the school does not use chemicals in science or art that are potential triggers for children with asthma.
7. If a child is missing a lot of school because of asthma the class teacher will try to provide work for the child to do at home. If the child starts to fall behind in class, the teacher will talk to the school nurse and the SENDCo about the situation. The school recognises that it is possible for children with asthma to have special educational needs because of asthma.
8. All staff who come into contact with children with asthma are guided what to do in the event of an asthma attack by the posters which are located on display in classrooms and around the school. The following procedure is displayed on the poster.

GUIDANCE IN THE EVENT OF AN ASTHMA ATTACK

- Keep calm
- Encourage the child or young person to sit up and slightly forward – do not hug or lie them down
- Make sure the child or young person takes two puffs of reliever inhaler (usually blue) immediately – preferably through a spacer
- Ensure tight clothing is loosened
- Reassure the child

If there is no immediate improvement: -

Continue to make sure the child or young person takes one puff of reliever inhaler every minute for five minutes or until their symptoms improve.

Call 999 or a doctor urgently if: -

- The child or young person's symptoms do not improve in 5–10 minutes.
- The child or young person is too breathless or exhausted to talk.
- The child or young person's lips are blue.



- You are in doubt.

Ensure the child or young person takes one puff of their reliever inhaler every minute until the ambulance or doctor arrives.

After a minor asthma attack

- Minor attacks should not interrupt the involvement of a pupil with asthma in school. When the pupil feels better they can return to school activities.
- The parents/carers must always be told if their child has had an asthma attack.

Important things to remember in an asthma attack

- Never leave a pupil having an asthma attack.
- If the pupil does not have their inhaler and/or spacer with them, send another adult or pupil to their classroom or assigned room to get their spare inhaler and/or spacer.
- In an emergency situation school staff are required under common law, duty of care, to act like any reasonably prudent parent.
- Reliever medicine is very safe. During an asthma attack do not worry about a pupil overdosing.
- Send another pupil to get another teacher/adult if an ambulance needs to be called.
- Contact the pupil's parents or carers immediately after calling the ambulance/doctor.
- A member of staff should always accompany a pupil taken to hospital by ambulance and stay with them until their parent or carer arrives.
- Generally staff should not take pupils to hospital in their own car. However, in some situations it may be the best course of action.
- Another adult should always accompany anyone driving a pupil having an asthma attack to emergency services.

Useful documents for school from Asthma UK:-

Asthma awareness for school staff

<https://www.asthma.org.uk>

Asthma awareness for parents

<https://www.asthma.org.uk/advice/child/life/school>

Written by Lisa Taylor, SENDCo – Policy reviewed annually

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