POLICY

For

Asthma

Amended

September 2019	**September 2022**	**September 2025**
September 2020	**September 2023**	
September 2021	**September 2024**	

Striving for excellence, caring for all
Within a loving and caring Christian environment.

As a RRS (Rights Respecting School - UNICEF) this policy upholds the following articles from the UNCRC (United Nations Convention of the Rights of the Child)
Article 2: Everyone has equal rights whatever their race, religion, ability, whatever they think or say or whatever their family
Article 3: The best interests of the child must be as top priority in all actions concerning children
Article 28: Every child has the right to an education
Article 29: Every child has the right to be the best they can

Our School:
Recognises that asthma is a widespread, serious but controllable condition and we welcome all pupils with asthma.

At the beginning of each school year or when a child joins the school, parents and carers will be asked if their child has any medical conditions. If a child or young person has asthma this will be documented.

There will be a number of staff members in the school who are trained to administer inhalers where needed.

Every asthmatic child should have a reliever inhaler and spacer in school. This will be stored with their individual school action plan for those children with severe asthma. This action plan will include parental consent for staff to administer medicine.

The school recognises that pupils always need immediate access to reliever inhalers including all out of school activities. These can be kept in a small bag/ rucksack or box.

Children with asthma are encouraged to take control of their condition and feel confident in the support they receive from school. In case of an emergency where a child is unable to self-administer their inhaler all staff should feel confident in managing this situation. All staff must understand their duty of care to children in an event of an emergency.

Will work in partnership with parents, carers, school governors, health professionals, school staff and children to ensure the successful implementation of a school asthma policy.

Our School is asthma friendly:
It is a no smoking/vaping environment.

Who suffers from asthma in school?
A list of children with medical conditions, including asthmatic children, is kept on Integris and in the front of class registers or register folders (this is accessible to non-teaching staff e.g. midday supervisors and also supply teachers).
In school there is an 'Ashma Champion' who has responsibility for ensuring that an up-to-date register is kept for all children who have asthma.

This list gives brief details of each child's medication. (It is the responsibility of the parents/carers to inform the school of any changes in treatment and the list will be amended accordingly).

Responding to Asthma Symptoms and an Asthma Attack
See Appendix 1

Inhalers
Our school has clear guidance on the administration of medicine in school – please see Medicines in School and Supporting Children with Medical Conditions policies

Children's asthma medical packs should include:

- the pupil's name and date of birth
- the name of the medicine
- expiry date
- the prescriber's instructions for administration, including dose and frequency
- Individual Asthma Action plan provided by a medical professional

Children are encouraged to take responsibility (wherever possible) for their own inhalers. These must be clearly labelled with the child's name and available at all times. Younger children's inhalers are kept with the class teacher and is available at all times. Inhalers must be taken on all school visits/residential visits.

Emergency inhalers are held in school and can be used in school following Guidance on the Use of Emergency Salbutamol Inhalers in Schools, March 2015. See also our Supporting Children with Medical Conditions policy. Only children who have been diagnosed with asthma, and prescribed a reliever inhaler **or** who have been prescribed a reliever inhaler **and** for whom written parental consent has been given can use the emergency inhalers. (Appendix 2).

There are a number of staff who have attended Paediatric and/or 3 Day First Aid Training and who can support in the administration of an emergency inhaler.

Emergency inhalers are stored in each school's front office. The Senior Administrator and the SENCo will check the storage, supply and care of the inhaler and spacer.

Following the administration of these inhalers, parents will be notified in writing. (Appendix 3)

Sport:
Taking part in sports, games and activities is an essential part of school life for all pupils. The health benefits of exercise are well documented, and this is also true for children and young people with Asthma. Consequently, it is vital that pupils with asthma are encouraged to participate fully in all physical education lessons. Teachers should remind pupils whose asthma is triggered by exercise, to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after exercise.

The school ensures the whole environment which includes physical, social, sporting, and educational activities is inclusive for children with asthma.

September 2025
Review September 2026

References:

1. Asthma UK
   https://www.asthma.org.uk/about?gclid=CJqmpbWsrM0CFYdAGwod4KQEnQ&gclid=CJqmpbWsrM0CFYdAGwod4KQEnQ

2. Department of Health (2015), Guidance on the use of emergency salbutamol inhalers in schools

   https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/416468/emergency_inhalers_in_schools.pdf

Appendix 1

HOW TO RECOGNISE AN ASTHMA ATTACK

The signs of an asthma attack are

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences. Some children will go very quiet
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE CHILD

- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed

WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Check child is on school asthma list
- Use the child's own inhaler. If not available and permission is held, use the emergency inhaler stored in the front office at each school
- Remain with the child while the inhaler and spacer are brought to them
- Immediately help the child to take two separate puffs of salbutamol via the spacer
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better
- If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way

The child's parents or carers should be contacted after the ambulance has been called and a member of staff should always accompany a child taken to hospital by ambulance and stay with them until a parent or carer arrives.

Appendix 2

CONSENT FORM FOR USE OF EMERGENCY SALBUTAMOL INHALER

I can confirm that my child has been diagnosed with asthma and has been prescribed a reliever inhaler / has been prescribed an inhaler for another reason [delete as appropriate].

My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.

In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:

Date: ……

Name
(print)……

Child's name:
……

Class:
……

Appendix 3

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 took place at …….. (time) …….. (where).

The following action was taken:

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

[*Delete as appropriate*]

Yours sincerely,