



Learning together
with God's love

HOLY TRINITY C E (A) PRIMARY SCHOOL Asthma Policy

Vision

We aspire to be a happy, confident and caring community where children are motivated to flourish and achieve their full potential in a supportive learning environment, underpinned by a strong Christian ethos.

1 John 4:16 'God is love and those who live in love live in God, and God lives in them.'

POLICY	Asthma Policy
SOURCE	Holy Trinity CE (A) Primary School
WRITTEN BY	WSCC model reviewed by SENCo
REVIEWED BY	Reviewed annually in line with latest DfE guidance
REVIEWED	SENDCO/Headteacher – September 2023
APPROVED	FGB 19.09.23
REVIEW DUE	Autumn 2026

School Asthma Policy Holy Trinity CofE (A) Primary School

The school:

- Recognises that asthma is a widespread, serious but controllable condition and the school welcomes all pupils with asthma.
- Ensures that pupils with asthma can and do participate fully in all aspects of school life, including art, PE, science, educational visits and out of hours activities.
- Recognises that pupils with asthma need immediate access to reliever inhalers at all times.
- Keeps a record of all pupils with asthma and the medicines they take
- Endeavours that the whole school environment, including the physical, social, sporting and educational environment, is favourable to pupils with asthma.

Ensures that all staff (including supply teachers and support staff) who have pupils with asthma in their care, know who those pupils are and know the school's procedure to follow in the event of an asthma attack.

Training

It is best practice that all school staff are trained to recognise the symptoms of worsening asthma, how to respond in an emergency and how to administer of reliever medication (inhaler).

Asthma medicines

Immediate access to reliever medicines is essential. The reliever inhalers of children are kept in the child's classroom and are taken with the child during off-site visits and outdoor activities.

It is advised that the school is provided with a labelled, in date spare reliever inhaler. These are held in case the pupil's own inhaler runs out, or is lost or forgotten and are kept in the medical room.

All inhalers must be labelled with the child's name by the parent/carer and be presented in the original packaging. It is the parent's responsibility to ensure the reliever inhaler is in date, also to inform the school if their child is likely to need their reliever more often at certain times on the year e.g. if they have a cold or hayfever.

The school will ensure that a spare spacer and reliever inhaler is purchased for emergency use. If used, this spacer should be given to the child and replaced as they should not be shared.

If a parent/carer has stated that their child requires an inhaler in school but does not supply an in-date inhaler, the school will take the following action:

- Phone the parent/carer and request that the inhaler is brought into school without delay. The phone call will be logged on the pupil's Asthma Information Form ('for office use only' box) Further conversations may be appropriate, at the discretion of the school.
- If the parent/carer fails to supply the inhaler as requested, write to the parent using the example letter. This repeats the request for the inhaler and states that without the inhaler, in the event of an asthma attack, staff will be unable to follow the usual Asthma Emergency inhaler procedures and will be reliant on calling 999 and awaiting the Emergency Services. The letter will be filed with the child's asthma information form.

School staff who agree to administer medicines are insured by the local authority when acting in agreement with this policy. All school staff will facilitate pupils to take their medicines when they need to.

For information on how to clean spacers please go to www.asthma4children

Record keeping

When a child joins the school, parents/carers are asked to declare any medical conditions (including asthma) that require care within school, for the school's records. At the beginning of each school year, parents are requested to update details about medical conditions (including asthma) and emergency contact numbers.

All parents/carers of children with asthma are given an asthma information form to complete and return to school. From this information the school keeps its asthma records. All teachers know which children in their class have asthma. Parents/guardians are required to update the school about any change in their child's medication or treatment.

Records will be kept for the administration of asthma medication.

All children with asthma will have a personal asthma action plan provided by their GP, asthma nurse or hospital.

Consent will be gained from a parent/guardian to administer the school's emergency inhaler and a register kept with the inhaler that details which parents/guardians have given permission for the school inhaler to be administered. It is the schools responsibility to keep the register up to date.

Exercise and activity - PE and games

All children are encouraged to participate fully in all aspects of school life including PE. Children are encouraged/reminded to use their inhalers before exercise (if instructed by the parent/carer on the asthma form) and during exercise if needed. Staff are aware of the importance of thorough warm up and down. Each pupil's inhaler will be labelled and kept in a box at the site of the lesson.

School Environment

The school endeavours to ensure that the school environment is favourable to pupils with asthma. The school will take into consideration, any particular triggers to an asthma attack that an individual may have and will seek to minimise the possibility of exposure to these triggers.

Out of school hours

A register of children attending any after school or out of school clubs will be taken and passed onto the relevant member in charge of the group. Children who take part in after school activities will have access to their reliever inhaler at all times under the guidance of the member in charge of the group.

Asthma Attacks – School's Procedure

In the event of an asthma attack, staff will follow the school procedure as set out in the West Sussex County Council Asthma Toolkit:

- Encourage the pupil to use their inhaler.
 - Summon a first aider who will bring the pupil's Asthma Information Form and will ensure that the inhaler is used according to the dosage on the form.
 - If the pupil's condition does not improve or worsens, the First Aider will follow the 'Emergency asthma treatment' procedures.
 - The First Aider will call for an ambulance if there is no improvement in the pupil's condition.
 - Reliever inhalers should only be given every 4 hours, if the pupil is getting symptoms in the time between doses this indicates the onset of an attack.
-
- The child's written Asthma Care Plan should be sent with the child if they go to hospital.

Mild Symptoms:

- **Cough**
- **Feeling of 'tight chest'**
- **Wheeze**

Ensure that the pupil has access to their reliever (blue inhaler)

- **Sit the pupil down in a quiet place if possible. Do not lie the pupil down**
- **Younger pupils or those using 'puffer' / aerosol style inhalers should use a spacer**
- **Allow the pupil to take 2 puffs of their inhalers**
- **Assess effect and if fully recovered, the child may re-join usual activities**
- **Document dose and time reliever inhaler given**

Moderate Symptoms:

- **Increased cough and wheeze**
- **Mild degree of shortness of breath but able to speak in sentences**
- **Feeling of 'tight chest'**
- **Breathing a little faster than usual**
- **Recurrence of symptoms / inadequate response to previous 'puffs'**

Ensure that the pupil has access to their reliever (blue inhaler)

- **Sit the pupil down in a quiet place if possible and loosen any tight clothing around their neck**
- **Younger pupils or those using 'puffer' style inhalers should use a spacer**
- **Allow the pupil to take 2 - 4 puffs of the inhaler**
- **Assess effect, if fully recovered the pupil may re-join activities but a parent/carer should be informed**

- **Document dose and time reliever inhaler given**

Severe symptoms:

- **Not responding to reliever medication**
- **Breathing faster than usual, finding it hard to breathe**
- **Difficulty speaking in sentences**
- **Difficulty walking/lethargy**
- **Pale or blue tinge to lips/around the mouth**
- **Appears distressed or exhausted**

Ensure that the pupil has access to their reliever (blue inhaler)

- **Sit the pupil down in a quiet place if possible and loosen any tight clothing around their neck. Try to keep calm.**
- **Younger pupils or those using 'puffer' / aerosol style inhalers should use a spacer**
- **Help the child take one puff of their reliever inhaler every 30-60 seconds with a spacer, up to a maximum of 10 puffs.**
- **If they don't have their reliever inhaler, or it's not helping, or if you are worried at any time, call 999 for an ambulance.**
- **Contact the child's parents/carers.**
- **If symptoms are no better step 3 can be repeated and if the ambulance has still not arrived call 999 immediately and seek advice from the call operator.**

Remember to document any use of reliever inhaler and inform the pupil's parent or carer of the dose given and time.

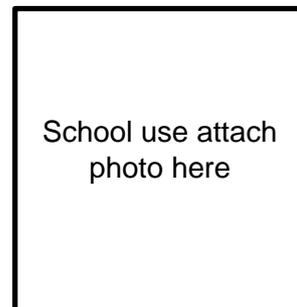
Individual protocol for Mild Asthma

Please complete the questions below, sign this form and return without delay.

CHILD'S NAME.....

D.O.B.

Class



Contact Information

Name					Relationship to pupil			
Phone numbers	Work		Home		Mobile		Other	

If I am unavailable, please contact:

Name					Relationship to pupil			
Phone numbers	Work		Home		Mobile		Other	

1. Does your child need an inhaler in school? Yes/No (delete as appropriate)

2. Please provide information on your child's current treatment. (Include the name, type of inhaler, the dose and how many puffs?)

.....
Do they have a spacer?

3. What triggers your child's asthma?

.....
4. It is advised that pupils have a spare inhaler in school. Spare inhalers may be required in the event that the first inhaler runs out is lost or forgotten. Inhalers must be clearly labelled with your child's name and must be replaced before they reach their expiry date. [The school will also keep a salbutamol inhaler for emergency use.](#)

Please delete as appropriate:

- My child carries their own inhaler YES/NO
- My child REQUIRES/DOES NOT REQUIRE a spacer and I have provided this to the school office
- I am aware I am responsible for supplying the school within date inhaler(s)/spacer for school use and will supply this/these as soon as possible. YES/NO

5. Does your child need a blue inhaler before doing exercise/PE? If so, how many puffs?

6. Do you give consent for the following treatment to be given to your child as recognised by Asthma Specialists in an emergency? - Yes/No (delete as appropriate)

Emergency Procedure – severe symptoms (see full schools asthma attack procedure)

- **Give 6 puffs of the blue inhaler via a spacer**
- Reassess after 5 minutes
- If the child still feels wheezy or appears to be breathless, they should have a further **4 puffs of the blue inhaler via a spacer**
- Reassess after 5 minutes

- **If their symptoms are not relieved with 10 puffs of blue inhaler, then this should be viewed as a serious attack:**
- **CALL AN AMBULANCE and CALL PARENT**
- **While waiting for an ambulance continue to give 10 puffs of the reliever inhaler every few minutes**

Please sign below to confirm you agree the following:

- I agree to ensure that my child has in-date inhalers and a spacer (if prescribed) in school.
- I give consent for the school to administer my child's inhaler in accordance with the emergency treatment detailed above.
- I agree that the school can administer the school emergency salbutamol inhaler if required.
- I agree that my child's medical information can be shared with school staff responsible for their care.

Signed: Print name..... Date.....

I am the person with parental responsibility

Please remember to inform the school if there are any changes in your child's treatment or condition. Thank you

Parental Update (only to be completed if your child no longer has asthma)	
My child no longer has asthma and therefore no longer requires an inhaler in school or on school visits.	
Signed <i>I am the person with parental responsibility</i>	Date

For office use:

	Provided by parent/school	Location (delete as appropriate)	Expiry date	Date of phone call requesting new inhaler	Date of letter (attach copy)
1 st inhaler		With pupil/In classroom			
2 nd inhaler Advised		In office/first aid room			

Spacer (if required)					
Record any further follow up with the parent/carer:					

Example letter to send to parent/carer who has not provided an in-date inhaler. Please amend as necessary for the individual circumstances.

Dear (Name of parent)

Following today's phone call regarding (name of pupil)'s asthma inhaler. I am very concerned that in date medication has not been provided. You have confirmed on (name of pupil)'s Individual Protocol (name of pupil) requires an inhaler in school and you have agreed to provide the medication. Please ensure that:

- an inhaler
- a spacer

are provided without delay.

If (name of pupil) no longer requires an inhaler/auto injector, please inform the school in writing as soon as possible.

Please be aware that in the absence of in date medication, should (name of pupil) suffer an attack, if you have given your consent staff will administer the schools reliever inhaler. However, if you have not given consent for the school reliever inhaler to be administered staff will not be able to follow suitable emergency procedures. They will be reliant on calling 999 and awaiting the Emergency Services.

Yours sincerely

References

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/416468/emergency_inhalers_in_schools.pdf

