

St Mary's Church of England Primary School



Learn. Grow. Achieve. Flourish.

Asthma Policy and Procedure

POLICY: Asthma Policy & Procedures
APPROVED BY: Full Governing Board
APPROVED DATE: 25 March 2023
REVIEW DATE: 25 March 2025
This policy is reviewed biennial

Our School Vision

St Mary's school vision is to embrace a Christian like way of living, learning and teaching.

As a Church of England primary school, we value and are ambitious for all children and are committed to providing a positive, happy, safe and stimulating environment for them to enjoy and excel in their learning; grow in confidence, resilience and independence; achieve their full potential and flourish as individuals.

The Principles of our school Asthma Policy

- The School recognises that asthma is an important condition affecting many school children and welcomes all pupils with asthma
- We aim to ensure that children with asthma participate fully in all aspects of school life including PE and sport
- We recognise that immediate access to reliever inhalers is vital
- We keep records of children with asthma and the medication they take
- We ensure the school environment is favourable to children with asthma
- We ensure that other children understand asthma
- We ensure all staff who come into contact with children with asthma know what to do in the event of an asthma attack
- We work in partnership with all interested parties including all school staff, parents, governors, doctors and nurses, and children to ensure the policy is implemented and maintained successfully

This policy has been written with advice from the Department for Education and Employment, National Asthma Campaign, the local education authority, the school health service, parents, the governing board and pupils

1. This school recognises that asthma is an 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 life by having a clear policy that is understood by school staff, their employers (the local education authority) and pupils. Supply teachers and new staff are ALSO MADE AWARE OF THE POLICY.

All teachers, and at least one member of staff in each class is provided with asthma training on a regular basis. Our medical officer and first aider, has a list of school staff trained in this area. This training is provided by the School Nursing Service and also covers Severe Allergic Reactions, Epilepsy and Asthma.

Medication

Immediate access to a reliever inhaler is vital.

Children are encouraged to carry their inhaler as soon as their parents, carer, doctor, nurse or class teacher agree they are mature enough to manage their own medication. Children should always tell their class teacher or first aider when they have had occasion to use their inhaler.

Records are kept each time an inhaler is used. The reliever inhalers of children are kept in their individual classroom in a designated medical green backpack.

All inhalers must be labelled with the child's name by the parent.

School staff are not required to administer medication to children except in an emergency however many of our staff are happy to do this. School staff who agree to do this are insured by the local education authority when acting in accordance with this policy.

All school staff will let children take their own medication when needed.

Record Keeping

At the start of each school year, or when a child joins the school, parents are asked to inform the school if their child is asthmatic. All parents of children with asthma are required to complete a School Asthma action plan and return it to the school.

From this information the school keeps its asthma register which is displayed on Medi Tracker in the first aid room, hard copies are sent to the class with the inhaler and the medical officer also keeps hard copies. If any changes are made to a child's medication it is the responsibility of the parents or carer to inform the school.

Asthma inhalers for each child are regularly checked for expiry dates by a named member of staff (medical officer – Julie McMahan).

Each child's inhaler is kept in their own classroom in a named wallet containing their individual medication and asthma action plan, in their class designated first aid area. All staff members are responsible for acquainting themselves with the triggers of a possible attack (allergies, colds, cough, cold weather) for each individual child in their care. All this information is found in their medication wallet along with their medication.

PE

Taking part in sports is an essential part of school life. Teachers are aware of which children have asthma from the asthma register. Children with asthma are encouraged to participate fully in PE. Teachers will remind children whose asthma is triggered by exercise to take their reliever inhaler before the lesson. The green medical backpack will be taken to all PE lessons.

Each child's inhalers will be labelled and kept in the medical backpack at the site of the lesson.

If a child needs to use their inhaler during the lesson, they will be encouraged to do so.

Records are kept every time a child uses their inhaler.

Two members of staff countersign the medical administration form.

School Trips and Outside Activities

When a child is away from the school classroom on a school trip, club, outside sport or PE, their inhaler and action plan will accompany them and be made available to them at all times.

The School Environment

The school does all that it can to ensure the school environment is favourable to children with asthma. The school does not keep furry and feathery pets and has a non-smoking policy.

On occasion, the Key Stage One classes do take part in the egg/chick scheme. Teachers will be aware of any child who has a fur or feather allergy and will act appropriately.

As far as possible the school does not use chemicals in science and art lessons that are potential triggers for children with asthma.

Children are encouraged to leave the room and go and sit in the break out area if particular fumes trigger their asthma.

Making the School Asthma Friendly

The school ensures that all children understand asthma. Asthma can be included in Key Stages 1 and 2 in science, design and technology, geography, history and PE of the national curriculum. Children with asthma and their friends are encouraged to learn about asthma; information for children and teens can be accessed from the following website www.asthma.org.uk.

When a Child is falling behind in lessons

If a child is missing a lot of time from school because of asthma or is tired in class because of disturbed sleep and falling behind in class, the class teacher will initially talk to the parents. If appropriate the teacher will then talk to the school nursing team and special educational needs coordinator about the situation.

The school recognises that it is possible for children with asthma to have special education needs because of asthma.

Asthma Attacks

All staff who come into contact with children with asthma know what to do in the event of an asthma attack. The school follows the following procedure, which is clearly displayed in all classrooms.

1. Ensure that the reliever inhaler is taken immediately.
2. Stay calm and reassure the child.
3. Help the child to breathe by ensuring tight clothing is loosened.

After the attack

Minor attacks should not interrupt a child's involvement in school. When they feel better they can return to school activities.

The child's parents must be informed about the attack.

Emergency procedure

If the pupil does not feel better or you are worried at any time before reaching 10 puffs from the inhaler, call 999 for an ambulance.

If the ambulance has not arrived after 10 minutes, give an additional 10 puffs as detailed above.

In the event of an ambulance being called, the pupil's parents or carers should always be contacted.

In the event of a pupil being taken to hospital by ambulance, they should always be accompanied by a member of staff until a parent or carer is present.

This policy should be read with the Medical Conditions Policy and First Aid policy.

Ratified on behalf of the Governing Board.

Name: Mrs P O'Brien

Position: Headteacher

Date: 25 March 2023



ASTHMA ACTION PLAN

CHILD'S NAME:

SCHOOL

LOCATION OF INHALER.....

TYPE OF INHALER.....

PHOTO

NHS NUMBERDATE OF BIRTH

For exercise-induced asthma

Take ____ puffs of the reliever (usually blue) via spacer 10-15 minutes before physical exercise

In the event of any of the below:

- | | |
|---------------------------------|--|
| <input type="checkbox"/> WHEEZE | <input type="checkbox"/> TIGHT or SORE CHEST |
| <input type="checkbox"/> COUGH | <input type="checkbox"/> SHORTNESS OF BREATH |
- Administer reliever medication (usually blue) via Spacer
 - Give 2 puffs of reliever every 2 minutes (maximum 10 puffs)
 - If reliever is needed more than 4-hourly, medical advice/attention should be sought and parents contacted.

EMERGENCY CONTACTS

1. Name.....

Number.....

2. Name.....

Number.....

CHILD'S TRIGGERS

.....
.....

PARENTAL CONSENTS (tick boxes)

I consent to the administration of the prescribed inhaler by members of staff and will notify school if there are any changes to my child's medication and personal details. I will provide my child's inhaler and spacer in school and will ensure that they are in date.

I consent to school staff administering the emergency school inhaler should my child's personal inhaler be unavailable

I consent for this plan to be on display in school and I will notify the school of any changes for review

Signature of Parent/Carer.....

Date:

IF NO IMPROVEMENT

SIGNS OF AN ACUTE ASTHMA ATTACK

If the child's reliever inhaler (usually blue) + spacer are not helping, and/or the child presents with any of the following:

- They can't talk or walk easily
- They are breathing hard and fast
- Their lips turn blue
- They are coughing or wheezing incessantly

During this time the child should:

- Sit up – DO NOT LIE DOWN
- Be encouraged to stay calm
- Be accompanied by a member of staff
- Give 2 puffs of reliever every 2 minutes (maximum 10 puffs)

IF NO IMPROVEMENT AFTER 10 PUFFS

CALL 999 IMMEDIATELY

- ❖ CONTINUE TO ADMINISTER THE INHALER IN CYCLES OF 10 PUFFS, AS ADVISED ABOVE, EVERY 10 MINUTES UNTIL THE AMBULANCE ARRIVES
- ❖ CONTACT PARENT/CARER AND ACCOMPANY CHILD IN THE AMBULANCE UNTIL PARENT/CARER ARRIVES

