# St Mary's Church of England Primary School

Learn. Grow. Achieve. Flourish.

# Asthma Policy and Procedures

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| POLICY: Asthma policy and Procedures<br>APPROVED BY: Full Governing Body/Headteacher<br>APPROVED DATE:<br>REVIEW DATE:<br>This policy is statutory and will be reviewed annually or when required |

**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.**

***'I Instruct you in the way of wisdom and lead you along straight paths' Proverbs 4:11***

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## 1. Introduction

St Mary's school recognises that asthma is an important condition affecting many school children and positively welcomes all pupils and adults with asthma.

St Mary's 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.

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.

While formal training is not offered due to the challenge of finding suitable training for staff, Understanding Asthma on Educare offers some online training. This training should be undertaken by staff annually. First Aid trained staff undertake paediatric asthma awareness as part of their First Aid Training.

This policy should be considered in conjunction with the First Aid Policy and The Medical Conditions Policy.

## 2. Aims

- To ensure the safety of all asthma sufferers on the school site and when attending offsite school trips
- To ensure that asthma sufferers participate fully in all aspects of school life including PE and sport
- To ensure immediate access to medication
- To ensure that detailed records are kept regarding medication usage and frequency of triggers
- To ensure the school environment is asthma friendly
- To ensure that all staff are familiar with asthma treatment processes
- To offer training to all stakeholders, where possible.

## 3. 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 below procedure:

- Stay calm and reassure the pupil
- Ensure that the reliever inhaler is taken immediately – 2 puffs initially then up to 10 in total taken if breathing doesn't improve.
- Position the pupil in a way that relieves breathing by opening up the lungs. One position – sitting backwards on a chair with arms folded along the chair back.
- If breathing does not seem to be improving or deteriorates, follow the **Emergency Procedure** below.

## 4. 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.
- While waiting for the ambulance, continue to monitor the pupil's breathing and continue to administer 2 puffs of reliever up to another 10.
- 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.

## 5. After the Attack

Minor attacks should not interrupt a child's involvement in school. When they feel better they can return to school activities.
When an attack is more severe, parents may be contacted to take pupils home.
The child's parents must be informed about the attack via Medical Tracker or the phone.

## 6. Medication

Immediate access to a reliever inhaler is vital.

*Medical bags must accompany the class to assemblies, PE, play and lunch time breaks and school trips and sporting events. It is the teacher's responsibility to ensure that children have their inhalers with them at all times.*

The pupils' reliever inhalers 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 our 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 asthma medication when needed.

## 7. 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 Medical Tracker in the first aid room and hard copies are sent to the class with the inhaler. A hard copy is kept by the Medical Officer and us updated each year with and updated photo, class changes and any changed in medication or dosage. If any changes are made to a child's medication it is the responsibility of the parents or carer to inform the school.

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.

Records are kept on Medical Tracker each time an inhaler is used by the pupil and an alert sent to parents.

## 8. Physical Education

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 and are then recorded on Medical Tracker when it is possible to do so.

## 9. School Trips and Outdoor 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.

## 10. The School Environment

The school does all that it can to ensure that 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.

## 11. Making the School Asthma Friendly

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.

## 12. 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 is falling behind in class, the class teacher will initially talk to the parents. If appropriate, the teacher will then speak 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.

## *Appendix 1: Asthma Action Plan*

Public Health Nursing 4 Slough

01753 373464 / 0800 7723578 - publichealthnursing4slough@nhs.net - www.publichealthnursing4slough.co.uk

# ASTHMA ACTION PLAN

CHILD'S NAME: SCHOOL

LOCATION OF INHALER..... TYPE OF INHALER.....

PHOTO

NHS NUMBER .....DATE 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:**

- WHEEZE
- TIGHT or SORE CHEST
- COUGH
- 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.

**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

**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*: .....

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