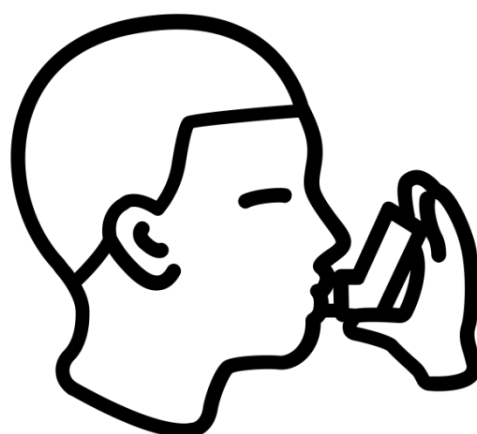


Asthma Policy



Whole School

Statement of Intent / Context

About one in eleven children have asthma and numbers are increasing. We want to make sure that having asthma does not mean children lose out when they are at school. Most children with asthma can have a full and active life. This policy will help pupils with the management of their asthma while they are at school and it is a supplement to the **‘Supporting Pupils with Medical Needs’** policy. For further guidance and information, please see associated Dept. of Health documents

Asthma register

- When a child joins the school, form SS12 should be completed; this alerts the school to any asthma needs.
- Parents are then required to complete the following forms:
 - My Asthma Plan' (Asthma UK)
 - Request for School to Administer Medication' form.Confirmation of this agreement has to be signed, usually by the Head teacher or a member of the SLT (see appendices 4 & 5 of the '**Management of Children with Medical Needs in Schools**' (Copies of this document can be found in either the School Business Manager's or SLT's offices).
- The return of this completed form will ensure that the pupil is placed on the school Asthma Register (see appendix 1). This is updated at least annually by Lorraine Parkins-Crick (School Business Manager).
- Children with more severe or unusual asthma will need to have an individual Health Care Plan. Staff should inform the designated teacher (currently J.Chappell) if they have concerns or queries.

Asthma Medication and Access to Inhalers

- Individual pupils' inhalers should be kept in a named container in their classrooms.
- Children are allowed access to their inhalers at any time in the school day, should they feel the need to use it. Pupils taking their inhaler should always be supervised by an adult and a record made of this on the individual's 'Pupil Medicine Record' (appendix 6). If the child appears to be needing their inhaler more frequently, staff need to monitor the situation closely and discuss this with parents at the earliest opportunity.
- Regular checks of inhaler expiry dates should be carried out and parents informed if a new inhaler is required.
- Inhalers should accompany the children when taking part in off-site activities or residential trips.
- Inhalers should be taken outside along with the register for fire drills.

Staff awareness and action in asthma emergencies

- All staff need to be able to manage attacks. Staff will do what could ***reasonably be expected by a parent*** in the circumstances prevailing at the time.
- All staff who work with children receive training and know what to do in an emergency for the children in their care.
- Training is refreshed for all staff at least once a year.
- For mild attacks children should take their usual reliever inhaler, as per instructions and be monitored closely afterwards for any signs of deterioration.
- For more severe attacks, use the following as guidance:

1. Ensure that the reliever medicine is taken

A reliever inhaler – usually blue, should quickly open up narrowed air passages.

2. Stay calm and reassure the child.

Attacks can be frightening, so stay calm. The child has probably been through it before. Listen carefully to what the child is saying. It is very comforting to have a hand to hold but do not put your arm around the child's shoulder as this is very restrictive.

3. Help the child to breathe.

Encourage the child to breathe slowly and deeply. Most children find it easier to sit upright or leaning forward slightly. Lying flat on the back is not recommended.

Loosen tight clothing around the neck and offer the child a drink of water.

After the attack:

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

Severe Attacks – further action if any of the following occur:

- The reliever has no effect after five to 10 minutes
 - The child is either distressed or unable to talk in sentences
 - The child has blue lips
 - The child is getting exhausted
 - You have any doubts at all about the child's condition.
1. One adult should stay with the pupil and use the reliever inhaler via a spacer while another adult dials 999 for ambulance and states that the child is having a severe asthma attack requiring immediate attention: The child should be supported in taking 1 puff on their reliever inhaler every 60 seconds up to 10 times. If the ambulance has not arrived during this timescale, this can be continued. The child should remain sitting up – not lying down or laid back in a chair.
 2. Inform parents of the situation and actions taken.
 3. The incident should then be recorded in the Asthma register in the main office by the person who dealt with the attack, and the entry should be signed and dated by them.

Forgotten or Lost Inhalers/Emergency Inhalers

- If a child's condition does not indicate the need to dial 999 i.e. not a severe attack, parents should be contacted immediately and the child monitored closely for any signs of deterioration in their breathing
- There are 3 emergency inhalers kept in a clearly labelled box. These are located by the First Aid supplies in KS1, KS2 and in Little Bridge.

Home/School Liaison

- Parents are asked to complete and update asthma records on admission, and to update them annually. They are also required to update them more frequently if the condition or medication changes.
- Absence of parental consent should not stop staff from acting appropriately in emergencies.

Minimising exposure to triggers

Where possible...

The school does all that it can to ensure the school environment is favorable to pupils with asthma. The school does not keep furry or feathered animals and has a definitive no-smoking policy. As far as possible the school does not use chemicals in cleaning agents, science and art lessons that are potential triggers for pupils with asthma.

Policy due for review in response to changes in NHS guidance

Policy Approval

.....

Policy approved by (Print name)	H Hale
Signature	
Position	Headteacher
Date	26.07.2023

Policy approved by (Print name)	N Martin
Signature	
Position	Chair of Governors
Date	25.09.23

Review Date	In response to changes in NHS guidance
--------------------	--