



Asthma Policy

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v1.0	School	Approved first version
v1.1	Policy Review Committee	Amends following review
v2.0	Policy Review Committee	Approved version

Inspiring children to care, learn and achieve

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Green Lane North, Timperley, Altrincham, Cheshire, WA15 7NQ



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Introduction

Asthma is a physical condition, not an emotional illness. It affects at least one in every ten children. An attack is caused by a sudden narrowing of the air passages making it difficult to breathe. Asthma can be controlled by, firstly avoiding known irritants or triggers and secondly, by inhaling specific, prescribed drugs.

Cloverlea Primary School:

- Recognises that asthma is an important condition affecting many school children and welcomes all pupils with asthma.
- Aims to ensure that all children with asthma participate fully in all aspects of school life including PE.
- Recognises that immediate access to reliever inhalers is vital.
- Keeps records of children with asthma and the medication they take.
- Is aware that a clean environment is important to people with asthma, and has a non-smoking policy.
- Ensures all staff who come into contact with children with asthma know what to do in the event of an asthma attack.
- Will 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.

Roles and Responsibilities

Governors

Governors have a responsibility to:

- Ensure the health and safety of their employees (all staff) and anyone else on the premises or taking part in school activities (this includes pupils). This responsibility extends to those staff and others leading activities taking place off site, such as visits, outings or field trips. Employers therefore have a responsibility to ensure that an appropriate asthma policy is in place
- Make sure the asthma policy is effectively monitored and regularly updated.

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Headteacher

Headteacher has a responsibility to:

- Plan an individually tailored school asthma policy with the help of school staff, school nurses, local education authority advice and the support of their employers.
- Plan the school's asthma policy in line with devolved national guidance.
- Liaise between interested parties – school staff, school nurses, parents, governors, the school health service and pupils.
- Ensure the plan is put into action, with good communication of the policy to everyone.
- Ensure every aspect of the policy is maintained.
- Assess the training and development needs of staff and arrange for them to be met.
- Ensure all supply teachers and new staff know the school asthma policy.
- Regularly monitor the policy and how well it is working.
- Delegate a staff member to check the expiry date of spare reliever inhalers and maintain the school asthma register.
- Report back to their employers and their local education authority about the school asthma policy.

School staff

All school staff have a responsibility to:

- Understand the school asthma policy.
- Know which pupils they come into contact with have asthma.
- Know what to do in an asthma attack.
- Allow pupils with asthma immediate access to their reliever inhaler.
- Tell parents if their child has had an asthma attack and if they used their reliever medicines.
- Ensure pupils have their asthma medicines with them when they go on a school trip or out of the classroom.
- Ensure pupils who have been unwell catch up on missed school work.
- Be aware that a pupil may be tired because of night-time symptoms.
- Keep an eye out for pupils with asthma experiencing bullying.
- Liaise with parents, the school nurse and Special Educational Needs Coordinators (SENCO) if a child is falling behind with their work because of their asthma.

PE teachers

PE teachers have a responsibility to:

- Understand asthma and the impact it can have on pupils. Pupils with asthma should not be forced to take part in activity if they feel unwell. They should also not be excluded from activities that they wish to take part in if their asthma is well controlled.
- Ensure pupils have their reliever inhaler with them during activity or exercise and are allowed to take it when they need to.

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- If a pupil has asthma symptoms while exercising, allow them to stop, take their reliever inhaler and as soon as they feel better, allow them to return to activity. (Most pupils with asthma should wait at least five minutes).
- Remind pupils with asthma whose symptoms are triggered by exercise, to use their reliever inhaler a few minutes before warming up.
- Ensure pupils with asthma always warm up and down thoroughly.

School nurses

School nurses have a responsibility to:

- Help plan/update the school asthma policy.
- If the school nurse has an asthma qualification it should be their responsibility to provide regular training for school staff in managing asthma.
- Provide information about where schools can get training if they are not able to provide specialist training themselves.

Parents/carers

Parents/carers have a responsibility to:

- Tell the school if their child has asthma.
- Ensure the school has a completed asthma plan (see schedule one).
- Inform the school about the medicines their child requires during school hours.
- Inform the school of any medicines the child requires while taking part in visits, outings or field trips and other out of school hours activities such as school team sports.
- Tell the school about any changes to their child's medicines. What they take and how much.
- Inform the school of any changes to their child's asthma (for example, if their symptoms are getting worse or they are sleeping badly due to their asthma).
- Provide the school with a spare reliever inhaler (and spacer where relevant) labelled with their child's name.
- Ensure that their child's reliever inhaler and the spare is within its expiry date.
- Keep their child at home if he/she is not well enough to attend school.

Pupils

Pupils have a responsibility to:

- Treat other pupils with and without asthma equally.
- If a pupil is having an asthma attack ensure a member of staff is called.
- If they have asthma, tell their parents, teacher or PE teacher when they are not feeling well.
- Treat asthma medicines with respect.
- Know how to gain access to their medicine in an emergency.
- Know how to take their own asthma medicines.

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Access to Inhalers

All pupils who have asthma should have a labelled reliever inhaler in school at all times. Inhalers will be kept in an area of the classroom that is easily accessible. Staff must check that all asthma sufferers have their inhalers with them on all school trips and swimming sessions. Staff should check that all inhalers are in date and liaise with parents.

Treatment of an asthma attack

There are two types of treatment:

1. **Relievers** – this is treatment which gives relief in about 5 minutes by opening up the airways when the symptoms of asthma appear. This is usually a blue inhaler and should be given as prescribed by the child's G.P.
2. **Preventatives** – these are taken regularly to decrease the sensitivity of the air passages. These inhalers are usually brown and should not be used during an asthma attack and therefore are not needed to be brought to school.

What to do if a child has an asthma attack

The signs and symptoms of an asthma attack include:

- Difficulty with breathing out,
- wheezing and coughing,
- speaking with difficulty,
- distress and anxiety,
- blueness of skin.

In the event of an asthma attack:

- Stay calm and reassure the child – attacks can be frightening so stay calm, the child will probably have 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.
- Ensure that the reliever medicine (blue) is taken – this should open up the narrowed airways.
- Help the child to breathe – encourage the child to breathe slowly and deeply. Most children find it easier to sit upright or lean forward slightly resting on a table. Lying flat on the back is not recommended.
- Ensure a good supply of fresh air – but not cold air.

A flow chart detailing the best way to deal with an asthma attack is provided in Schedule Two.

Or call **999** immediately if:

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- the reliever has no effect after 5 to 10 minutes,
- the child looks blue,
- the child is either distressed or unable to talk,
- the child collapses,
- you have any doubts about the child's condition.

Emergency inhaler box

From 1st October 2014 the Human Medicines Regulations 2014 allows schools to keep a salbutamol (Ventolin) inhaler for use in emergencies. These are contained in an emergency box which is located in the Headteacher's office.

The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. The inhaler can only be used if the pupil's inhaler is not available (for example, because it is empty or broken)

Cloverlea Primary School has an emergency inhaler box containing:

- two salbutamol inhalers
- two spacers

To avoid the possible risk of cross contamination and infection any emergency inhaler used must be sent home with the child after use, with a note explaining that it has been used. If one of the spacers has been used then it should be cleaned in accordance with the cleaning instructions contained in the emergency box.

After an attack

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

The school will notify parents/carers if their child has used their inhaler other than for prescribed preventative doses or has suffered an attack during the day and required his/her inhaler to be administered.

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Schedule One

My asthma triggers

List the things that make your asthma worse so you can try to avoid or treat them.



Always keep your reliever inhaler (usually blue) and your spacer with you. You might need them if your asthma gets worse.

Last reviewed and updated 2021; next review 2024.

Asthma and Lung UK, a charitable company limited by guarantee with company registration number 01863614, with registered charity number 326730 in England and Wales, SC038415 in Scotland, and 1177 in the Isle of Man

I will see my doctor or asthma nurse **at least once a year (but more if I need to)**

Date my asthma plan was updated:

Date of my next asthma review:

Doctor/asthma nurse contact details:

Parents and carers – get the most from your child's action plan

- Take a photo and keep it on your mobile (and your child's mobile if they have one)
- Stick a copy on your fridge door
- Share your child's action plan with their school

Learn more about what to do during an asthma attack asthma.org.uk/child-asthma-attacks

ASTHMA QUESTIONS?

Parents and carers ask our respiratory nurse specialists

Call **0300 222 5800**

WhatsApp **07378 606 728**

(Monday-Friday, 9am-5pm over 16 only)

**ASTHMA+
LUNG UK**

CHILD ASTHMA ACTION PLAN

Fill this in with your GP or nurse

Name and date:

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How to deal with an asthma attack

