



School Asthma Policy

To be reviewed 3 yearly

Chair of Governors, Paul Willetts

Signed

A handwritten signature in black ink, appearing to read 'P. Willetts', with a horizontal line underneath it.

School Asthma Policy

The school:

- Recognises that asthma is 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
- 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

East Preston Infant School is a Rights Respecting School. All pupils, staff and visitors have the right to be healthy, safe, educated, listened to and treated fairly. These principles are at the heart of our school ethos, and our policies and practices support these rights. We are committed to equal rights, mutual respect and shared responsibility.

Asthma Medicines

Immediate access to reliever medicines is essential. Pupils with asthma are encouraged to carry their reliever inhaler as soon as the parent/carer, doctor/asthma nurse and class teacher agree they are mature enough. The reliever inhalers of younger children are kept in the classroom cupboards. Signs are on class doors indicating the cupboard in which inhalers are stored and within the cupboard is a clearly labelled box to enable easy access.

Parents will be asked to provide the school with a suitable inhaler. These will be checked periodically and parents will be informed if a new inhaler is required. All inhalers must be labelled with the child's name by the parent/carer.

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. Further conversations may be appropriate at the discretion of the school.

Inhalers can be administered by the child with the support of a First Aider or appointed person.

For off-site visits the First Aider will be responsible for ensuring that all appropriate inhalers are taken on the visit and he/she will keep the inhalers with them throughout the visit.

Pupils' inhalers are sent home at the end of each term and it is the parent's responsibility to check that they have medication in them, that they are in date and that spacers are clean.

Spacers provided by pupils for their own individual use should be cleaned between uses. Wash spacer in warm soapy water, rinse with clean running water and leave to dry naturally.

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

School emergency supply

In accordance with West Sussex County Council guidance and changes to the Human Medicines Regulations 2012 (from 1st October 2014), the school will keep a small stock of back-up inhalers for emergency use. Inhalers may be requested/bought from a local pharmacist by a request in writing on headed paper signed by the principal or head teacher stating:

- The name of the school for which the product is required
- The purpose for which that product is required
- The total quantity required

It is recommended that emergency asthma medication is delivered via a spacer device and the school will ensure that it has a spacer / spacers on site. Spacers may not be shared, therefore, once used, a spacer should be allocated to the pupil that used it and a new one obtained. It is the schools responsibility to ensure the school inhaler remains in date.

It will for the school to determine the number of backup inhalers and spacers required. Spacers can be different sizes; this will be addressed by the guidance advice that the school seek advice from its supplier.

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 register. All teachers know which children in their class have asthma. Parents are required to update the school about any change in their child's medication or treatment.

Records must be kept for the administration of asthma medication as for any other prescribed medication.

The school must gain consent from parents/carers of children with asthma to administer the school's emergency inhaler and a register must be kept with the inhaler that details which parents/ carers have given permission for the school inhaler to be administered. It is the responsibility of the school 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. Staff are aware of the location of the school's emergency inhaler for use when the child's own supply has run out or is not available.

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.

Asthma Attacks – School's Procedure

HOW TO RECOGNISE AN ASTHMA ATTACK

The signs of an asthma attack are:

- Persistent cough (when at rest).
- Wheezing (a whistling sound when breathing).
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body).
- Nasal flaring.
- Unable to talk or complete sentences. Some children will go very quiet.
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache).

CALL AN AMUBLANCE IMMEDIATELY AND COMMENCE THE ATHMA ATTACK PROCEDURE WITHOUT DELAY IF THE CHILD:

- Appears exhausted.
- Has a blue/white tinge around lips or fingers.
- Is going blue.
- Has collapsed.

WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK

- Keep calm and reassure the child.
- Encourage the child to sit up and slightly forward.
- Use the child's own inhaler – consult pupil asthma form for correct dosage. Where the child's own inhaler has run out or is not available, the school's emergency inhaler will be used.
- Remain with the child while the inhaler and spacer are brought to them.
- If there is no immediate improvement consult pupil form for giving additional puffs from inhaler.
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better.
- If the child does not feel better or you are worried at ANYTIME before you have reached ten puffs, **CALL 999 FOR AN AMUBLANCE.**
- If an ambulance does not arrive in ten minutes give another ten puffs in the same way.

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.

Access and Review of Policy

The Asthma Policy will be accessible to all staff and the community through the school's website. Hard copies can be obtained from the school office. This policy will be reviewed on a three yearly cycle.

Signed

(Chair of Governors)

Signed

A handwritten signature in purple ink that reads "Claire New". The signature is written in a cursive, flowing style.

(Headteacher)

Dear Parent/Carer

Asthma Information Form

Please complete the questions below so that the school has the necessary information about your child's asthma. **Please return this form without delay.**

CHILD'S NAME..... Age Class

1. Does your child need an inhaler in school? Yes/No

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?

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It is advised to 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 an emergency salbutamol inhaler for emergency use.

I agree to ensure that my child has in-date inhalers and a spacer (if prescribed) in school. I agree that the school can administer the school emergency salbutamol inhaler if required.

Signed: Date

I am the person with parental responsibility

Circle the appropriate statements

- My child carries their own inhaler.
- My child requires a spacer and I have provided this to the school office
- My child does not require a spacer
- I need to obtain an inhaler/spacer for school use and will supply this/these as soon as possible

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

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5. Do you give consent for the following treatment to be given to your child as recognised by Asthma Specialists in an emergency?

- 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**
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**

Yes/No

Signed: 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

Date

I am the person with parental responsibility

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 an inhaler has not been provided. You have stated on [name of pupil]'s Asthma Information Form that [name of pupil] requires an inhaler in school and you have agreed to provide an inhaler [and spacer]. Please ensure that:

- an inhaler
- a spacer

are provided without delay.

If [name of pupil] no longer requires an inhaler, please request his/her Asthma Information form from the school office and complete the parental update section.

Please be aware that in the absence of an inhaler, should [name of pupil] suffer an attack, staff may not be able to follow the usual Asthma Emergency inhaler procedures. They may be reliant on calling 999 and awaiting the Emergency Services.

Yours sincerely