



Asthma Policy

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Background

This policy has been written with advice from the Department for Education, Asthma UK, the local education authority, local healthcare professionals, the school health service. parents/carers, the Advisory Board and pupils.

Farndon Fields Primary School recognises that asthma is a widespread, serious but controllable condition affecting many pupils at the school. The school positively welcomes all pupils with asthma. This school encourages pupils 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 (Discovery Schools Trust) and pupils. Supply teachers and new staff are also made aware of the policy. All staff who come into contact with pupils with asthma are provided with information on asthma by the medical lead.

The school recognises that pupils with asthma could be classed as having disability due to their asthma as defined by the Equality Act 2010, and therefore may have additional needs because of their asthma.

Asthma Medicines

• Immediate access to reliever medicines is essential. Pupils with asthma are encouraged to hand inhaler to class teacher who will store the inhaler in the class First Aid bag. The reliever inhalers of younger children are kept in the classroom.

• Parents/carers are asked to ensure that the school is provided with a labelled reliever inhaler. The inhaler will be held in the pupil's class first aid bag. All inhalers must be labelled with the child's name by the parent/carer.

• School staff are not required to administer asthma medicines to pupils (except in an emergency), however many of the staff at this school are happy to do this. School staff who agree to administer medicines are insured by the local education authority when acting in agreement with this policy. All school staff will let pupils take their own medicines when the need to.

Record Keeping

• At the beginning of each school yea or when a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their enrolment form.

• All parents/carers of children with asthma will be sent an Asthma UK School Asthma Card to give to their child's doctor or asthma nurse to complete. Parents/carers are asked to return them to the school. From this information the school keeps its asthma register, which is available to all school staff. School Asthma Cards are then sent to parents/carers of children with asthma on an annual basis to update if needed. Parents/carers are also asked to update or exchange the card for a new one if their child's medicines, or how much they take, changes during the year or if a child is newly diagnosed with asthma.

https://www.asthma.org.uk/c58384a9/globalassets/health-advice/resources/schools/schoolasthma-card2020_download.pdf • Taking part in sports, games and activities is an essential part of school life for all pupils. All teachers know which children in their class have asthma and all PE teachers at the school are aware of which pupils have asthma from the medical register that is kept in the class First Aid bag, First aid room and Staff room.

• Pupils with asthma are encouraged to participate fully in all PE lessons. It is agreed with PE staff that each pupil's inhaler will be labelled and kept in the class First Aid bag at the site of the lesson. If a pupil needs to use their inhaler during a lesson they will be encouraged to do so. Class First Aid bag are taken with PE staff member and class teacher when not based in the classroom.

• Classroom teachers follow the same principles as described above for games and activities involving physical activity.

Out-of-hours sport

• There has been a large emphasis in recent years on increasing the number of children and young people involved in exercise and sport in and outside of school. The health benefits of exercise are well documented, and this is also true for children and young people with asthma. It is therefore important that the school involve pupils with asthma as much as possible in after school clubs.

• PE teachers, classroom teachers and out-of hours school sport coaches are aware of the potential triggers for pupils with asthma when exercising, tips to minimise these triggers and what to do in the event of an asthma attack.

•Additional information about PE in schools is available in the Asthma UK parent pack, which can be accessed by parents/carers at <u>www.asthma.org.uk</u> or by calling their helpline on 0300 222 5800.

School environment

• The school does all that it can to ensure the school environment is favourable to pupils with asthma. As far as possible, the school does not use chemicals in science and art lessons that are potential triggers for pupils with asthma. Pupils with asthma are encouraged to leave the room and go and sit in the school office if particular fumes trigger their asthma.

Making the school asthma-friendly

• The school ensures that all pupils understand asthma. Asthma can be included in the National Curriculum Key Stages 1 and 2 in science, design and technology, geography, history and PE

When a pupil is falling behind in lessons

• If a pupil is missing a lot of time at school or is always tired because their asthma is disturbing their sleep at night, the class teacher will initially talk to the parents/carers to work out how to prevent their child from falling behind. If appropriate, the teacher will then talk to the school nurse about the pupil's needs.

Asthma attacks

All staff who encounters pupils with asthma know what to do in the event of an asthma attack.

If a chid is newly diagnosed with Asthma, parents will be asked to complete the Asthma Card for their child. This will be passed onto the class teacher and First Aid Lead.

In the event of an asthma attack the school follows the procedure outlined in the child's care plan. In all classrooms, first aid room and staff room we have displayed action posters for staff to follow in the case of an emergency.

The school recognises that if all of the above is in place, we should be able to support pupils with their asthma and hopefully prevent them from having an asthma attack. However, we are prepared to deal with asthma attacks should they occur.

Guidance on what to do in case of an asthma attack is on display around the school, including the staffroom and the first aid room.

Guidance on the use of emergency salbutamol inhalers in schools (March 2015) states the signs of an asthma attack are:

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- 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)

If the child is showing these symptoms, we will follow the guidance for responding to an asthma attack recorded below. The Guidance goes on to explain that 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 if not available, use the emergency inhaler
- Remain with the child while the inhaler and spacer are brought to them
- Shake the inhaler and remove the cap
- Place the mouthpiece between the lips with a good seal, or place the mask
- securely over the nose and mouth
- Immediately help the child to take two puffs of salbutamol via the spacer, one
- at a time. (r 1 puff to 5 breaths or 20 seconds per dose with mask)
- If there is no improvement, repeat these steps* up to a maximum of 10 puffs
- 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 we have had to treat a child for an asthma attack in school, it is important that we inform the parents/carers and advise that they should make an appointment with the GP If the child has had to use 6 puffs or more in 4 hours the parents should be made aware, and they should be seen by their doctor/nurse.

- If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, call 999 FOR AN AMBULANCE and call for parents/carers.
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the
- same way
- A member of staff will always accompany a child taken to hospital by an
- ambulance and stay with them until a parent or carer arrive

However, we also recognise that we need to call an ambulance immediately and commence the asthma attack procedure without delay if the child:

- Cannot speak /short sentences
- Symptoms getting worse quickly
- Appears exhausted
- Has a blue/white tinge around lips
- Has collapsed

Appendix A

Dear Parent/Carer

Re: The School Asthma Card

Thank you for informing us of your child's asthma on his/her registration form. As part of accepted good practice and with advice from the Department for Education, Asthma UK and the school's Advisory Board, our school has a School Asthma Policy for use by all staff.

As part of this policy, we ask all parents and carers of children with asthma to help us by completing a school asthma card for their child/ren. Please take this card to your child's doctor/asthma nurse to fill in and return it to the school by [Insert Date].

The completed card will store helpful details about your child's current medicines, triggers, individual symptoms and emergency contact numbers. The card will help school staff to better understand your child's individual condition.

Please make sure the card is regularly checked and updated by your child's doctor or asthma nurse and the school is kept informed about changes to your child's medicines, including how much they take and when.

I look forward to receiving your child's completed school asthma card.

Thank you for your help.

Yours sincerely

Mrs N Matthew Head Teacher