

Asthma Policy

Northgate Primary School



Approved by: Northgate Governing Body

Last reviewed on: March 2026

Next review due by: March 2027

The school:

- Recognises that asthma is a 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 at all times
- 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

Asthma medicines

All pupils have their inhalers kept in the medical bag in their classroom. Each inhaler is kept in a clearly labelled bag for easy access, together with spacer if required and record book. The bag is to be taken to hall/playground for PE and playground at break times.

Any use of inhalers must be recorded in the child's Asthma Record Book.

The SCHOOL EMERGENCY Inhaler & Spacer are kept in First Aid Room in the School Office. Any use of these must be recorded in the record book.

Inhalers must be provided by parent/carer in the original packaging as dispensed by the pharmacist clearly labelled with the child's name and dose required.

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. The phone call will be logged on the pupil's Asthma Information Form (reverse side 'For Office Use' box) and a follow up written request will be sent home.
- If the parent/carer fails to supply the inhaler as requested, a written reminder will be sent to the parent/carer.
- Should no reliever be received by the school, in the event of a reliever being required, the school's Emergency Inhaler and spacer will be used. In this instance the parent/carer will be notified in writing stating date, time, dose given and reason why.

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. Office staff/First Aider(s) will have attended regular 'Asthma Awareness' Training.

For information on how to clean spacers: <http://www.asthma.org.uk>. Parent/carers are requested (in writing) to collect their child's spacers at the end of each half term so that they can be cleaned.

Emergency Inhalers

A sufficient number of salbutamol inhaler and spacer will be held by the school to cover emergency use and parental consent to administer the school inhaler will be gained when the pupil starts school. The school will hold a register of the pupils diagnosed with asthma, and parental consent with the emergency school inhaler. The school will be responsible for ensuring the school inhaler remains in date. Only children with previously diagnosed asthma will be allowed to use the emergency inhaler.

The school will follow the emergency treatment as detailed on the Asthma Information Form that can be found within the Asthma Toolkit. The school inhaler will only be used in an emergency and will always be used with a spacer as outlined in the Asthma Toolkit. The school will develop Individual Health Care Plans for those pupils with severe asthma, and an Asthma Information Form completed for pupils with mild asthma.

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 asked to complete and provide:

- **Asthma information Care Plan**
- **Emergency Inhaler Consent**
- **'My Asthma Plan' from the GP**

From this information the school keeps its asthma records. 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.

On completing an 'Asthma Care Plan' parents will be asked to sign to say they will provide a copy of their child's 'My Asthma Plan' as compiled by their doctor. This is on advice from the school nursing team, is best practice and helps the school to better understand the children's needs. Parents should also update the school should there be any changes to the asthma plan.

Exercise and activity - PE and games

All children are encouraged to participate fully in all aspects of school life including PE. Children are encouraged/remembered 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. There may be times when it would be necessary for a child to have his/her inhaler with them during a P.E. lesson. Inhalers should be taken to the PE lesson in the class medical bag provided. Use of the inhaler should be recorded in the child's Asthma Record Book.

Off-Site Visits/ Activities

Teachers will ensure that all medical bags are taken on any school trips, visits or off-site activities including inhalers and to check that they have a sufficient expiration date should the trip be more than one day.

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

In the event of an asthma attack, staff will follow the school procedure:

- Encourage the pupil to use their inhaler
- Summon a first aider who, will ensure that the inhaler is used according to the dosage on the form provided by parents.
- If the pupil's condition does not improve or worsens, the First Aider will follow the '**Emergency asthma treatment' procedures** as listed below
- The First Aider will call for an ambulance if there is no improvement in the pupil's condition
- If there is any doubt about a pupil's condition an ambulance will be called

Access and Review of Policy

The Asthma Policy is 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 yearly cycle.

EMERGENCY ASTHMA TREATMENT

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY OF THE CHILD

What is an asthma attack?

During an asthma attack, the muscles of the air passages in the lungs go into spasm. As a result, the airways become narrowed, which makes breathing more difficult.

Sometimes there is a recognised trigger for an attack, such as a cold, drugs, cigarette smoke, or allergies. At other times, there is no obvious trigger.

Signs and symptoms

- Look for:
- difficulty breathing
- wheezing and coughing
- a tight chest, it may feel like a band is tightening around it
- distress and anxiety
- difficulty speaking, they may speak in short sentences and whisper
- signs of hypoxia such as a grey-blue tinge to the lips, earlobes, and nailbeds
- exhaustion, in the case of a severe attack.

Responding to signs 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 inhaler and spacer are brought to them
- Immediately help the child to take **two separate puffs** of the salbutamol via the spacer immediately
- If there is no immediate improvement, **continue to give two puffs** every **two minutes** up to maximum of **10 puffs**, or until their symptoms improve. The inhaler should be shaken between 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 the child **does not feel better** or you are worried at **ANYTIME** before you have reached 10 puffs, **CALL 999 FOR AN AMBULANCE**
- If an ambulance **does not arrive in 10 minutes give** another 10 puffs in the same way
- The child's parents or carer should be contacted **after** the ambulance has been called
- **A member of staff should always accompany a child taken to hospital by ambulance and stay with them until a parent or carer arrives**