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| Staff Responsibility: | C Parr |
| Linked policies: | SEND, Safeguarding, Administering medicine |
| Signed by chair: | |
| Date: | |

School Anaphylaxis and Asthma Policy

At Boarshaw we recognise that asthma is a condition that will affect some children on our school roll, some of whom may be adversely affected.

The asthma manager will raise awareness of asthma in school annually or as needed. They will ensure that a clear policy is understood by all education staff of the school.

An Asthma Friendly School

At Boarshaw we will strive to be asthma friendly:

- The school will ensure the school environment is favourable to children and adults with asthma.
- The school will ensure that all children and staff have an understanding asthma.

Medication

The school recognises that immediate access to reliever inhalers is vital. That is done in the following ways:

- Children are encouraged to carry their inhalers with them as soon as the parent, doctor or nurse and class teacher agree they are mature enough.
- The reliever inhalers of younger children will be kept in the year group in a place easily accessible to all members of staff working there.
- All inhalers must be labelled with the child's name by the parent.
- Parents are responsible for ensuring that the child has a reliever inhaler in school and that it is within the expiry date.

Supply

- Schools can buy inhalers and spacers (these are enclosed plastic vessels which make it easier to deliver asthma medicine to the lungs) from a pharmaceutical supplier, such as a local pharmacy, without a prescription, provided the general advice relating to these transactions are observed.
- Schools will try to keep more than one emergency asthma kit, especially if covering more than one site, to ensure that all children within the school environment are close to a kit. The experience of some respondents to the consultation on this guidance suggested a stock of 5 spacers would be adequate for a typical school.
- The emergency salbutamol inhaler should only be used by children:
 - Who have been diagnosed with asthma, and prescribed a reliever inhaler
 - who have been prescribed a reliever inhaler;
 - written parental consent for use of the emergency inhaler has been given.

Asthma Attacks

All staff coming into contact with children who suffer from the condition of asthma will have been informed and will therefore know what to do in the event of an attack:

1. **Ensure that the child is encouraged to be as calm as possible and to try to breath deeply.**
2. **The adult should remain calm and should reassure the child.**
3. **Ensure that the reliever inhaler (BLUE) is taken immediately**
4. **Loosen any tight clothing that may restrict that.**
5. **Inform parents or/and place an asthma band on the child's wrist.**

Anaphylaxis.

Epipen (Adrenaline Auto Injector) or similar devices. These are kept on school premises and are stored in the head teachers office. The children should also have their own personal Epipen in case of an anaphylactic emergency.

Conditions that require an epipen to be held such as allergies are recorded on the child's records.

All first aiders have been trained to support children who are asthmatic or who require an epipen due to allergies or risk of anaphylactic shock. This is renewed annually through the school health team.

Anaphylaxis is a medical emergency. It can be very serious if not treated quickly. If someone has symptoms of anaphylaxis, you should:

1. Use an adrenaline auto-injector if the person has one – but make sure you know how to use it correctly first.
2. Call 999 for an ambulance immediately (even if they start to feel better) – mention that you think the person has anaphylaxis.
3. Remove any trigger if possible – for example, carefully remove any stinger stuck in the skin.
4. Lie the person down flat – unless they're unconscious, pregnant or having breathing difficulties.
5. Give another injection after 5 to 15 minutes if the symptoms do not improve and a second auto-injector is available (Source NHS Website)

After the attack.

Minor attacks should not interrupt a child's involvement or development in school. When feeling better the child will return to normal school activities.

Emergency Procedures

The emergency procedure will be implemented if:

- The reliever inhaler has no effect after 5-10 minutes
- The child is distressed or unable to talk
- The child is getting exhausted
- There is any doubt at all about the child's condition

Action to be taken:

- Ensure that the child is reassured and remains as calm as possible.
- Repeat the reliever inhaler giving a high dose
- Dial 999 – school staff must not take children to hospital in their own car as a child's condition can deteriorate very quickly.
- Continue to give the reliever inhaler every few minutes until help arrives.

Asthma record.

School recognises the importance of keeping an accurate record of children with asthma and the medication they take.

- At the beginning of each school year or when a child joins the school, parents will be asked if their child has asthma. This information will be recorded on a child's records.
- For those children with asthma, parents will be asked to provide information about the child's medication and asthma triggers.
- This information forms the asthma plan that is available to all school staff.
- The information is updated when children move to year groups.
- Parents are responsible for informing the school of any medication changes between times.

PE, Games and break time.

School will expect children with asthma to participate fully in PE, games and physical activity but is aware that for some children exercise can trigger their asthma.

- School staff taking PE lessons or supervising break times will be aware that some of the children suffer from asthma, will be aware of the register and will react to those children who indicate they are suffering an attack.
- Those children whose asthma is triggered by exercise will be encouraged to take their reliever inhaler a few minutes before exercise. Children can use their reliever inhaler before during and after sport if necessary.
- As part of classroom management Teachers will remind the children of the activity about to take place and will tell the children to bring their reliever inhaler to the gym, sports field, swimming pool or playground.

Out of school activities.

- The club leader is responsible for finding out which children in the club have asthma.
- On school excursions children with asthma will take their reliever inhaler.
 - Older children will carry their inhaler with them.
 - Younger children will have their reliever inhaler at hand, held by the visit group leader.
 - The decision of which children should carry their own inhaler will rest with the teacher.
- Residential excursions may necessitate the inclusion of a preventer-inhaler to treat the child. Supervision of this will be negotiated with the parents by the Visit Leader prior to the excursion.