

Chapelford Village Primary School



Asthma Policy

DOCUMENT STATUS

Version	Date	Action
1	June 2015	New Document adopted by Full Governing Body
1	Autumn 2018	Reviewed
	Spring 2022	Updated with 2021 policy from the School Bus

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Statement of intent

Chapelford Village Primary School recognises that asthma is a serious but controllable condition and welcomes all pupils with asthma. The school ensures that pupils with asthma can and do participate fully in all aspects of school life including physical exercise, visits, field trips and other out-of-school activities, while also recognising that pupils with asthma need immediate access to reliever inhalers at all times. To do this, the school will keep a record of all pupils with asthma and their medicinal requirements, to ensure that the school environment is conducive to the education of pupils with asthma. All members of school staff (including supply teachers and support staff) who come into contact with pupils with asthma are aware of what to do in the event of an asthma attack.

The school works in partnership with interested parties, such as the governing board, members of school staff, parents, pupils and outside agencies, to ensure the best educational outcomes possible for pupils with asthma. This policy enables pupils with asthma to manage their condition effectively in school and provides clear procedures to help ensure their safety and wellbeing. This policy also encourages and assists pupils with asthma in achieving their full potential in all aspects of school life.

1. Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Equality Act 2010
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2015) 'Guidance on the use of emergency salbutamol inhalers in schools'
- Asthma UK (2020) 'Asthma at school and nursery'

This policy operates in conjunction with the following school policies:

- Complaints Policy
- Supporting Pupils with Medical Conditions Policy

2. Roles and responsibilities

The governing board has a responsibility to:

- Ensure the health and safety of staff and pupils is protected on the school premises and when taking part in school activities.
- Ensure that this policy, as written, does not discriminate against any of the protected characteristics, in line with the Equality Act 2010.
- Handle complaints regarding this policy as outlined in the school's Complaints Policy.
- Ensure this policy is effectively monitored and updated.
- Report any successes and failures of this policy to the headteacher, members of school staff, local health authorities, parents and pupils.
- Provide indemnity for teachers and other members of school staff who volunteer to administer medicine to pupils with asthma in need of help.

The headteacher has a responsibility to:

- Create and implement the Asthma Policy with the help of school staff, school nurses, LA guidance and the governing board.
- Ensure this policy is effectively implemented and communicated to all members of the school community.
- Ensure all aspects of this policy are effectively carried out.
- Arrange for all members of staff to receive training on:
 - How to recognise the symptoms of an asthma attack.
 - How to distinguish asthma attacks from other conditions with similar symptoms.
 - How to deal with an asthma attack.
 - How to check if a pupil is on the school's central asthma register.
 - How to access the emergency inhalers.
 - Who the designated members of staff are and how to achieve their help.
- Ensure all supply teachers and new members of staff are made aware of the Asthma Policy and provided with appropriate training.
- Monitor the effectiveness of the Asthma Policy.
- Delegate the responsibility to check the expiry date of spare reliever inhalers and maintain the school's asthma register to a designated member of staff.

- Report incidents and other relevant information to the governing board and LA as necessary.

All school staff have a responsibility to:

- Read and understand the Asthma Policy.
- Know which pupils they come into contact with have asthma.
- Know what to do in the event of an asthma attack (as outlined in sections [6](#) and [7](#)).
- Allow pupils with asthma immediate access to their reliever inhaler.
- Inform parents if their child has had an asthma attack.
- Inform parents if their child is using their reliever inhaler more than usual.
- Ensure pupils with asthma have their medication with them on school trips and during activities outside of the classroom.
- Ensure pupils who are unwell due to asthma are allowed the time and resources to catch up on missed school work.
- Be aware that pupils with asthma may experience tiredness during the school day due to their night-time symptoms.
- Be aware that pupils with asthma may experience bullying due to their condition, and understand how to manage these instances of bullying.
- Make contact with parents, the school nurse and the SENCO if a pupil is falling behind with their school work because of their asthma.

PE staff have a responsibility to:

- Understand asthma and its impact on pupils – pupils with asthma should not be forced to take part in activities if they feel unwell.
- Ensure pupils are not excluded from activities that they wish to take part in, provided their asthma is well-controlled.
- Ensure pupils have their reliever inhaler with them during physical activity and that they are allowed to use it when needed.
- Allow pupils to stop during activities if they experience symptoms of asthma.
- Allow pupils to return to activities when they feel well enough to do so and their symptoms have subsided (the school recommends a **five**-minute waiting period before allowing the pupil to return).
- Remind pupils with asthma whose symptoms are triggered by physical activity to use their reliever inhaler before warming up.
- Ensure pupils with asthma always perform sufficient warm-ups and cool-downs.

Pupils with asthma have a responsibility to:

- Tell their teacher or parent if they are feeling unwell due to their asthma.
- Treat the school's and their own asthma medicines with respect by not misusing the medicines and/or inhalers.
- Know how to gain access to their medication in an emergency.
- Know how to take their asthma medicine.

All other pupils have a responsibility to:

- Treat other pupils, with or without asthma, equally, in line with the school's Behavioural Policy.
- Understand that asthmatic pupils will need to use a reliever inhaler when having an asthma attack and ensure a member of staff is called immediately.

Parents have a responsibility to:

- Inform the school if their child has asthma.
- Ensure the school has a complete and up-to-date medical form for their child.
- Inform the school of the medication their child requires during school hours.
- Inform the school of any medication their child requires during school trips, team sports events and other out-of-school activities.
- Inform the school of any changes to their child's medicinal requirements.
- Inform the school of any changes to their child's asthmatic condition, e.g. if their child is currently experiencing sleep problems due to their condition.
- Ensure their child's reliever inhaler (and spacer where relevant) is labelled with their child's name.
- Ensure that their child's reliever inhaler and spare inhaler are within their expiry dates.
- Ensure their child catches up on any school work they have missed due to problems with asthma.
- Ensure their child has regular asthma reviews with their doctors or asthma nurse (recommended every 6-12 months).
- Ensure their child has a written Personal Asthma Action Plan at school to help the school manage their child's condition.

3. Asthma medicines

Pupils with asthma are encouraged to carry their reliever inhaler as soon as their parent and the school nurse agree they are mature enough; if not, inhalers are given to the school to be looked after. Reliever inhalers kept in the school's charge are held in the **pupil's classroom** in a **designated storage area**.

Parents must label their child's inhaler with the child's full name and class. Parents must ensure that the school is provided with a labelled spare reliever inhaler, in case their child's inhaler runs out, or is lost or forgotten.

Members of staff are not required to administer medicines to pupils, except in emergencies. Staff members who have volunteered to administer asthma medicines will be insured by the school's appropriate level of insurance which includes liability cover relating to the administration of medication.

Staff will administer the asthma medicines in line with the school's Administering Medication Policy. Staff members will let pupils take their own medicines when they need to.

This policy is predominantly for the use of reliever inhalers. The use of preventer inhalers is very rarely required at school. In the instance of a preventer inhaler being necessary, staff members may need to remind pupils to bring them in or remind the pupil to take the inhaler before coming to school.

4. Emergency inhaler

The school keeps a supply of salbutamol inhalers for use in emergencies when a pupil's own inhaler is not available. These are kept in the school's **emergency asthma kit in the staff room**.

Emergency asthma kits contain the following:

- A salbutamol metered dose inhaler
- Two plastic, compatible spacers
- Instructions on using the inhaler and spacer
- Instructions on cleaning and storing the inhaler
- Instructions for replacing inhalers and spacers
- The manufacturer's information
- A checklist, identifying inhalers by their batch number and expiry date
- A list of pupils with parental consent and/or individual healthcare plans permitting them to use the emergency inhaler
- A record of administration showing when the inhaler has been used

The school buys its supply of salbutamol inhalers from a local pharmacy. The emergency inhaler should only be used by pupils, for whom written parental consent has been received and who have been either diagnosed with asthma or prescribed an inhaler as reliever medication. Parental consent for the use of an emergency inhaler should form part of any pupil with asthma's individual healthcare plan.

When not in use, emergency inhalers are stored **in the designated area in the staff room** in the temperate conditions specified in the manufacturer's instructions, out of reach and sight of pupils, but not locked away.

Expired or used-up emergency inhalers are returned to a local pharmacy to be recycled. Spacers must not be reused in school, but may be given to the pupil for future home-use. Emergency inhalers may be reused, provided that they have been properly cleaned after use. In line with the school's Supporting Pupils with Medical Conditions Policy, appropriate support and training will be provided for relevant staff on the use of the emergency inhaler and administering the emergency inhaler.

Whenever the emergency inhaler is used, the incident must be recorded in the corresponding record of administration and the school's records. The records will indicate where the attack took place, how much medication was given, and by whom. The pupil's parents will be informed of the incident in writing.

A designated staff member is responsible for overseeing the protocol for the use of the emergency inhaler, monitoring its implementation, and maintaining an asthma register.

The designated staff member who oversees the supply of salbutamol inhalers is responsible for:

- Checking that inhalers and spacers are present and in working order, with a sufficient number of doses, on a monthly basis.
- Ensuring replacement inhalers are obtained when expiry dates are approaching.
- Ensuring replacement spacers are available following use.
- Ensuring that plastic inhaler housing has been cleaned, dried and returned to storage following use, and that replacements are available where necessary.

5. Symptoms of an asthma attack

Members of staff will look for the following symptoms of asthma attacks in pupils:

- Persistent coughing (when at rest)
- Shortness of breath (breathing fast and with effort)
- Wheezing
- Nasal flaring
- Complaints of tightness in the chest
- Being unusually quiet
- Difficulty speaking in full sentences

Younger pupils may express feeling tightness in the chest as a 'tummy ache'.

6. Response to an asthma attack

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

- Keep calm and encourage pupils to do the same.
- Encourage the pupil to sit up and slightly forwards – do not hug them or lie them down.
- If necessary, call another member of staff to retrieve the emergency inhaler – do not leave the affected pupil unattended.
- If necessary, summon the assistance of a designated member of staff to help administer an emergency inhaler.
- Ensure the pupil takes two puffs of their reliever inhaler (or the emergency inhaler) immediately, preferably through a spacer.
- Ensure tight clothing is loosened.
- Reassure the pupil.

If there is no immediate improvement, staff will continue to ensure the pupil takes 2 puffs of their reliever inhaler every two minutes, until their systems improve, but only up to a **maximum of 10 puffs**. If there is no improvement before the pupil has reached 10 puffs:

- Call 999 for an ambulance.
- If an ambulance does not arrive within 10 minutes, the pupil can administer another 10 puffs of the reliever inhaler as outlined above.

Staff will call 999 immediately if:

- The pupil is too breathless or exhausted to talk.
- The pupil is going blue.
- The pupil's lips have a blue or white tinge.
- The pupil has collapsed.
- You are in any doubt.

7. In an emergency

Staff will never leave a pupil having an asthma attack unattended. If the pupil does not have their inhaler to hand, staff will send another member of staff or pupil to retrieve their spare

inhaler. In an emergency situation, members of school staff are required to act like a 'prudent parent' – known as having a 'duty of care'.

As reliever medicine is very safe, staff will be made aware that the risk of pupils overdosing on reliever medicine is minor. Staff will send another pupil to get another member of staff if an ambulance needs to be called. The pupil's parent will be contacted immediately after calling an ambulance.

A member of staff should always accompany a pupil who is taken to hospital by ambulance and stay with them until their parent arrives. Generally, staff will not take pupils to hospital in their own car. In some extreme situations, the school understands that it may be the best course of action. If a situation warrants a staff member taking a pupil to hospital in their car, another staff member or other responsible adult must accompany them.

8. Record keeping

At the beginning of each school year, or when a child joins the school, parents are asked to inform the school if their child has any medical conditions, including asthma, on their enrolment form.

The school keeps a record of all pupils with asthma, complete with medication requirements, in its asthma register. Parents must inform the school of any changes to their child's condition or medication during the school year via an [Asthma Policy Information Slip](#).

9. Exercise and physical activity

Games, activities and sports are an essential part of school life for pupils. All teachers know which pupils in their class have asthma and are aware of any safety requirements.

Outside suppliers of sports clubs and activities are provided with information about pupils with asthma taking part in the activity via the school's asthma register.

Pupils with asthma are encouraged to participate fully in PE lessons when they are able to do so. Pupils whose asthma is triggered by exercise will be allowed ample time to thoroughly warm up and cool down before and after the session.

During sports, activities and games, each pupil's labelled inhaler will be kept in a box at the site of the activity. Classroom teachers will follow the same guidelines as above during physical activities in the classroom.

The school believes sport to be of great importance and utilises out-of-hours sports clubs to benefit pupils and increase the number of pupils involved in sport and exercise. Pupils with asthma are encouraged to become involved in out-of-hours sport as much as possible and will never be excluded from participation. Members of school staff and contracted suppliers will be aware of the needs of pupils with asthma during these activities and adhere to the guidelines outlined in this policy.

10. The school environment

The school does all that it can to ensure the school environment is favourable to pupils with asthma by:

- Having well ventilated classrooms
- Keeping dust levels to a minimum and daily cleaning of surfaces in the classrooms

As far as possible, the school does not use any chemicals in art or science lessons that are potential triggers for asthma. If chemicals that are known to be asthmatic triggers are to be used, asthmatic pupils will be taken outside of the classroom and provided with support and resources to continue learning.

11. Monitoring and review

The effectiveness of this policy will be monitored **continually** by the headteacher. Any necessary amendments may be made **immediately**. The governing board will review this policy **annually**.

Any changes made to this policy will be communicated to staff, pupils, parents and other relevant stakeholders.

The next scheduled review date for this policy is **Spring 2023**

APPENDIX A
Asthma Policy Information Slip

Chapelford Village Primary School keeps a record of pupils with asthma in order to ensure the best possible care for your child. In order for us to maintain effective records on our asthmatic pupils, please enter information as requested below:

Child's name:

Date of birth:

Class:

Doctor:

Type of inhaler:

Dosage required:
(how many puffs)

At Chapelford Village Primary School, we keep a Ventolin Inhaler (Salbutamol) and a spacer device which is available in emergency situations. We are able to provide these to pupils who have forgotten their inhaler or are undergoing a severe attack, where the spacer may be more effective in administration.

The school asks that you give staff permission to administer emergency treatment as indicated below by signing the section below.

I hereby allow the school to administer emergency treatment as indicated above:

Signature of parent:

Date:

APPENDIX B

SPECIMEN LETTER TO INFORM PARENTS OF EMERGENCY SALBUTAMOL INHALER USE

Child's name:

.....

Class:

.....

.....

Date:

Dear.....,

This letter is to formally notify you that.....has had problems with his / her breathing today. This happened when.....

A member of staff helped them to use their asthma inhaler.

They did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given puffs.

Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given puffs.

[Delete as appropriate]

Although they soon felt better, we would strongly advise that you have your seen by your own doctor as soon as possible.

Yours sincerely,

Joanne Hewson
Headteacher

APPENDIX C

What to do in the event of an Asthma Attack

Common signs of an asthma attack are:

- Coughing
- Shortness of breath
- Wheezing
- Tightness in the chest
- Being unusually quiet
- Difficulty speaking in full sentences
- Tummy ache (sometimes in younger children)

What to Do

- Keep Calm
- Encourage the child to sit down in the position they find most comfortable
- Assist the child to immediately take 1 puff of Reliever inhaler (usually blue) – preferably through a spacer
- Repeat Reliever treatment as symptoms may make inhaling ineffective
- If symptoms improve but do not completely disappear, assist with another dose of Reliever inhaler (**Reliever medicine is very safe**)

If there is No Immediate Improvement:

Continue to assist the child to take 1 puff of their Reliever inhaler every minute for 5 minutes, or until symptoms improve.

Never leave a pupil having an asthma attack

Call 999 Urgently if:

- There is no improvement in 5-10 minutes
- The child is too breathless / exhausted to speak
- The child's lips are blue
- The child says they are having a 'bad' attack
- The child is frightened by the attack
- You are in any doubt about the child

Continue to give the child 1 puff of their Reliever inhaler every minute until the ambulance or doctor arrives

After a Minor Asthma Attack

- Minor attacks should not interrupt the involvement of a pupil with asthma in school activities.
- When the pupil feels better they can return to school activities.
- The parents/carers must always be told if their child has had an asthma attack.

Important things to remember in an Asthma Attack

- **Never leave a pupil having an asthma attack**
- If the pupil does not have their inhaler and/or spacer with them, send another teacher or pupil to their classroom or assigned room to get their spare inhaler and/or spacer.
- In an emergency situation school staff are required under common law, duty of care, to act like any reasonably prudent parent.
- **Reliever medicine is very safe.** During an asthma attack do not worry about a pupil overdosing.
- Send another pupil to get another teacher/adult if an ambulance needs to be called. When calling for an ambulance please state that the child is having an asthma attack.
- Contact the pupil's parents or carers immediately after calling the ambulance/doctor.
- A member of staff should always accompany a pupil taken to hospital by ambulance and stay with them until their parent or carer arrives.
- Generally staff should not take pupils to hospital in their own car. However, in some situations it may be the best course of action.
- Another adult should always accompany anyone driving a pupil having an asthma attack to emergency services.

NB: Guidance from education authorities on emergency transport in private vehicles is different in each part of the UK. Your school should have a clear emergency procedure policy on if and when this is appropriate.