St. Jérôme Church of England Bilingual School

Asthma Policy

(2025)

Reviewed by Executive Head teacher, Head of School, SENDCO and Welfare Officer June 2025

Executive Headteacher _____

Head of School _____

SENDCO _____

Welfare officer _____

Chair of Governors _____

Date _____

Date of next review: June 2028 unless deemed necessary to review before.

The school believes that the Asthma Policy:

- Welcomes all children and members of staff with asthma.

- Recognises that asthma is a widespread, serious but controllable condition affecting some pupils at this school. Our school positively welcomes all pupils with asthma. We encourage pupils with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, governors and pupils. Supply teachers and new staff are also made aware of the policy. All staff that come into contact with pupils with asthma are provided with yearly asthma training which is delivered by the local authority school nurses.

- Encourages children with asthma to achieve their potential in all aspects of school life including art lessons, PE, science, visits, outings or field trips and other out-of-hours school activities.

- Recognises that pupils with asthma need immediate access to reliever inhalers at all times.

- Ensures that the whole school environment, including the physical, social, sporting and educational environment, is favorable to pupils with asthma.

- Ensures that all staff (including supply teachers and support staff) understands what to do in the event of a child or member of staff having an asthma attack. Will if necessary, give emergency treatment and inform parents accordingly.

- Requires Parents / Carers to notify, when their child(ren) joins, the school if their child suffers with asthma. They must provide full details of treatment together with clear instructions on dosage, triggers, how to recognise when a child/adult's asthma gets worse and what action should be taken. Asthma cards are given to all parents of children who have asthma.

- Requires the school to keep a record of all pupils with asthma and the medicines to be taken.

- Ensure that regular monthly checks are made on medication expiry dates, while making sure that the correct medications are labeled and stored in the correct class medical bags.

Asthma medicines

Preventative / Anti-Inflammatory Inhalers

- These are generally manufactured in orange, green, purple, brown containers and contain steroids and are kept at home (except for INTAL). Their purpose is to control and treat the condition and to prevent the occurrence of an attack.

- Owing to the nature of their purpose, "preventers" are usually given at home on a regular basis. These are not usually kept in school.

Relief Inhalers

- These are generally in blue (sometimes purple) containers and are relief inhalers, which open the airways to bring rapid relief for breathing. They must be vigorously shaken before administering.

- Parents/carers are asked to ensure that the school is provided with two labeled, in date, reliever inhalers. All inhalers must be labeled with the child's name by the parent/carer or in the prescribed packaging from the pharmacy.

- Two clearly labeled reliever (blue) asthma inhalers and one Paediatric Volumaic Spacer are retained at school at all times. One is stored in the class medical bag containing solely inhalers and P/V spacer, which is retained in each classroom for immediate access and relief. This arrangement has been made to assist a child sustaining a severe attack, who may not be fit to walk to the medical room. The arrangement is also for ease of transportation of inhalers to any place of external activity, school hall, swimming, PE etc.; a second inhaler is retained in the medical room for the immediate access and relief during such times as breaks and lunch times and is also in accordance with the local Health Authority Guidelines.

- Immediate access to reliever medicines is essential. Pupils with asthma are encouraged to carry their reliever inhaler as soon as the parent/carer, doctor, or asthma nurse and class teachers agree they are mature enough. The reliever inhalers of younger children are kept in the classroom medical bag and one in the medical room.

- In the event of an emergency evacuation, the Teacher is responsible for taking the class medical bag with the inhalers to the evacuation meeting point.

- 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 they are able to do so. A record will be kept.

- We will work in partnership with all interested parties including the school's governing body, all school staff, school nurse, and parents/carers, employers of school staff, doctors, nurses and pupils to ensure the policy is planned, implemented and maintained successfully.

School Visits

- Children will be placed in a group with a qualified first aider on all school visits.

- Children who are considered to be mature enough will be given the responsibility to carry their own medication inhaler while on school visits, and a spare inhaler for each child and P/V spacer will also be carried in the class medical bag that is carried by the first aider.

Record keeping

- Parents/carers are asked to return a completed treatment plan form to the school, from this information the school keeps its asthma register, which is available to all school staff. Parents/carers are asked to inform the school in writing of any update or re-write the treatment plan if their child's medicines, or how much they take, changes during the year.

- A record of the medication, dosage, date and time when it was taken must be recorded in the child's own personal record sheet in the Asthma folder.

- If the inhaler is administered but is ineffective, the Welfare Officer or member of staff will immediately notify the parents if there is any apparent change in the pattern of the child's asthma or if there are any noticeable changes or signs of a severe attack the emergency services will be contacted immediately.

- The Welfare Officer will carry out regular monthly checks on medication expiry dates, while making sure that the correct medications are labeled and stored in the correct class medical bags. The Welfare Officer will notify Parents/Carers of expiry dates or if supplies are becoming low and request replacements.

Exercise and activity – PE and games

- 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 school's asthma register.

- Pupils with asthma are encouraged to participate fully in all PE lessons. PE teachers will remind pupils whose asthma is triggered by exercise to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after the lesson. It is agreed with PE Staff that each pupil's inhaler will be labeled and kept in the Class medical bag at the side of the lesson. If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.

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

Out-of-hours sport and clubs

- 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, out-of hours school sport coaches, Breakfast and After School club are given a register clearly stating the children who have asthma and are fully aware of the potential triggers for pupils' asthma attack. All school staff are provided with annual training from the local authority school nurse.

Asthma attacks

- All staff who come into contact with pupils with asthma know what to do in the event of an asthma attack, and have had annual asthma training.

- In the event of an asthma attack the school follows the procedure outlined by Asthma UK in its' School Asthma Pack. This procedure is visibly displayed in the staffroom, medical room and every classroom.

WHAT TO DO IN AN ASTHMA ATTACK

If a pupil with Asthma becomes breathless, wheezy, coughs continually or is tight-chested.

1. Remain calm.
2. Sit the pupil in a position they find the most comfortable. Do **not** make them lie down.
3. Let the pupil take 2 puffs of his/her usual reliever treatment inhaler as stated on their Health Care Plan. Always shake inhaler before use and between doses.
4. Wait 5 – 10 minutes.
5. If the symptoms disappear, the pupil can resume normal activities.
6. If the symptoms do not improve, administer up to 8 puffs and call the parents or named contact. Check the child's emergency care plan.

A SEVERE ATTACK

If there is no improvement or you notice any of the following signs indicating a severe attack:

- Normal relief medication has no effect.
- The pupil is breathless or has difficulty talking normally.

- Breathing is unduly rapid.

1. Commence administration of emergency blue reliever inhaler 2-8 puffs.
2. An emergency ambulance should be called, by dialing 999, if:
    - The symptoms do not improve sufficiently in 5-10 minutes.
    - The child is too breathless to speak.
    - The child is becoming exhausted.
    - The child's lip or face looks blue.
    - Continue to give blue reliever inhaler until medical help arrives. (It is not possible to overdose). See emergency guidance sheet.
3. Contact parents or named contact.
4. First aider or member of staff will continue to reassure the child until (of if) parent or emergency services arrive.

School environment

- The school does all that it can to ensure the school environment is favorable to pupils and staff with asthma.
- The school has a definitive non-smoking policy. 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 medical room if particular fumes trigger their asthma.

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 and special education needs coordinator about the pupil's needs.

Headteacher and Governors

Headteacher and Governors have a responsibility to:

- Plan an individually tailored school asthma policy with the help of school staff, school nurses, local education authority advice and the support of their employers.
- Ensure the health and safety of their employees (all staff) and anyone else on the premises or taking part in school activities (this includes pupils). This responsibility extends to those staff and others leading activities taking place off site, such as visits, outings or field trips.
- Plan the school's asthma policy in line with devolved national guidance.

- Liaise between interested parties – school staff, school nurses, parents/carers, governors, the school health service and pupils.
- Ensure the plan is put into action, with good communication of the policy to everyone.
- Ensure every aspect of the policy is maintained.
- Assess the training and development needs of staff and arrange for them to be met.
- Ensure all supply teachers and new staff knows the school asthma policy.
- Regularly monitor the policy and how well it is working.
- Delegate a staff member (Welfare Officer) to check the expiry date of spare reliever inhalers and maintain the school asthma register.
- Report back to their employers and their local education authority about the school asthma policy.