



The Blessed Sacrament Catholic Primary School
Asthma Policy
March 2017

This policy was adopted by the Governing Body on Summer Term 2017
For review - Summer Term 2018.

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Section 1: School Asthma Policy

Background

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

Asthma is a long-term condition that affects the airways in the lungs in children, young people and adults. Classic symptoms include breathlessness, tightness in the chest, coughing and wheezing. The goal of management is for people to be free from symptoms and able to lead a normal, active life. This is achieved partly through treatment, tailored to the person, and partly by people getting to know what provokes their symptoms and avoiding these triggers as much as possible. The causes of asthma are not well understood, so a cure is not usually possible, although this can sometimes be achieved in occupational asthma.

In the UK, 5.4 million people are currently receiving treatment for asthma, 1.1 million of whom are children. Asthma is the most common long-term medical condition, and 1 in 11 children has it. There are around 1000 deaths a year from asthma, about 90% of which are associated with preventable factors. Almost 40% of these deaths are in people under 75.

Asthma is responsible for large numbers of accident and emergency department attendances and hospital admissions. Most admissions are emergencies and 70% may have been preventable with appropriate early interventions^[3].

This 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 (the local education authority) 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 training on asthma from the school nurse who has had asthma training. This training is updated once a year.

Asthma Medicines

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 teacher agree they are mature enough. The reliever inhalers of younger children are kept in the classroom in an accessible location.

Parents/carers are asked to ensure that the school is provided with a labelled spare reliever inhaler. The class teacher will hold this separately in case the pupil's own inhaler runs out, or is lost or forgotten. 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 they need to.

Record Keeping

Rationale: Written personalised action plans, given as part of structured education, can improve outcomes such as self-efficacy, knowledge and confidence for people with asthma, particularly for people with moderate to severe asthma whose condition is managed in secondary care. For people with asthma who have had a recent acute exacerbation resulting in admission to hospital, written personalised action plans may reduce readmission rates. (NICE Quality Standards QS25 February 2013, Statement 3)

At the beginning of each school year 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 are consequently sent a series of forms(form 2/form 3 to complete in consultation with their GP or school nurse. 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 forms are then sent to parents/carers of children with asthma on an annual basis to update. Parents/carers are also asked to update school if their child's medicines, or how much they take, changes during the year.

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 labelled and kept in a box at the site 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

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. All staff and sports coaches are provided with training from the school nurse, who has had asthma training.

Out-of-School Activities, Trips and Outings

The school will consider asthma triggers when planning out-of-school activities and will ensure a trained member of staff is in attendance. Pupils must ensure they bring their correct inhaler and spacer where necessary which must be labelled. Failure to do so will result in them not being allowed to attend.

School Environment

The school does all that it can to ensure the school environment is favourable to pupils with asthma. The school has a definitive no-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.

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.

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 SENDCo about the pupil's needs.

The school recognises that it is possible for pupils with asthma to have special education needs due to their asthma.

Asthma Attacks

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

In the event of an asthma attack the school follows the procedure outlined by Asthma UK in section 3 of the school asthma policy: What to do in an emergency.

Section 2: Roles And Responsibilities

Employers Have A Responsibility To:

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.

Employers therefore have a responsibility to ensure that an appropriate asthma policy is in place.

Make sure the asthma policy is effectively monitored and regularly updated

Report to parents/carers, pupils, school staff and local health authorities about the successes and failures of the policy

Provide indemnity for teachers who volunteer to administer medicine to pupils with asthma who need help.

Head Teachers (and/or their Designated Representative/s-) 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

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 know the school asthma policy

Regularly monitor the policy and how well it is working

Delegate a staff member 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.

School Staff Have A Responsibility To:

Understand the school asthma policy

Know which pupils they come into contact with have asthma

Know what to do in an asthma attack

Allow pupils with asthma immediate access to their reliever inhaler and spacer where necessary.

Tell parents/carers if their child has had an asthma attack

Tell parents/carers if their child is using more reliever inhaler than they usually would

Ensure pupils have their asthma medicines with them when they go on a school trip or out of the classroom

Ensure pupils who have been unwell catch up on missed school work

Be aware that a pupil may be tired because of night-time symptoms

Keep an eye out for pupils with asthma experiencing bullying

Liaise with parents/carers, the school nurse and special educational needs coordinators or Learning Support & Special Educational Needs Department if a child is falling behind with their work because of their asthma.

Teachers Have A Responsibility, during PE lessons, to:

Understand asthma and the impact it can have on pupils. Pupils with asthma should not be forced to take part in activity if they feel unwell. They should also not be excluded from activities that they wish to take part in if their asthma is well controlled

Ensure pupils have their reliever inhaler and spacer, where appropriate with them during activity or exercise and are allowed to take it when needed

If a pupil has asthma symptoms while exercising, allow them to stop, take their reliever inhaler and as soon as they feel better allow them to return to activity. (Most pupils with asthma should wait at least five minutes)

Remind pupils with asthma whose symptoms are triggered by exercise to use their reliever inhaler immediately before warming up

Ensure pupils with asthma always warm up and down thoroughly.

School Nurses Have A Responsibility To:

Help plan/update the school asthma policy through regular liaison with the school.

If the school nurse has an asthma qualification it can be their responsibility to provide regular training for school staff in managing asthma

Provide information about where schools can get training if they are not able to provide specialist training themselves.

Individual Doctor/Asthma Nurses Have A Responsibility To:

Ensure the child or young person knows how to use their asthma inhaler (and spacer) effectively

Provide the school with information and advice if a child or young person in their care has severe asthma symptoms (with the consent of the child or young person and their parents/carers)

Offer the parents/carers of every child a written personal asthma action plan. Every young person should also be offered a written personal asthma action plan themselves.

Pupils Have A Responsibility To:

Treat other pupils with and without asthma equally

Let any pupil having an asthma attack take their reliever inhaler (usually blue) and ensure a member of staff is called

Tell their parents/carers, teacher or PE teacher when they are not feeling well

Treat asthma medicines with respect

Know how to gain access to their medicine in an emergency

Know how to take their own asthma medicines and uses correct inhaler technique.

Parents/Carers Have A Responsibility To:

Ensure their child attends for regular asthma reviews with their GP or Asthma Nurse

Keep the school informed if their child has asthma

Ensure the school has a complete and up-to-date school asthma forms for their child

Inform the school about the medicines their child requires during school hours

Inform the school of any medicines the child requires while taking part in visits, outings or field trips and other out-of-school activities such as school team sports

Tell the school about any changes to their child's medicines, what they take and how much

Inform the school of any changes to their child's asthma (for example, if their symptoms are getting worse or they are sleeping badly due to their asthma)

Ensure their child's reliever inhaler (and spacer where relevant) is labelled with their name

Provide the school with a spare reliever inhaler labelled with their child's name

Ensure that their child's reliever inhaler and the spare is within its expiry date

Keep their child at home if they are not well enough to attend school

Ensure their child catches up on any school work they have missed

Ensure their child has a written personal asthma action plan to help them manage their child's condition.

Section 3: What To Do In An Emergency

MEDICATION

Medication to treat the symptoms of asthma, come in the form of inhalers. Some children will have a 'preventer inhaler (brown),' these are children who have moderate to severe asthma. This type of inhaler is used daily to try and reduce the amount of 'asthma attacks.'

All children will have a 'reliever' (blue). Relievers are medicines that are taken immediately to relieve asthma symptoms. They quickly relax the muscles surrounding the narrowed airways, therefore making breathing easier. Reliever inhalers are essential for treating children who have asthma during an 'attack'.

SYMPTOMS

The usual symptoms of asthma are coughing, wheezing, shortness of breath and tightness in the chest.

DURING AN ASTHMA ATTACK

- ☺ **Sit the child down and loosen any clothing**
- ☺ **Get them to take 2 puffs of their 'reliever inhaler' immediately**
- ☺ **If no improvement ask them to continue to take 1 puff of the reliever inhaler every minute for 10 minutes**
- ☺ **Inform a member of the leadership/management team**
- ☺ **If symptoms do not improve or become worse get the office staff to call 999 and parents. Continue to administer the inhaler every minute until the ambulance arrives.**
- ☺ **After an attack children should go home and rest for the day and visit the GP within 48 hours.**



The Blessed Sacrament Catholic Primary School

Parent/carer Asthma Medication Permission Form

DETAILS OF PUPIL

Surname :
Forename :
Address :

M/F :
Class :

Date of Birth:

As a parent or carer of a child with asthma I accept responsibility to:

- Ensure your child has a written personal asthma action plan to help them manage their condition, including a completed and up-to-date school asthma forms.
- Inform the school of any changes to your child's medication.
- Inform the school of any changes to your child's asthma (for example, if their symptoms are getting worse or they are sleeping badly due to their asthma)
- Ensure your child's reliever inhaler (and spacer where relevant) is labelled with their name.
- Ensure that their reliever inhaler and the spare, if provided, is within its expiry date.
- Ensure your child has regular asthma reviews with their doctor or asthma nurse (every six to 12 months)

I understand that I must deliver the medication personally to the office or class teacher and accept that this is a service which the school is not obliged to undertake.

CONTACT DETAILS

Name:
Relationship to pupil:
Address :

Daytime telephone number:

Signed:

Date: