

Bishop's Castle Primary School



Asthma Policy

December: 2024

Last review: September 2026

Next review: September 2027

1. Introduction and background

This policy has been written with advice from the Department for Education & Employment, Asthma UK, the Local Authority, the School Health Service, parents and the governing body. The school recognises that asthma is a widespread, serious but controllable condition affecting some pupils at the school. The school positively welcomes all pupils with asthma and encourages them to achieve their full potential in all aspects of school life by having a clear policy that is understood by school staff, Strategic Task Board (STG), parents and pupils. Supply teachers and new staff are also made aware of the policy.

2. Asthma medicines

Immediate access to reliever medicines is essential and the medication must be kept in its original box with the prescription details on. Pupils with asthma must bring into school one inhaler to be kept in their class asthma bag/box. One school purchased inhaler is kept in the school office for emergency use only. All inhalers should be clearly labelled with child's name (even if provided in a box with the prescription details on). All classes will have a child's asthma bag/box in their class base with the individual health care plans for the children in their class only. It is the parent's responsibility to ensure their child's medication is within date. However, class teachers are asked to check their asthma bag/box inhalers on a regular basis.

Parents are asked to ensure that the school is provided with a labelled spare reliever inhaler. All spare labelled inhalers will be kept in the school office. The school will hold these 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. All spare inhalers will be checked termly by the asthma lead to ensure they have not passed their expiry date.

School staff are not required to administer asthma medicines to pupils (except in an emergency), and due to this, the school ensure that all school staff attend asthma training updates by the School Nurse. However, the school asthma lead will attend annual asthma updates and inform whole school staff of any changes and developments.

If a child uses their reliever inhaler in school, parents will be informed via a message to parents using the most appropriate method e.g. in person, via email or telephone.

Each class has an 'Asthma Medication Record' sheets in their asthma bag/box, which records the details of when children have accessed their inhalers and how many puffs of their inhaler they took. This provides us with a chronological record of the asthma medication that has been taken in school during each academic year.

3. School Emergency Inhaler

Since 1st October 2014 the Department for Health have advised that schools are able to keep a salbutamol inhaler for use in emergencies.

"The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication."

(Guidance on the use of emergency salbutamol inhalers in schools', Department for Health, September 2014)

The school's emergency inhaler should be used if the pupil's prescribed inhaler is not available (for example, because it is broken, or empty) and they require reliever medication.

The school has an agreed protocol for using the emergency inhaler (please see appendix 1) and will always write to inform parents when the school's emergency inhaler has had to be used.

4. Record keeping

At the beginning of each school year, or when a new child joins the school, parents are asked if their child has any medical conditions, including asthma, on their enrolment form. Each term, via the school newsletter, all parents are reminded to inform us of any changes to their child's health, including asthma (both updates and newly diagnosed children). Following receipt of this information we send out a detailed 'Asthma Health Care Plan' form for parents to complete and return promptly. All the information collected, forms part of the asthma register, which is available to all school staff. Parents are also asked to update or exchange the form for a new one if their child's medicines or the dosage changes at anytime. The school asthma lead keeps all completed asthma health care forms in the school office and ensures that copies of children's individual health care plans, together with class register are kept in each class base's asthma bag.

5. Breakfast & After-school Clubs

All staff leading before or after-school clubs have a copy of the whole school asthma register available to them, which details the classes the children are in and where their inhalers can be found. An emergency inhaler box is also located in the school office for use in an emergency situation.

6. PE, games & activities

Taking part in sports, games and activities is an essential part of school life for all pupils. Class teachers 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/coaches 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. Each pupil's inhaler will be labelled and kept in the labelled asthma bag at the site of the lesson. This is particularly important when taking part in physical activities on the school field. 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.

7. Swimming

All children on the school asthma register will be required to have their inhaler on the pool side before being allowed to enter the water.

8. 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 St George's involves pupils with asthma as much as possible in after school clubs. Club registers will

highlight children who suffer with asthma to ensure club leaders are fully aware of children's medical needs.

All adults are aware of the potential triggers for pupils with asthma when exercising, and know how to minimise these triggers and what to do in the event of an asthma attack.

9. Off-Site Visits

It is essential when staff are planning a class trip that they check the class asthma bag prior to the day of the trip to ensure the correct medication is available for each child and that the inhalers are still within date. Group leaders must ensure that the adults on the visit are aware of the children with asthma and who will be responsible for carrying the inhalers, being mindful of the fact that children on the asthma register must have immediate access to their inhaler at all times.

10. The school environment

St. George's does all that it can to ensure the school environment is favourable to pupils with asthma. The school does not keep feathered animals and has a definite no-smoking policy.

11. When a child or young person is falling behind in lessons

If a child or young person is missing a lot of time from school or is always tired because their asthma is disturbing their sleep at night, the class teacher will initially talk to the parents 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.

12. Asthma Attacks

All staff who work with pupils with asthma know what to do in the event of an asthma attack. Staff training takes place bi-annually to ensure that this knowledge is kept up to date.

In the event of an asthma attack, the school follows a step-by-step procedures guide which is available in the staff room, school office, and at the first aid stations in school. Staff must ensure that they inform parents verbally that day, if their child has suffered an asthma attack.

13. Emergency Salbutamol Inhaler Protocol

1. Supply, storage, care and disposal

The emergency inhaler kit will contain:

- One salbutamol metered-dose inhaler;
- A copy of the whole-school asthma register
- Copies of the template letter for informing parents of emergency inhaler use.

Disposal – the manufacturer’s guidelines usually recommend that spent inhalers are returned to the pharmacy to be recycled.

2. Written Parental Consent

Written parental consent, permitting the use of the school’s emergency inhaler, will be sought for every child on the whole school Asthma Register. This permission forms part of the child’s annual review of their Asthma Healthcare Plan.

3. Permitted Use Register

All children included on the school’s asthma register have parental permission to receive the school’s emergency inhaler, should the need ever arise. This register MUST be consulted prior to administering the school’s emergency inhaler.

4. Use of Emergency Inhaler

The school’s emergency salbutamol inhaler should only be used by children:

- who have been diagnosed with asthma, and prescribed a reliever inhaler; -
- OR who have been prescribed a reliever inhaler;

AND

- for whom written parental consent for use of the emergency inhaler has been given.

5. Support and Training

All staff will receive bi-annual update training to recognise the symptoms of an asthma attack and what to do in the event of an emergency. Other members of staff may volunteer to take responsibility for administering the school’s salbutamol inhaler in the event of an emergency, subject to the criteria in section 4 being met.

6. Record of Use

A record of use will be kept in the emergency inhaler kit, detailing where and when the asthma attack took place; how much medication was administered (and by whom); confirmation that the

parents of the pupil have been informed in writing and whether or not the child received any follow-up care from medical professionals.

7. Used inhalers and spacers

If one of the school's inhalers and spacers is used by a pupil in an emergency, the inhaler and spacer should be cleaned and sanitised thoroughly before any reuse.

Appendix 2: Copy of letter sent to parents following use of emergency inhaler

Date:

LETTER TO INFORM PARENTS OF EMERGENCY SALBUTAMOL INHALER USE

Child's name:

Class:

Dear.....,

[Delete as appropriate]

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

The school's emergency inhaler was used because;

☐

Your child did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol.

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Your child's asthma inhaler was not working, so a member of staff helped them to use the school's emergency asthma inhaler containing salbutamol.

They were given puffs.

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

Yours sincerely,

PRINT NAME OF MEMBER OF STAFF