



Respect for all. Learners for life

Supporting Children and Young People with Asthma in School.

September 2025

Asthma Policy Respect for All. Learners for Life	
OVERVIEW	
Our school recognises that asthma is a condition affecting many school children and this policy reflects advice from the Department for Education and Employment, Asthma UK, the local Education Authority and the school health service. We are an accredited Asthma Friendly School.	
AIMS	
Children with asthma attend school regularly and achieve their potential in all aspects of school life.	
STRATEGY	
In order to achieve our aims our school: • Has a No Smoking & Vaping policy <u>Medication</u> School informs parents annually that: • It is their responsibility to ensure that their child takes their inhaled medication as prescribed at home. • They must provide their child with a reliever inhaler, clearly labelled with their name and inhaler expiry date, for use in school. A large volume spacer or holding device must be provided at the beginning of each new school year. • If their child requires support in administering their inhaler, parents must attend a care plan meeting with the SENCO, class teacher, School Nurse or Asthma Team representative to ensure their child is supported effectively. <u>School:</u> • Encourages children to carry their reliever inhaler as soon as the parent, doctor or nurse and class teacher agree they are mature enough and stores the reliever inhalers of younger children in an accessible place in the classroom. • Takes the labelled inhalers of children on all school trips – carried by teaching staff. • All school staff let children take their medication when they need to. School staff are not required to administer medication to children except in an emergency or if the children require support. If children require support in administering their inhaler a care plan is put into place. • Ensures staff receive appropriate training annually either by the designated asthma team or school nurse. • Ensure policies and procedures are effectively monitored and reviewed. • Ensures supply teachers and new staff are made aware of our asthma and no smoking policies. • Ensures emergency inhalers are available (see emergency inhaler protocol) <u>Asthma Attacks</u> In the event of any asthma attack staff follow the procedure which is clearly displayed in all classrooms. All staff have asthma training and all Teaching Assistants have paediatric first aid training. All staff have completed asthma training. <u>Record Keeping</u> • Parents are asked on the admission form if their child has asthma and if so the estimated frequency of their child's use of an inhaler. Mrs Gordon along with the class teacher will gather more information to establish the correct support is provided. • Parents of Reception/Nursery children are invited to provide additional information at their initial meeting with the teachers and any such additional information is added to their child's records. If children require support in administering their inhaler a plan is put into place.	

- This information is then added to the Medical Health Lists which includes all of the pupils in each class of any Medical conditions or Individual Healthcare Plans that they have. Copies of these are kept in each classroom, Head of School's room, and the main office.
- If medication changes in between times, parents are asked to inform the school and update medication in school.
- If a child requires their inhaler within school, a note is made on the class asthma log in the class handbook and the teacher will inform the parent at home time.

Curriculum

If a child is missing a lot of time from school because of asthma or is tired in class and falling behind in class because of a disturbed night's sleep, the class teacher will initially talk to the parents. If appropriate the teacher will then talk to the SENCO and school nurse about the situation.

The school delivers assemblies to Reception & Key Stage 1 pupils to raise an awareness of asthma and how to manage asthma appropriately.

PE and Swimming

Taking part in PE and swimming is an essential part of school life and children with asthma are encouraged to participate fully. Teachers remind children whose asthma is triggered by exercise to take their reliever inhaler before the lesson and staff will bring it with them to the hall, yard or swimming pool.

If a child needs to use their inhaler during the lesson they are allowed to do so.

If a child does not have their inhaler with them they are allowed to use the emergency school inhaler. (see emergency inhaler protocol) A phone call will be made to parents to inform them of the situation and that an inhaler for school is required the next day. The teacher will follow this up at home time.

OUTCOMES

Children with asthma attend school regularly and achieve their potential in all aspects of school life.

MONITORING, REVIEW AND EVALUATION

The School Leadership Team and the Governing Body monitor the effectiveness, efficiency and impact of this policy annually.

Date adopted	Sept 2013	Review Cycle	Annually	Last Reviewed	September 2025	Version	Sept 2025
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HOW TO RECOGNISE AN ASTHMA ATTACK

The signs of an asthma attack are

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences. Some children will go very quiet.
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE CHILD

- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed

WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler – if not available, use the emergency inhaler
- Remain with the child while the inhaler and spacer are brought to them
- Immediately help the child to take two separate puffs of salbutamol via the spacer
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better
- If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way