

Papdale School

Asthma Policy

About one in ten children have asthma and this number is increasing. We want to make sure that having asthma does not mean children losing out when they are at school. This policy outlines how we will assist children with the management of their asthma while they are at school.

Explanation of the Disease

People with asthma have sensitive air passages, which are quick to respond to anything that irritates them (triggers). This results in the air passages of the lungs becoming narrow, making it difficult to breathe in and out. Narrowing of air passages produces one or all of the following symptoms:- coughing, breathlessness and wheezing. Sudden, severe narrowing of air passages may result in an "asthma attack".

Prevention

It is important to be aware that many factors provoke narrowing of the air passages. Some of these factors are avoidable within the school environment. Trigger factors include: coughs and colds, furry animals, cold weather, chemical paints - sprays and vapours, grass pollens and spores, extremes of emotion and exercise. Where possible, measures will be taken to try and minimise the risk of children being exposed to the recognised potential asthma triggers.

Asthma register

- Parents are asked to alert school of any medical conditions on admission of their child, and to update this information annually or as soon as the condition or medication changes.
- Parents identifying asthma as a medical condition would be asked to return an "Asthma Record Form" (see appendix 1) to ensure that their child is placed on our Asthma Register. In the nursery it will be recorded on the Medical Administration Form.
- The parents / guardians will be contacted to obtain the inhalers that need to be held by the school.
- Each inhaler provided by parents /guardians for pupils to use must be within date, named and prescribed with an appropriate pharmacy label.
- Parents will be informed if an inhaler is used during the day. This will also be recorded in the Schools Asthma register.
- Absence of parental consent should not stop staff from acting appropriately in an emergency.

Staff Assistance Advice

- A "Sympton and Actions Flowchart for Asthma Attack" will be displayed in classes throughout the school
- In emergencies all staff should act as any prudent parent would, which may include giving medication.

Access to Inhalers

- Parents may consent to their child(ren) carrying their own relief inhaler with them and using it when necessary.
- In addition School Relief inhalers will be kept in the medical room for all children on the asthma register (P1-P7) or in the Nursery for children in Early Learning and Childcare. Children are allowed access to their inhalers at any time in the school day, should they feel the need to use it.
- Inhalers should accompany them when taking part in offsite activities, or residential trips.
- Children with exercise induced asthma should be encouraged to use their inhalers prior to activities including running around at playtime and PE, sports day etc and have their inhaler with them during activities

Forgotten, Lost or Out of Date Inhalers

- If a child is having an asthma attack when there is no reliever inhaler at school but their condition does not indicate the need to dial 999 i.e. not a severe attack, parents should be contacted immediately to bring in inhaler or collect their child.
- If the child is experiencing a severe attack call 999 without delay.

Treatment at School

Under normal circumstances no additional treatments should be required while at school however, the reliever (BLUE) inhaler should be available at all times.

This should be used if requested by a child or when the child is showing symptoms of an asthma attack (coughing, wheezing or breathless).

Most children should be able to manage the inhaler themselves but if necessary (with younger children in particular) support the child to inhale once or twice with their BLUE inhaler. After a few minutes the inhaler should relieve the symptoms. When supporting a child remember to:

- Stay calm
- Sit the child down comfortably - do not let the child lie down.
- Do not put your arms around the child's shoulders - this restricts breathing.
- Speak quietly and calmly to the child - encourage slow deep breaths.

If this is effective, the child can return to normal activities. If this does not work, then the child may be having a severe asthma attack.

THIS CONSTITUTES AN EMERGENCY SITUATION

Procedures for an "Severe Asthma Attack"

An Emergency Situation is recognisable when::

- the BLUE reliever inhaler does not work.
- the child continues to struggle,
- the child is distressed or exhausted,
- the child is unable to talk in sentences,
- has blue lips
- or you have any doubts

Plan of Action

- Dial 999 - telephone for an ambulance
- Continue to give relief inhaler while help arrives as per instructions on inhaler.
- Inform parents of the situation and actions taken.

The incident should then be recorded in the Asthma register in the Medical Room by the person who dealt with the attack, and the entry should be signed and dated by them.

Responsibilities:

The local Authority and School Senior Management Team have responsibility to:

- implement and review this Asthma Policy regularly
- provide guidance and any appropriate training needs

All 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
- tell parents/guardians if their child has had an asthma attack
- tell parents/guardians 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 during PE Activities

Pupils have a responsibility to:-

- know how to gain access to their medicine in an emergency
- know how to take their own asthma medicines unless the school is advised otherwise by parents (younger children)

Parents/Carers have a responsibility to:

- ensure the school has complete, up-to-date information on any asthma condition, medication and treatment 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
- 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 children know how to take own asthma medicine

Policy Review

School encourages discussion and reflection from staff, parents and children and this policy will subsequently be reviewed at the end of each academic year, or at the child's Review, if he/she holds a Statement of Special Educational Needs.

Head teachers are responsible for assessing and arranging for training needs to be met.

APPENDIX 1

ASTHMA RECORD

Both sides of this form are to be completed before returning it to the school office along with a reliever inhaler for your child as soon as possible.

Childs Surname _____ First Name _____

Date of Birth _____ Class _____

Parent(s) name(s) _____

Contact Numbers:

Home _____ Work _____ Mobile _____

Doctors name _____ Tel No _____

Known triggers/allergies _____

Any other medical problems? _____

Supplying an Reliever inhaler for use in School

It is a parental responsibility to ensure you supply school with an in date reliever inhaler available at all times when at school. Failure to provide this would mean that if your child had an asthma attack in school there could be a delay in treating them which could be potentially very serious.

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I will supply the school with a reliever inhaler for my child to use which the school will to look after for my child in the medical room.

Children self-administering

In addition you may be happy for your child to have their own inhaler with them to school to self-administer when needed. Even if this is the case you would still need to provide school with the School Reliever Inhaler (see above).

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I consent to my child carrying his own inhaler and self-administering as and when required.

Reliever Medication Details - Usually taken in school as and when required

| Medication name (e.g. SALBUTAMOL) | Device (e.g. diskhaler) | Dose (e.g. 1 blister) | When taken (e.g. when wheezy, before exercise,etc) |
|--------------------------------------|----------------------------|--------------------------|--|
| | | | |

Other Medication - Normally taken outside of school hours - check with your GP

| Medication name | How taken/device | Dose | When taken |
|-----------------|------------------|------|------------|
| | | | |

Emergency Treatment

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In the event of an asthma attack I am happy for my child to receive assistance from a member of School staff to use their reliever inhaler.

In most cases children will be able to operate their inhaler without any assistance from staff, however in a severe asthma attack they may benefit from additional support.

Signed: (Parent/Guardian) Date

The section below is to be completed by school staff

Record of Inhaler(s) Provided by Parent/ Guardian

| <u>Date provided</u> | <u>Type of inhaler</u> | <u>Instructions listed clearly?</u> | <u>Use by date</u> | <u>Location in school</u> |
|--------------------------|------------------------|---|--------------------|-------------------------------|
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