

Abingdon Primary School

Asthma Policy

Introduction and background

Abingdon Primary 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. Our 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 (including mid-day assistants), Governors, and pupils. Supply teachers and new staff are also made aware of the policy. Key members of staff who come into contact with pupils with asthma are provided with training.

Asthma medicines

Immediate access to reliever medicines is essential. Pupils with asthma have their reliever inhaler kept at the Reception desk in a labelled box which they have easy access to under the supervision of an adult.

Parents are asked to ensure that the school is provided with a labelled reliever inhaler. All inhalers must be labelled with the child's name. The School clerk, supported by the PSA will check the date on all reliever inhalers on a monthly basis.

The school has emergency salbutamol inhalers in school which can be given to those children who have been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. Written parental consent for the use of the emergency inhaler must be given and should only be used if the child's prescribed inhaler is not available (For example, because it is broken, empty or out of date).

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

At the beginning of each school year or when a child joins the school, parents are asked if their child has any medical conditions including asthma on their enrolment form

From this information the school Inclusion Leader, with guidance from the school nurse completes a health care plan. This details which medication is to be taken, how often and what to do in an emergency. The health care plan has all contact details for the child and a photograph of them. This is available to all school staff and the school nurse. They are reviewed annually unless parents inform us of any changes beforehand.

All parents of children with asthma are consequently sent an Asthma UK school asthma card to complete. Parents 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 cards are then sent to parents of children with asthma on an annual basis to update. Parents are also asked to update or exchange the card for a new one if their child's medicines or how much they take, changes during the year

PE, games and activities

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 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. 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. If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.

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. All leaders of after school clubs will be made aware of those children with asthma and if they need to use their inhaler during a lesson they will be encouraged to do so.

The school environment

The school does all that it can to ensure the school environment is favourable to pupils with asthma. The school does not keep furry or feathery animals and has a definite 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. Pupils with asthma are encouraged to leave the room and go and sit in the school office if particular fumes trigger their 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 in science, design and technology, geography, history and PE.

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

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 (see advice below). This procedure is visibly displayed in every classroom.

Asthma attacks: action to take

The school follows the following procedure which is appropriately displayed in school:

- Ensure that the reliever inhaler is taken immediately
- Stay calm and reassure the child
- Help the child to breathe by ensuring tight clothing is loosened
- If the child is in extreme distress, call an ambulance.

Emergency procedure/Severe attacks

A severe attack is defined as:

- The inhaler has no effect after five to ten minutes;
- The child is distressed or unable to talk;
- The child is becoming exhausted;
- The child shows signs of rapid deterioration;
- There is any doubt at all about the child's condition;

Call an ambulance!

Repeat the reliever inhaler every few minutes until help arrives. If a child is in severe distress, or experiences any loss of consciousness, call an ambulance immediately.

ROLES AND RESPONSIBILITIES

Asthma UK recommends the following roles in developing an asthma policy:

Employers/Governors

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, 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

Head teachers 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, 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

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 if their child has had an asthma attack and if they used their reliever medicines
- 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, the school nurse and SENCO if a child is falling behind with their work because of their asthma

PE teachers

PE teachers have a responsibility 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 know where their reliever inhaler is kept during an activity or exercise and are allowed to take it when they need to.
- 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 a few minutes before warming up
- Ensure pupils with asthma always warm up and down thoroughly

School nurses

School nurses have a responsibility to:

- Help plan/update the school asthma policy
- If the school nurse has an asthma qualification it should 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/nurse of a child or young person with asthma

Doctors and 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)

Parents/carers

Parents/carers have a responsibility to:

- Tell the school if their child has asthma
- Ensure the school has a completed and up-to-date school asthma card 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 hours 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 that they take to school with them is labelled with his/her name
- Ensure that their child's reliever inhaler is within its expiry date
- Keep their child at home if he/she is not well enough to attend school
- Ensure their child catches up on school work missed if their child is unwell

Pupils

Pupils have a responsibility to:

- Treat other pupils with and without asthma equally
- Let any pupil having an asthma attack take their blue inhaler and ensure a member of staff is called
- Tell their parents, 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

APPENDIX A

EXAMPLE LETTER TO PARENTS

Dear Parent/Carer

Re: The School Asthma Card

Thank you for informing us of your child's asthma on his/her registration form.

As part of accepted good practice and with advice from the Department for Education, Asthma UK and the school's governing body, our school has recently established a new School Asthma Policy for use by all staff.

As part of this new policy, we are asking all parents and carers of children and young people with asthma to help us by completing a school asthma card for their child/children. Please complete this card and return it to the school by (*date*).

The completed card will store helpful details about your child's current medicines, triggers, individual symptoms and emergency contact numbers. The card will help school staff to better understand your child's individual condition.

Please make sure the card is regularly checked and updated and the school is kept informed about changes to your child's medicines, including how much they take and when.

I look forward to receiving your child's completed school asthma card. Thank you for your help.

Yours sincerely
Head teacher

APPENDIX B

FREQUENTLY ASKED QUESTIONS

Q - Where should the school keep reliever medicines?

A - Immediate access to reliever medicines is essential. Delay in taking a reliever inhaler, even for a few minutes, can lead to a severe attack and in very rare cases has proved fatal

Keep children's inhalers in an accessible place in the school such as in the class first aid box. Make sure they are clearly marked with the pupil's name. At break time, in PE lessons and on school trips make sure the inhaler is still easily accessible to the pupil.

Spare inhalers can be kept by the school.

Reliever inhalers must never be locked up or kept away from the pupil with asthma

Q - What happens if a child or young person takes too much reliever medicine?

A - Relievers are a very safe and effective medicine and have very few side effects. Some children and young people do get an increased heart rate and may feel shaky if they take a lot of reliever. However, they cannot overdose on reliever medicines and these side effects pass quickly

Q What happens if a child or young person without asthma experiments with another child's reliever inhaler?

A - It is not harmful for a child or young person without asthma to try another child or young person's reliever inhaler. If they take a lot of reliever inhaler, they may experience an increased heart rate or tremor and be a little shaky, but this will pass shortly and will not cause any long-term effects.

It is important, however, to talk firmly with the child or young person who has tried somebody else's medicine so that they learn to treat all medicines with respect

Q - Do inhalers have an expiry date?

A - Yes all relievers have an expiry date. Parents should be responsible for ensuring that their child's medicines are within the expiry date. Reliever inhalers and preventers usually last about two years

A named staff member should be responsible for checking the expiry dates of all spare reliever inhalers kept at school

Q - What happens if a child or young person forgets their reliever inhaler?

A – From the 1st October 2014, Schools are allowed to hold spare inhalers in school to use in an emergency, where written parental consent has been given.

Q - Should a child or young person with asthma use another child or young person's inhaler if they are having asthma symptoms and their reliever is not to hand?

A - Reliever inhalers are prescribed for individuals only and they should not be used by anyone else

If pupils with asthma have immediate access to their reliever inhaler and have a spare as back up kept in an accessible place, this situation should not occur

Remember, in an emergency situation school staff are required under common law, duty of care, to act like any reasonably prudent parent

Q - Why is an asthma register at school important?

A - It is important to identify all pupils at school with asthma so that all school staff and supply teachers are aware of the pupils with asthma and their asthma triggers. An asthma register will:

- Help staff to remind the right pupils to keep their reliever inhalers with them at all times
- Help inform staff and supply teachers about the individual needs of pupils with asthma
- Allow important contact details for pupils with asthma to be kept in one central location
- Assist the school and parents to keep asthma medicines kept at school, within the expiry date

- Help the school identify common asthma triggers they can reduce or control in the school environment
- Allow pupils with asthma to participate more fully in all aspects of school life

Q - How often should the school asthma register be updated?

A - An identified member of school staff should have responsibility for the school asthma register. Part of this responsibility should be to ensure that the expiry dates of all spare reliever inhalers at school are checked every six months

This member of staff should also ensure that all parents are asked every year if their child has asthma. This could be part of their registration form

This member of staff should ensure a follow up letter is sent to all parents of children and young people with asthma (see the draft letter to parents, above)

It is the responsibility of parents to provide the school with details of what medicines their child is taking during the school day. Asthma UK produces a school asthma card that all parents of children and young people with asthma can be given to pass on to their child's doctor or nurse to complete. Parents should then return these completed cards to the school

Q - What should happen if a child or young person with asthma is falling behind with work because of time off school?

A - Many children and young people do miss school because of their asthma or are tired in class because they have had a disturbed night's sleep. This could be because:

The child or young person has severe asthma symptoms or
The asthma is not well controlled because the child or young person:

- has not been prescribed the right medicine for their needs
- is not using the correct inhaler technique
- is not taking their medicines as prescribed
- is not avoiding, or able to avoid, their asthma triggers

If a teacher is worried about a pupil they should first talk to the parents, then the school nurse or Special Educational Needs Coordinator (SENCO).

Q - What are the most common things that trigger asthma symptoms in the school environment and what can be done to minimise their impact?

A - Asthma triggers commonly found in schools include furry or feathery animals, chemicals or fumes, mould, chalk dust, pollen, grass and cigarette smoke.

Taking the following steps in the school environment can go some way to preventing asthma attacks in pupils:

- Adopt a complete non-smoking policy on the school premises and for school activities and ensure it is upheld and maintained
- Ensure all staff and adults leading school activities taking place off site, such as sport training, school visits, outings and field trips adhere to a complete non-smoking policy
- Do not keep furry or feathery pets in classrooms or in the school
- As far as possible avoid fumes that trigger pupils' asthma in science and craft lessons. Use fume cupboards in science lessons if possible. If fumes are known to trigger a child or young person's asthma, allow them to leave the room until the fumes are no longer in the classroom
- Wet dust chalk boards
- Ensure rooms are regularly wet dusted and cleaned to reduce dust and house-dust mites
- Ensure classrooms are well aired
- Remove any damp and mould in the school quickly
- Avoid condensation as this will help reduce house-dust mites and mould spores
- Close windows during thunderstorms as they can release large quantities of pollen into the air and trigger asthma attacks
- Avoid keeping pollinating plants in the classroom or playground areas
- Ensure sporting fields are mown out of school hours. This is best done on a Friday afternoon (providing there is no sport on Saturday morning)
- Ensure piles of autumn leaves (that may contain mould spores) are kept in areas away from pupils and are regularly removed from the school grounds
- Be aware that some chemicals in cleaning products may trigger asthma symptoms for some pupils. Check the list of triggers on the school asthma cards and stop using those identified

Q - How should the school get agreement and support for the school asthma policy?

A - Involve all relevant groups in developing the policy including:

- Pupils with and without asthma
- All school staff
- The school health service and other local health professionals
- The local health authority
- Parents and their representative bodies
- The local education authority
- To ensure ongoing support for the policy, regular monitoring and updates of school asthma policies are essential. It is also important to make sure the policy is achievable and realistic for each individual school.

Q - Do school staff need training?

A - It is important that all school staff who come into contact with pupils with asthma are trained and that the training is updated regularly. School staff cannot be expected to be responsible for a particular condition without training.

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

If the school nurse does not have an asthma qualification it is their responsibility to provide information about where schools can get training, through their local health authority or local healthcare contacts

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