

**ASTHMA POLICY**

**Asthma is a condition that affects the small tubes (airways) that carry air in and out of the lungs. When a person with asthma comes into contact with something that irritates their airways (an asthma trigger), the muscles around the walls of the airways tighten so that the airways become narrower and the lining of the airways becomes inflamed and starts to swell. Sometimes, sticky mucus or phlegm builds up which can further narrow the airways. These reactions make it difficult to breathe, leading to symptoms of asthma.**

**(Asthma UK)**

**The usual symptoms of asthma are:**

* **Coughing**
* **Shortness of breath**
* **Wheezing**
* **Tightness in the chest**
* **Being unusually quiet**
* **Difficulty speaking in full sentences**

**Common triggers are:**

* **Viral infections (colds and flu)**
* **Household dust mites**
* **Pollen**
* **Cigarette smoke**
* **Furry and feathery animals**
* **Exercise**
* **Outdoor air pollution**
* **Laughter, excitement and stress**

**At St. Paul’s C of E Primary School we recognise that asthma is a widespread, serious but controllable condition affecting many pupils in our school. We encourage pupils with asthma to achieve their potential in all aspects of school life.**

**We endeavour to do this by ensuring we have:**

* **An up to date asthma policy**
* **An Asthma Lead**
* **An asthma register**
* **An informative monitoring system in each classroom**
* **Pupil access to inhalers at all times**
* **Up to date asthma plans for all pupils with asthma**
* **An emergency salbutamol inhaler**
* **All staff regularly trained**
* **Raised awareness of asthma amongst pupils, parents and staff**

**The Asthma Lead**

**Mrs K Reid will ensure that the asthma register and the asthma policy are kept up to date and that staff complete the asthma plans for children in our care.**

**The Asthma Register**

**The register is updated annually (Autumn Term) or when a child is prescribed a reliever inhaler or diagnosed asthmatic.**

**When a child is added to the asthma register we will ensure that they have:**

* **An up to date personal asthma plan**
* **An inhaler bag containing their reliever inhaler and spacer (where applicable)**
* **Permission from parents/carers to use the emergency salbutamol inhaler if they require it**

**Classroom Monitoring System**

**Children on the asthma register will have a named inhaler bag containing their inhaler and spacer. This will be held in an easily accessible area of the classroom.**

**The class Asthma Record will be stored with the inhaler bags and this will be completed by an adult each time a child uses their inhaler.**

**Each class will have a small whiteboard on their classroom door where children will tally the number of times they have used their inhaler each day. This whiteboard must be checked at the end of each day and wiped clean. Parents must be informed when a child has used their inhaler twice or more in one day.**

**It is the responsibility of the class teacher to make sure that the Asthma Record Booklet is kept up to date and also to ensure that the whiteboard is used correctly and clean at the start of each day. It is also the responsibility of the class teacher to inform parents of any change in the frequency of a child needing their inhaler.**

**Personal Asthma Action Plan**

**When a child is added to the asthma register their parents/carers will be asked to complete a personal asthma plan. Copies of the completed plan will be stored in the class Medical Needs file and in the child’s inhaler bag.**

**Parents/carers will also be asked to give permission for the emergency salbutamol inhaler to be used if necessary and also to take full responsibility for ensuring that a blue reliever inhaler is in school at all times.**

**The role of the child**

* **Know where their inhaler bag is stored**
* **Record a tally on the asthma whiteboard when they use their inhaler**

**The role of the teacher**

* **Ensure that inhaler bags are easily accessible to the children**
* **Ensure that the asthma record booklet is stored with the bags**
* **Ensure that the asthma record booklet is completed when a child uses their inhaler**
* **Check the asthma whiteboard at the end of each day and wipe clean**
* **Report to parents when a child has used their inhaler twice or more in one day or when there has been a change in the frequency that a child has needed their inhaler**
* **Regularly check the dates on inhalers and speak to parents/carers when they are due to expire**
* **Raise awareness of asthma with their class**

**The role of the parent**

* **Ensure that school is kept up to date with information about their child’s asthma**
* **Ensure that school has a blue reliever inhaler**
* **Ensure that replacement inhalers are sent into school when old ones are due to expire (when informed by the class teacher)**

**The role of the Asthma Lead**

* **Ensure that the asthma register is up to date**
* **Ensure that class teachers know which of their children have asthma/inhalers**
* **Provide inhaler bags**
* **Ensure that an asthma plan is completed for each child on the register**
* **Ensure that permission to use the emergency inhaler is sought from parents/carers**
* **Ensure that the asthma policy is up to date**

**Asthma Medicines**

**Reliever Inhalers**

**Every child with asthma should have a reliever inhaler (blue). Relievers are medicines that can be taken immediately when asthma symptoms start. They quickly relax the muscles surrounding the narrowed airways. This allows the airways to open wider, making it easier to breathe again.**

* **Relievers are essential in treating asthma attacks**
* **It is very important that pupils with asthma have a reliever inhaler that they can use reliably and effectively**
* **Relievers are safe and effective and they have few side effects. Sometimes children do get an increased heart rate and may feel shaky if they take a lot. They cannot overdose on the reliever and the side effects will pass quickly.**

**Preventer Inhalers**

**Preventers protect the lining of the airways. They help to calm the swelling in the airway and stop them from being so sensitive.**

**Taking preventer medicines means that a child with asthma is less likely to react badly when they come into contact with an asthma trigger. Not all children with asthma will need a preventer inhaler (brown).**

* **Preventer inhalers are usually prescribed for children who are using their reliever inhaler at least three times a week.**
* **Preventers reduce the risk of severe attacks**
* **The protective effect of preventer medicines builds up over time so preventers need to be taken every day (usually morning and evening), even if the child is feeling well**
* **Children should not need to use a preventer inhaler at school. If they do, this must be recorded on their personal asthma plan**

**Spacers**

**A spacer is a plastic container with a mouth piece at one end and a hole for an aerosol inhaler at the other end. Spacers are helped to deliver medicines to the lungs. They make inhalers easier to use and more effective. Spacers are often used at school with children under the age of 12. Spacers must be stored in the child’s personal inhaler bag.**

**An Asthma Attack**

* **Ensure that the reliever is taken immediately. Whenever possible, allow medication to be taken where the attack occurred.**
* **Stay calm and reassure the child.**
* **Stay with the child.**
* **Help the child with their breathing by encouraging them to breathe as slowly and deeply as possible.**
* **After the attack and as soon as they feel better, the child can return to normal school activities.**
* **Inform the parent/carer of the attack.**

**In all emergencies, follow the traffic light system:**

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| --- | --- | --- |
| **Mild** | **If the child is:**   * **Requiring to use their inhaler (reliever) regularly throughout the day for cough or wheeze, but is not breathing quickly and is able to continue with day-to-day activities** | **Ask the parents to make contact with their GP.**  **Always inform parents as to how frequently their child has had to use their inhaler during the day.** |
| **Moderate** | **If the child is:**   * **Wheezing and breathless and not responding to usual reliever treatment** | **Send for a Chief First Aider.**  **Immediately contact parents to collect the child from school and advise that the child is taken to see the GP that day.** |
| **Severe** | **If the child is:**   * **Drowsy or unable to respond** * **Frightened** * **Unable to speak in sentences** * **Breathless with heaving of the chest** * **Going blue** * **Collapsed** | **Ring 999**  **Send for a Chief First Aider.**  **You need help immediately.**  **If the child has a blue inhaler, use it now.**  **Ten puffs using the spacer until the ambulance arrives.**  **1 puff every minute for 10 minutes.** |

**Implementing the Policy**

**Mrs J Tyers (Headteacher) has overall responsibility for the policy in school. The member of staff responsible for implementing the policy is Mrs K Reid (SENCO and Asthma Lead).**

**Asthma awareness training is carried out by the School Health Team at the request of the school.**

**Copies of the Asthma register can be found in the medical file in each classroom and also in the main office and the SENCO’s office. The SENCO/Asthma Lead is responsible for keeping the register up to date. The Asthma register will include expiry dates for each inhaler.**

**All parents/carers complete an Asthma Plan and the plans are stored in the child’s personal inhaler bag and in the class Medical Needs File.**

**Parents/carers are encouraged to keep the school informed of any changes to their child’s health.**

**Exercise and Activity**

**Taking part in games, sports and activities is an essential part of school life for all pupils. All teachers know which children in their class have asthma and this information is shared with other members of staff who are present teaching or supporting teaching of the class in particular the Sports Coach.**

**Pupils with asthma are encouraged to participate fully in PE lessons. All inhaler bags MUST be taken to the hall of playground when a class has PE.**

**Visits and School Trips**

**When pupils are taken out on school trips it is the responsibility of the school staff to ensure that inhalers are taken along for each pupil with asthma.**

**A mobile phone should always be available for any emergency situations.**

**Key People**

**Asthma Lead and SENCO – Mrs K Reid**

**Chief First Aiders – Mrs D Fullerton and Mrs C Parsons**

**References**

* **Asthma UK website**
* **Asthma UK School Policy Guidelines**
* **Department of Health Guidance on the use of emergency salbutamol inhalers in schools**

**The policy has been written by Mrs K Reid (SENCO and Asthma Lead)**

**Review date – July 2024**

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SENCO/ ASTHMA LEAD**

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HEADTEACHER**

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CHIEF FIRST AIDERS**