



Whitburn Church of England Academy

Asthma Policy

Preface

The Academy Vision and Values can be found here <https://www.whitburncofeacademy.org/about-us/academy-ethos.html>

This policy and its associated procedures are based on these key principles and values.

Policy Statement:

- This school is an inclusive community that aims to support and welcome students with medical conditions.
- This school aims to provide all students with all medical conditions the same opportunities as others at school.
- This policy is to be read in conjunction with the Whitburn Church of England Academy Managing Medications and Supporting Students with Medical Conditions in School Policy Statement.

Whitburn Church of England Academy ensures that:

- staff understand their duty of care to children and young people in the event of an emergency.
- staff feel confident in knowing what to do in an emergency.
- staff understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- staff understand the importance of medication being taken as prescribed.
- staff understand the common medical conditions that affect children at this school and
- staff receive training on the impact medical conditions can have on students.

What is asthma?

Asthma is a long-term medical condition that affects the airways – the small tubes that carry air in and out of the lungs. Children and young people with asthma have airways that are almost always red and sensitive (inflamed). Asthma triggers then irritate these airways, causing them to react. When a child or young person with asthma comes into contact with an asthma trigger, the mucus around the walls of the airways tightens so that the airways become narrower. The lining of the airways becomes inflamed and starts to swell. Often sticky mucus or phlegm is produced. These reactions lead to the symptoms of asthma.

Location of Medication:

All emergency responsive medication for asthma can be found in the lockable storage area in the Main Office, alongside copies of the child's completed IHCP or School Asthma Care Plan (appendix B). Asthma Action Plans / Cards completed with the child's GP or asthma nurse are also accepted.

Commitment:

Whitburn Church of England Academy will:

- Identify students with asthma during the admission process
- Provide parents/carers with an Asthma Care Plan template which they are to complete and return promptly to school if the child does not already have a completed asthma card.
- Make available to all staff a copy of the Asthma policy.
- Ensure that all reasonable and practical steps are taken to safeguard the health and safety of students when they are authorised to be on school or other educational premises or where they are engaged in authorised activities elsewhere.
- Raise awareness of asthma amongst those involved with Whitburn Church of England Academy through training opportunities.
- Provide an environment where students with asthma can participate in all activities to their full potential.
- Provide a clear set of guidelines and expectations to be followed with regard to the management of asthma.
- Store spare inhalers for individual students in the Main Reception area, along with copies of their completed IHCP or School Asthma Care Plan / Card.
- Keep a register of all asthmatic students which will include details of the treatment that each student uses and in particular any inhalers which need to be used at school.

In addition, spare inhalers and spacers will be provided by the school to keep in line with government procedures in case of emergencies. This 'emergency asthma inhaler kit' will contain:

- A salbutamol metered dose inhaler.
- At least two single – use spacers compatible with the inhaler.
- Instructions on using the inhaler and spacer/ plastic chamber.
- Instructions on cleaning and storing the inhaler.
- Manufacturer's information.
- A checklist of inhalers, identified by their batch number and expiry date, with half termly checks recorded.
- A note of the arrangements for replacing the inhaler and spaces.

- A list of children permitted to use the emergency inhaler as written parental consent has been obtained.
- A record of administration.

To avoid possible risk of cross infection, the disposable spacer is not to be re-used and, if plastic, must be sent home with the child for future personal use.

Staff Responsibilities:

- The Managing Medication Officer, Mrs Duddin, will check inhalers half termly.
- Replacement emergency inhalers are obtained before the expiry date.
- Replacement emergency spacers are re-ordered and replaced after use.
- Empty out of date inhalers are disposed with the support of the community police.
- It is a whole staff responsibility to provide support during an asthma attack (training is completed by all staff each September and First Aiders are given in-depth training in addition to this).

Staff will:

- Ensure they are aware of students in their care with asthma.
- Administer emergency asthma medication, if required, according to the students' completed IHCP or asthma care plan / card.
- Promptly communicate to the Head of Learning and link SMT and parents/carers, any concerns about the student's asthma limiting his / her ability to participate fully in all activities.
- Encourage students to carry their reliever medication and use their medication as soon as symptoms develop.
- Identify and, where possible, minimise asthma triggers. Many things can trigger an asthma attack. This may be because of an allergy to e.g. pollen or animal hair but just as important are irritants such as cigarette smoke, spray deodorants or chemical fumes. Every attempt will be made to ensure that asthmatics are not exposed to these. Care will also be taken if animals are to be brought into school (such as Zoolab) or students visit a farm. Similarly fume cupboards will be used in science rooms to avoid fume inhalation.
- Encourage open communication with parents/carers regarding the status and impact of a student's asthma.
- Liaise with parents/carers, the school nurse, Head of Learning and SENCo if a child is falling behind with work because of asthma.

PE staff will have a responsibility to:

- Understand asthma and the impact it can have on students. Students with asthma should not be forced to take part in an 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 students have their reliever inhaler with them during activity or exercise and are allowed to take it when needed. Students with asthma may need to take a dose of their reliever inhaler before exercise.

- If a student 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 their activity. Most students may need at least five minutes to maintain their breathing again.
- Remind students with asthma whose symptoms are triggered by exercise to use their reliever inhaler immediately before warming up.
- Ensure students with asthma always warm up and down thoroughly.
- Communicate concerns to the child's parent/carer if a student seems over-reliant on their inhaler as this may mean that the student's asthma is poorly controlled.

School Nurse has a responsibility to:

- Help Whitburn Church of England Academy update and review this asthma policy.
- Assist with the completion of asthma care plans / cards when needed.
- Provide training or organise training on an annual basis in September.

Individual doctor / asthma nurse of a student with asthma will have a responsibility to:

- Complete school asthma care plans / cards provided by parents/carers.
- Ensure the young person knows how to use their inhaler (and spacer) effectively.
- Provide the school with information and advice if a young person in their care has severe asthma symptoms (*consent must be given by the young person and/ or parents/ carers for this support to take place*).

Parents/Carers will:

- Inform Whitburn Church of England Academy, either upon admission or on initial diagnosis, that their child has a history of asthma.
- Provide all relevant information regarding the child's asthma via the IHCP, asthma care plan or asthma card.
- Notify the school, in writing, of any changes to the IHCP, asthma care plan or asthma card during the year.
- Ensure that their child has an adequate supply of appropriate medication (reliever) in school at all times.
- Provide the school with a spare reliever inhaler (and spacer where relevant) labelled with their child's name on it.
- Ensure their child has regular asthma reviews with their doctor or asthma nurse (every six to 12 months).

Students will:

- Respect other students with and without asthma equally.
- Carry their own inhalers with them at all times and be responsible for them. Reliever inhalers (usually blue) are of particular importance. Relievers commonly used are: *Salbutamol, Ventolin, Salamol, Aerolin, Bricanyl, Terbutaline*.

Considerations:

Nebulisers

Any student with severe asthma may use an electric compressor called a nebuliser to deliver their asthma drugs. The school nurse or the student's GP should liaise with the school to give correct management advice for these children.

APPENDIX A (i) – SCHOOL ASTHMA CARE PLAN LETTER

Parent/Carer of:
Address
Address

School Asthma Care Plan

Dear Parent/Carer

This letter has been sent to you as the parent / carer of an asthmatic child. Whitburn Church of England Academy takes its responsibilities to students with asthma very seriously and we have an Asthma Policy in place to enable all staff members to help your child.

I would be grateful if you would fill in the requested details on the attached School Asthma Care Plan. If you are in any doubt about the treatment details then please take the sheet to your child's doctor or nurse who will explain your child's asthma treatment to you. Your child's doctor or asthma nurse may alternatively provide a completed Asthma Card.

The completed record will provide details of your child's treatment and what steps need to be taken if he/she has an asthma attack at school. It is very important that the record is updated if the treatment is changed at a future date.

Every child who has been diagnosed with asthma should provide the school with a spare inhaler. Please send a spare inhaler, in its **original packaging** that is clearly labelled with your child's name, in with the completed Asthma Care Plan or Action Plan.

I look forward to receiving this important record and thank you in advance for your co-operation in this important matter.

Yours sincerely

Mrs A Duddin
Managing Medication Officer



APPENDIX B (i) – SCHOOL ASTHMA CARE PLAN

To be completed by the Student's Parent/Carer

SCHOOL ASTHMA CARE PLAN – PART A

Student Name _____

Date of Birth: _____

Form Group _____

General Practitioner _____

GP tel. No. _____

Regular treatment to be taken in school time: Y / N

Please provide Whitburn Church of England Academy with a spare inhaler – in its original packaging - so we can store this in school for your child.

Name of treatment and device used: _____

How much and when taken? _____

Treatment to be taken before exercise / play: Y / N

For sudden shortness of breath, wheeze, cough or chest tightness

Name of treatment and device used _____

How much and when taken? _____

I confirm that:

*a) My child is able to take responsibility for the self-administration of his/her asthma medication and is able to carry his/her asthma device at school.

*b) My child is not able to self-administer his/her medication and will require assistance.

**Please delete a) or b)*

What signs can indicate that your child is having an asthma attack?

What are your child's triggers (*things that make your child's asthma worse?*)

Pollen

Exercise

Cold/Flu

Stress

Weather

Air Pollution

Other Please state

PART B: CONSENT FORM FOR USE OF EMERGENCY SALBUTAMOL INHALER

Student showing symptoms of asthma / having asthma attack

1. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [*delete as appropriate*].
2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day and the school also holds a spare inhaler prescribed for my child.
3. In the event of my child displaying symptoms of asthma, and if their inhaler and spare inhaler are not available or are unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Parent/Carer signature:..... Date:

Name (print).....

Alternatively, please complete a school asthma card, downloadable [here](#)

APPENDIX B (II) GENERIC LETTER ABOUT ASTHMA TO ISSUE TO ALL PARENTS/ CARERS

Children with Asthma

Dear Parent/Carer

Whitburn Church of England Academy takes its responsibilities to support students with medical conditions very seriously and we have an Asthma Policy in place to enable all staff members to help children with asthma.

For all children diagnosed with asthma we require the following steps to be taken in order to help us care for your child:

- If your child has been diagnosed with asthma and **you haven't already informed the Academy** then please can you do so **immediately**.
- Please ensure that your child always has access to his/her inhaler whilst in school.
- A spare inhaler (in its **original packaging clearly labelled with your child's name**) should be given to the Main Academy Office for use in case of an emergency.
- **As a matter of urgency** you should **either**
 - (i) complete and return an **'Asthma Care Plan'** (attached)
 - or**
 - (ii) complete and return an **'Asthma Card'** (attached).

This is a new version of the Asthma Card which gives the Academy consent to administer an emergency inhaler should your child require one. Your child's GP or Asthma Nurse can support you in completing either document, which are also available from the Main Academy Office. It is very important that we have an up to date record of your child's medical needs and you must inform the Academy immediately if treatment is changed. *Please note that we cannot administer an emergency inhaler to a child where his/her diagnosis is not on our records and where we have not received prior consent from the parent/carer.*

The full Asthma Policy can be found on our website, along with further information on our procedures for managing medication and supporting students with medical conditions.

If you wish to discuss this or have any concerns please do not hesitate to contact Mrs Duddin via the Main Academy Office.

Yours faithfully

J Crowe
Principal

APPENDIX B (III) – SCHOOL ASTHMA FOLLOW UP LIASION

No Asthma Card

Your child is identified on our system as having Asthma. Please complete and return the attached Asthma card by **XXXXXXXX** so we can keep our records accurate.

If your child no longer suffers from Asthma, we require written documentation from their GP so we can amend our information and remove your child from the Asthma register.

Many thanks for your co-operation in this matter.

No Spare Inhaler

Your child is identified on our system as having Asthma. As well as your child carrying an inhaler with them at all times, it is highly recommended that a spare prescribed inhaler is kept in the Academy for emergencies; we do not currently have one in school for your child. Please send an inhaler to the Main Academy Office (this must be in the box with the prescription label on it) by **XXXXXX**.

If your child no longer suffers from Asthma, we require written documentation from their GP so we can amend our information and remove your child from the Asthma register.

Many thanks for your co-operation in this matter.

No Asthma Card and no Spare Inhaler

Your child is identified on our system as having Asthma. Please complete and return the attached Asthma card by **XXXXXXXX** so we can keep our records accurate.

As well as your child carrying an inhaler with them at all times, it is highly recommended that a spare prescribed inhaler is kept in the Academy for emergencies; we do not currently have one in school for your child. Please send an inhaler to the Main Academy Office (this must be in the box with the prescription label on it) by **XXXXXX**

If your child no longer suffers from Asthma, we require written documentation from their GP so we can amend our information and remove your child from the Asthma register.

Many thanks for your co-operation in this matter.

APPENDIX C
LETTER TO ADVISE RE EMERGENCY SALBUTAMOL INHALER USE

Date:

Dear Parent/Carer.

Student Name

EMERGENCY SALBUTAMOL INHALER USE

This letter is to formally notify you that your child had problems with his / her breathing today at
o'clock. This happened when
.....
.....
.....

(description of what student was doing at the time and where he/she was).

A member of staff helped them to use their asthma inhaler.

The inhaler used was (please tick box that applies)

Student's own prescribed inhaler

Student's own prescribed spare inhaler

School's emergency inhaler

Number of puffs given

Additional information (if emergency inhaler was used please give reason why the student's own or spare inhaler was not accessible).

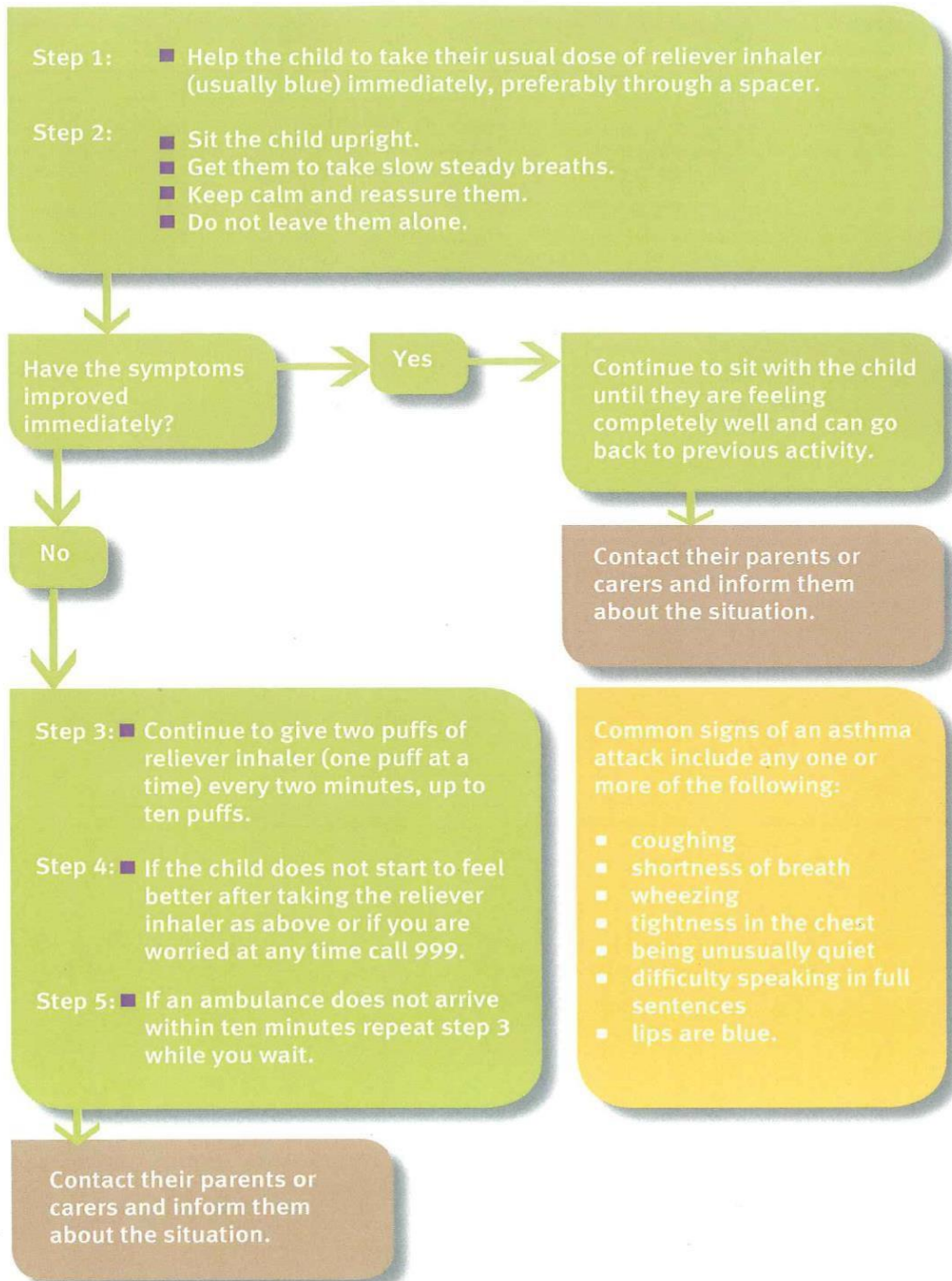
Although they soon felt better, we would strongly advise that you have your son / daughter seen by your own doctor as soon as possible.

Yours sincerely

APPENDIX D – ASTHMA ATTACK PROCEDURES

WHAT TO DO IF A STUDENT HAS AN ASTHMA ATTACK AT SCHOOL

How to deal with an asthma attack



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APPENDIX E – ASTHMA TREATMENT DEVICES

WHAT ARE THE TREATMENT DEVICES?

There is a large and growing array of inhalation delivery devices. The expiry dates is stamped on each device.

1. Metered Dose Inhaler

The pressurised aerosol (metered dose) inhaler (MDI) is the most commonly used device. It is cheap but requires very good co-ordination during the breathing in of the drug.

Under the age of four and until a child can differentiate between sucking and blowing, a MDI is often used together with a spacer device (e.g. Volumatic, Nebuhaler, Fisonair). Spacer devices may also be used by older children for inhalation of topical steroids or of a "reliever" during an acute attack.

Most children up until the age of ten (and many thereafter!) have difficulty acquiring the necessary technique. The Autohaler is a special MDI which overcomes co-ordination problems as the drug is released automatically upon breathing in through the mouthpiece.

2. Dry Powder Device

These do not require co-ordination as the drug is breathed in as a dry powder. There are various devices available: e.g. Accuhaler, Aerohaler, Cyclohaler, Diskhaler, Rotahaler, Spinhaler, Turbohaler.

3. Nebuliser

A nebuliser is a machine which breaks up liquid drugs into tiny droplets, forming a mist which is breathed in. It is an effective way of delivering treatment for children with severe asthma. When children who use nebulisers are admitted to school and when children at school start to use nebulisers, Head Teachers should liaise with the school doctor or school nurse with regard to management with and administration of the nebuliser. This should include how the nebuliser is used, how often it should be used and when to seek help. Electric nebulisers need to be serviced from time to time.

APPENDIX F – ASTHMA INFORMATION

Useful links

For convenience both hyperlinks and full URLs are given below.

Supporting Pupils with Medication Needs, (Department of Education, Department of Health, Social Services and Public Safety, 2008)

http://www.deni.gov.uk/index/support-and-development-2/special_educational_needs_pg/special_educational_needs-supporting_pupils_with_medication_needs-2.htm

Supporting pupils at school with medical conditions. Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (Department for Education, 2014).

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions>

Asthma UK Website

<http://www.asthma.org.uk/>

Education for Health

<http://www.educationforhealth.org>

School Asthma Cards

<http://www.asthma.org.uk/Shop/school-asthma-card-pack-of-20-healthcare-professionals>

NHS Choices, Asthma in Children

<http://www.nhs.uk/conditions/asthma-in-children/pages/introduction.aspx>

NICE Quality Standard

<http://publications.nice.org.uk/quality-standard-for-asthma-qs25>

Children and Maternal Health Intelligence Network

<http://www.chimat.org.uk/>

Getting it right for children, young people and families. Maximising the contribution of the school nursing team: Vision and Call to Action (March 2012).

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216464/dh_133352.pdf

Asthma Policy		
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