

Asthma Policy and Guidance





Asthma Policy

Core Policy Information			
Policy Title		Asthma Policy and Guidance	
ID	P04	Area	Child Health and Well Being
Development Status		Embedded	
Development		This policy was developed in line with West Sussex local authority guidance for administration of medicines and the Asthma Toolkit May 2020	
Legal Basis		Recommended	
Legal Guidance		Not applicable	
RACI			
RACI	Position		Name
Responsible	Medical Lead		Nicola Soltermann
Accountable	Administration Manager		Treena Beech
Consulted	Whole school community		
Consultation Details	Email circulation inviting any comments, queries or concerns		
Informed	Whole School Community		
Informed Details	Email confirming location of policy and its recent review and update		
Review and Ratification			
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Governor Oversight	Pastoral	Latest Approval Date:	Autumn 20
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Approval delegated to	Not Delegated		
Storage and Communication			
Hard Copy	Staff Room, Entrance		
Web Link	https://www.chesswood.w-sussex.sch.uk/page/?title=Asthma&pid=225		
System Link	Y:\School Level\Policies\Asthma Policy		



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Agreement Links

This policy has been developed in accordance with Sussex Community NHS West Sussex County Council using the West Sussex Policy as guidance. This policy should be read in conjunction with the Supporting Pupils with Medical Conditions Policy and the Supporting Material.

This policy should be read in conjunction with the following school policies

Policy/Guidance/ Poster	<u>System Link</u>
	<u>School Website Link</u>

Supporting Children with medical conditions	<u>Y:\School Level\Policies\Supporting Pupils with Medical Conditions</u>
	<u>https://www.chesswood.w-sussex.sch.uk/page/?title=Supporting+Children+with+Medicines&pid=226</u>
West Sussex Asthma Toolkit	<u>Y:\School Level\Policies\Asthma Policy\Supporting Guidance</u>

School Vision

At Chesswood Junior School we inspire our whole school community to enjoy their learning adventure and have fun along the way. We ignite a passion for learning throughout the school community, securing excellence, empathy and equality in all that we do.

School Mission

We will strive to achieve the highest standards of academic achievement and behaviour within a vibrant, exciting learning environment so that all children leave this school with confidence and the ability to take advantage of future opportunities.



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1. Introduction

At Chesswood Junior School we:

- Recognise that asthma is a widespread, serious but controllable condition and the school welcomes all pupils with asthma
- Ensure that pupils with asthma can and do participate fully in all aspects of school life, including art, PE, science, educational visits and out of hours activities
- Recognise that pupils with asthma need immediate access to reliever inhalers at all times
- Keep a record of all pupils with asthma and the medicines they take
- Endeavour that the whole school environment, including the physical, social, sporting and educational environment, is favourable to pupils with asthma
- Ensure that all staff (including supply teachers and support staff) who have pupils with asthma in their care, know who those pupils are and know the school's procedure to follow in the event of an asthma attack

2. Asthma Medicines

Immediate access to reliever medicines is essential. Pupils with asthma are encouraged to carry their reliever inhaler as soon as the parent/carers, doctor/asthma nurse and class teacher agree they are mature enough. The reliever inhalers of younger children are kept in the classroom.

All inhalers must be provided with the original prescription box with the child's name and dosage details marked clearly on the label. They must also come to school via the front office, clearly labelled with the completed accompanying forms (see appendices).

It is advised that the school is provided with a labelled, in date spare reliever inhaler. These are held in case the pupil's own inhaler runs out or is lost or forgotten and are kept in the school first aid room.

If a parent/carers has stated that their child requires an inhaler in school but does not supply an **in-date inhaler**, the school will take the following action:

Phone the parent/carers and request that the inhaler is brought into school without delay. The phone call will be logged on the pupil's Bromcom account. Further conversations may be appropriate, at the discretion of the school.



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If the parent/carer fails to supply the inhaler as requested, write to and email the parent using the example letter (see appendices). This repeats the request for the inhaler and states that without the inhaler, in the event of an asthma attack, staff will be unable to follow the usual Asthma Emergency inhaler procedures and will be reliant on calling 999 and awaiting the Emergency Services. The letter will be filed with the child's asthma information form.

School staff who agree to administer medicines are insured by the local authority when acting in agreement with this policy. All school staff will facilitate pupils to take their medicines when they need to.

3. Exercise and Physical Activity

All children are encouraged to participate fully in all aspects of school life including PE. Children are encouraged/reminded to use their inhalers before or after exercise (if instructed by the parent/carer on the asthma form) and during exercise if needed. Staff are aware of the importance of thorough warm up and cool down. Each pupil's inhaler will be labelled and kept in a box at the site of the lesson.

4. The School Environment

The school endeavours to ensure that the school environment is favourable to pupils with asthma. The school will take into consideration, any particular triggers to an asthma attack that an individual may have and will seek to minimise the possibility of exposure to these triggers.

5. Procedure for Responding to Asthma Attacks

In the event of an asthma attack, staff will follow the school procedure:

The child will be sat down where they are and encouraged to use 2 puffs of their inhaler whilst a first aider is summoned.

The first aider will bring the pupils Asthma Information Form to ensure consent is given to provide the following treatment in an emergency, which is recognised by Asthma UK and the NHS:

1. Sit the child in an upright position, reassure them and keep calm. Loosen any tight clothing around their neck.
2. Help the child take one puff of their reliever inhaler every 30-60 seconds with a spacer, shaking the inhaler between doses, up to a maximum of 10 puffs.
3. Call 999 if pupil is starting to feel worse or if the symptoms are not relieved after 10



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puffs and contact the child's parents/carers.

4. Step 2 can be repeated if the ambulance is taking longer than 15 minutes – if in doubt seek advice from the call operator.

An ambulance will be called if there is no improvement in the child's condition, if the child has received a maximum of 10 puffs of their inhaler (even if they are feeling better) or if there is any doubt at any point about the child's condition.

6. Management of Inhalers in School

The school recognise the importance of children self-managing their inhalers and this is actively supported through the systems and procedures in place. Inhalers are managed within school through the following:

- Each class has a 'medical box' in which all inhalers for the class, record books and asthma guidance is kept. This is kept in a prominent place in the classroom to allow easy access.
- Each child with an inhaler has a 'named bag' in the medical box containing the inhaler itself, the dosage record card and the child's Asthma Information Form.
- When medication is taken, the child records this on their dosage record card which is in their 'named' bag. An adult can assist with this if the child finds it difficult.
- The class box is taken to PE lessons and returned at the end of the session.
- The inhaler bags are taken on school visits and swimming sessions.
- The medical team are responsible for undertaking monthly checks and will advise the parent if a replacement inhaler is needed.
- New inhalers received for a pupil during the year are to be sent to the medical officer initially to update records.
- In July (end of school year) all held inhalers are returned home.
- In September **all** medication is given to the medical officer and records are updated. Inhaler boxes are then re-distributed.



7. Emergency Salbutamol Inhaler in School

We hold two emergency salbutamol inhalers in school and disposable spacers. This can only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

The inhaler can be used if the pupil's prescribed inhaler is not available (for example, because it is broken, or empty).

- The emergency inhaler and spacers are held in the medical room in a labelled box.
- A register of children in school that have been diagnosed with asthma or prescribed a reliever inhaler is kept with the emergency inhaler together with parental consent.
- When the emergency inhaler is used staff will make a record on the 'Emergency Salbutamol Inhaler details of use' form and the parent will be informed, in writing.
- The protocol for the emergency salbutamol inhaler is monitored by the medical officer and one other designated member of the medical team.

8. Record Keeping

8.1. *Pupil Information*

When a child joins the school, parents/carers are asked to declare any medical conditions (including asthma) that require care within school, for the school's records. At the beginning of each school year, parents are requested to update details about medical conditions (including asthma) and emergency contact numbers.

All parents/carers of children with asthma are required to complete an online Asthma Information form. From this information the school keeps its asthma records. All teachers know which children in their class have asthma. Parents are required to update the school about any change in their child's medication or treatment. The school will develop Health Care Plans for children with severe asthma.



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8.2. Use of Inhalers

The use of an inhaler is recognised as administering a medicine and, as such, keeping an accurate record of its use is essential. A child records their use of the inhaler on each occasion used. Adults will assist in any case where the child finds this difficult. The following information is recorded:

- Date
- Time
- Exact number of 'puffs' taken
- Any triggers

The medical officer will review the usage as part of the monthly monitoring and make a record of this information, informing parents where necessary.

If the emergency salbutamol inhaler is used a record will be made on the 'Emergency Salbutamol Inhaler details of use' form and the parents will be notified.

9. Monitoring and Review of Policy and Procedure

Regular monitoring of this policy is essential in ensuring that identified procedures and practice are fully embedded throughout the school. Monitoring will be undertaken by both the medical officer and the Pastoral Deputy Head Teacher. Any actions which are deemed necessary following such procedures are to be put in place without delay.

The policy will be formally reviewed every two years in conjunction with other medical policies.



10. Appendices



Example Letters

EXAMPLE LETTER: OUT OF DATE INHALER

Date

Dear Parent or carer of (name and class of child)

We are writing to advise you that your child's inhaler is out of date. Please would you obtain a new inhaler to replace the one we have in class as matter of urgency.

Many thanks.

Yours sincerely,

Chesswood Junior School Medical Team

EXAMPLE LETTER: IN-DATE INHALER NOT PROVIDED

Date

Dear Parent or Carer of (Name and class of child)

Following our recent emails and letter, I am very concerned that an inhaler has not been provided. We have on our records that an inhaler is needed in school, and you have agreed to provide an inhaler. Please ensure that:

- An inhaler
- A spacer

are provided without delay.

If your child no longer requires an inhaler, please email the school office to advise us.
office@chesswood.w-sussex.sch.uk

Please be aware that in the absence of an inhaler staff will not be able to follow the usual Asthma Emergency inhaler procedures.

Yours sincerely,

Chesswood Junior School Medical Team



LETTER TO INFORM PARENTS OF EMERGENCY SALBUTAMOL INHALER USE

Date

Dear Parent or carer of (name and class of child),

This letter is to formally notify you that your child had problems with his/her breathing today.

☐ They did not have their own inhaler with them, so a member of staff helped them to use the emergency salbutamol inhaler. They were given puffs.

☐ Their own inhaler was not working, so a member of staff helped them to use the emergency salbutamol inhaler. They were given puffs.

Please ensure that a replacement inhaler is brought into school as soon as possible.

Yours sincerely

Chesswood Junior School Medical Team



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ASTHMA INFORMATION FORM

Please complete the questions below so that the school has the necessary information about your child's asthma. **Please return this form without delay.**

CHILD'S INFORMATION

CHILD'S NAME.....

D.O.B: CHILD'S CLASS:

1. Does your child require an asthma inhaler in school?

TREATMENT SECTION

2. Has your child been diagnosed with asthma by a medical professional?
3. When was your child's last asthma review with the asthma clinic?
4. Name/Type of medication
5. Expiry date of medication
6. Please provide information on your child's current treatment. (Include the dose and how many puffs? Do they require a spacer?
7. What are the triggers for your child's asthma?
8. Can your child self-administer his or her own inhaler and spacer?
9. Does your child need their inhaler BEFORE doing exercise/PE? If so, how many puffs?
10. Does your child need their inhaler AFTER doing exercise/PE? If so, how many puffs?
11. What procedures would we need to take for your child in an emergency situation relating to this medication that they have been prescribed?

CONFIRMATIONS

Please confirm your agreement with the following statements – I as a parent will ensure my child's medication is stored at, at all times:

- ☐ I can confirm the medication is in its original container
- ☐ I can confirm that the original dispensing label from the pharmacy shows on the medication
- ☐ I can confirm that the patient information leaflet has been supplied with the medication
- ☐ I can confirm that my child's name is stated on the prescription label
- ☐ I can confirm that my child's medication is in date



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Do you give consent for the following treatment to be given to your child as recognised by Asthma UK in an emergency?

Sit the child in an upright position, reassure them and keep calm. Loosen any tight clothing around their neck.

Help the child take one puff of their reliever inhaler every 30-60 seconds with a spacer, shaking the inhaler between doses, up to a maximum of 10 puffs.

Call 999 if pupil is starting to feel worse or if the symptoms are not relieved after 10 puffs and contact the child's parents/carers.

NOTE: An ambulance will be called if there is no improvement in the child's condition, if the child has received a maximum of 10 puffs of their inhaler (even if they are feeling better) or if there is any doubt at any point about the child's condition.

- ☐ I consent
☐ I do not consent

SCHOOL EMERGENCY INHALER USE

From time to time, inhalers may not be located, may have been misplaced by a child or are out of date. We will use a school emergency inhaler in such circumstances.

My child may be administered the school's emergency salbutamol inhaler in an emergency by school staff.

- ☐ I agree
☐ I do not agree

Do you have any further questions, queries or concerns relating to asthma management at school?

.....
.....

PARENT'S NAME:

SIGNATURE:

EMERGENCY CONTACT NUMBER:

CHILD'S ADDRESS:.....

.....

I have parental responsibility: YES / NO

This form may only be completed by an adult with parental responsibility

In the event that parents are separated or divorced it remains vitally important that all parents continuing to play an active part in a child's life and welfare are fully informed of the information that is shared in this form. It is solely a family responsibility, not that of Chesswood Junior School to ensure all parents with responsibility for a child's welfare maintain good communication in relation to a child's medical needs.

I have informed all parents with responsibility for my child of the information shared with the school. YES / NO