

Barker's Lane Community School  
ASTHMA POLICY

### **Introduction**

Barker's Lane recognises that asthma is widespread, a serious but controllable condition affecting many pupils and staff at the school. We positively welcome all with asthma. The 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, governors, pupils, parents, the Local Authority and outside agencies.

*This policy should be read alongside the Healthcare Needs policy.*

### **Indemnity**

Staff in local authority schools who volunteer to administer medication will be provided with indemnity.

In emergencies, staff should act as any reasonable prudent parent would, which may include giving medication.

### **Asthma Attacks and Medication**

All staff are aware of guidelines displayed in school. Training will be offered regularly by the school nurse.

- All staff who come into contact with pupils with asthma are made aware of what to do in the event of an asthma attack.
- Immediate access to reliever medication is essential. Pupils with asthma are encouraged to carry their reliever inhaler as soon as the parent / carer, doctor, asthma nurse and/or class teacher agree they are mature enough (usually around the age of 7).
- Reliever inhalers of younger children are kept in designated areas within the classroom (detailed on asthma register). Parents / carers are asked to ensure that the school is provided with a labelled reliever inhaler. All inhalers must be labelled with the child's name by the parent / carer / pharmacist.
- Triggers such as dust or cold air can cause breathing difficulty, sometimes accompanied by cough and wheeze. This is an asthma attack, when reliever inhalers are needed.
- For mild attacks children should take their usual reliever inhaler.

### **Access to Inhalers – General Information**

Delay in taking reliever inhalers (usually blue) can result in severe asthma attacks.

#### ***Do***

- Allow access to inhalers during breaks, before exercise and during exercise.
- Remind children to take their inhalers.
- Remember inhalers for swimming and off site activities.
- Talk firmly to non-asthmatics who experiment with relievers about the need to treat medicines with respect. They may experience a fast heart rate or tremor, but no long term effects.

#### ***Don't***

- Lock inhalers in central offices / cupboards.

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**Tips**

- Keep young children's inhalers and spacers in a designated area in the classroom
- Take the inhaler box with the register for fire drills
- Teachers need to encourage those with exercise-induced symptoms to take their reliever just before activity; warm up with a few short sprints over 5 minutes; take it again during exercise if they get symptoms; take a rest until they feel better.
- Encourage children with asthma to participate in all school activities

**Exercise and Activity – P.E & Games**

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 from the school's asthma register. Pupils with asthma are encouraged to fully participate in all PE lessons or any other form of physical activity.

- If a pupil needs to use their inhaler before or during an activity they are encouraged to do so.
- Inhalers are always taken to swimming lessons.

**Other Medication and School Trips / Residential Visits**

As well as relievers, children may use preventer inhalers (brown, orange or purple), although use in school time would be unusual.

Preventers reduce airway swelling and are usually taken twice daily, even when the child appears well. Some children may also take long-acting relievers (green or purple). These are again taken twice daily. Any of these inhalers may be needed during residential or long day trips along with any oral medication. School letters about residential visits etc, include a reminder to pack inhalers. Inhalers are always taken on school day visits.

**The School Environment – Creating an asthma friendly environment**

***Minimising Triggers***

Minimise exposure to potential triggers. Avoid:

- feathery and furry school pets.
- pollen producing plants.
- fumes - use fume cupboards where possible and allow affected children to leave room.
- smoking - a completely smoke free environment is mandatory in Wrexham schools.

***Training***

Training will be offered regularly by the school nurse.  
The Headteacher is responsible for assessing staff training needs.

***Record Keeping***

- At the beginning of each school year or when a child joins the school, parents / carers are asked if their child has any medical conditions including asthma on our data / information sheet.

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- All parents / carers of children with asthma are consequently sent an Asthma UK School Asthma Card to give to their child's doctor or asthma nurse to complete. It is the responsibility of parents / carers to return the card to school and to ensure that they are regularly updated or if there are any changes. From this information the school keeps its asthma register, which is available to all staff.
- The absence of parental consent should not stop staff from acting appropriately in emergencies.
- Staff are expected to report concerns to parents and school nursing staff about:
  - frequent inhaler use
  - lack of attention in class
  - unusual tiredness

These signs may indicate potentially undiagnosed or poorly controlled asthma.

### **Roles and Responsibilities**

#### ***School***

- Understand the asthma policy and be responsible for the implementation
- Know which pupils they come into contact with have asthma
- Know what to do in an asthma attack
- Allow immediate access to reliever inhalers
- Tell parents / carers if their child has an asthma attack or if their child is using more reliever inhaler than they usually would
- Ensure pupils have inhalers with them on school trips, when they are out of the classroom and pre-exercise if necessary
- Be aware that a pupil may be tired because of night-time symptoms
- Liaise with parents / carers, the school nurse and Additional Learning Needs Co-ordinator (ALNCo) if they have any concerns about a child's learning and/or wellbeing because of their asthma.
- Ask parents to update records.

#### ***Pupils***

- Treat children with and without asthma equally.
- Allow the blue inhaler to be used when appropriate. Ensure a staff member is called.
- Treat medication with respect.

#### ***Parents***

- Inform school if their child has asthma, medication required and changes as they happen.
- Ensure the school has a complete and up-to-date school asthma card for their child
- Ensure inhalers are in date, and pharmacy has labelled them with child's name and dosage.
- Inform school of any medicines their child requires when taking part in school visits and other out-of-school activities
- Ensure their child's inhaler (and spacer where relevant) is labelled with their name
- Ensure their child's reliever inhaler and any spare is within its expiry date.
- Keep child at home if he/she is not well enough to attend school.
- Ensure their child has regular asthma reviews with their doctor or asthma nurse (every six to twelve months).

This policy was agreed by staff and governors in January 2013. It was reviewed and updated in March 2019. It will be reviewed as necessary.

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