

Amington Heath Primary School and Nursery

Asthma Policy

Use of inhalers in school

ASTHMA POLICY

To enable every individual regardless of ability to achieve their full potential, to prepare for future life and to become lifelong learners, developing a thirst for learning and to become good citizens equipped for the challenges of the 21st century.

The Principles of our school Asthma Policy

- The School recognises that asthma is an important condition affecting many school children and welcomes all pupils with asthma
- Ensures that children with asthma participate fully in all aspects of school life including PE
- Recognises that immediate access to reliever inhalers is vital
- Keeps records of children with asthma and the medication they take
- Ensures the school environment is favourable to children with asthma
- Ensures that other children understand asthma
- Ensures all staff who come into contact with children with asthma know what to do in the event of an asthma attack
- Will work in partnership with all interested parties including all school staff, parents, governors, doctors and nurses, and children to ensure the policy is implemented and maintained successfully

This policy has been written with advice from the Department for Education and Employment, National Asthma Campaign, the local education authority, the school health service, parents, the governing body and pupils

1. This school recognises that asthma is an important condition affecting many school children and positively welcomes all pupils with asthma.
2. This school encourages children with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, their employers (the local education authority) and pupils. Supply teachers and new staff are ALSO MADE AWARE OF THE POLICY.

Indemnity

- Staff who are not happy to administer medication will be provided with indemnity.
- In emergencies staff should act as any prudent parent would, which may include giving medication.
- Each inhaler provided by parents / carers for pupils to use must be within date, named and prescribed with an appropriate pharmacy label.

Access to Inhalers

- Individual pupils' inhalers are kept in a named box in their classrooms.
- Children are allowed access to their inhalers at any time in the school day, should they feel the need to use it.
- Inhalers should accompany them when taking part in offsite activities, or residential trips.
- Inhalers should be taken outside along with the register for fire drills.

Guidance on the use of emergency salbutamol inhalers in schools September 2014.

From 1st October 2014 the Human Medicines (Amendment) (No. 2) Regulations 2014 will allow schools to buy salbutamol inhalers, without a prescription, for use in emergencies.

The emergency salbutamol inhaler should 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).

This change applies to all primary and secondary schools in the UK. Schools are not required to hold an inhaler – this is a discretionary power enabling schools to do this if they wish. Schools which choose to keep an emergency inhaler should establish a policy or protocol for the use of the emergency inhaler based on this guidance.

Keeping an inhaler for emergency use will have many benefits. It could prevent an unnecessary and traumatic trip to hospital for a child, and potentially save their life. Parents are likely to have greater peace of mind about sending their child to school. Having a protocol that sets out how and when the inhaler should be used will also protect staff by ensuring they know what to do in the event of a child having an asthma attack.

- the emergency salbutamol inhalers are stored in the mobile classrooms and in the medical room in a red box. There are two spacers with each emergency kit.
- Replacement inhalers are obtained when expiry dates approach
- Replacement spacers are available following use. The plastic spacer should not be reused. The inhaler itself can be reused provided it is cleaned after use. The inhaler canister should be removed and the plastic inhaler housing and cap should be washed in warm running water, and left to dry in air, in a clean, safe place and the inhaler returned to the designated storage place.
- The plastic inhaler housing (which holds the canister) is cleaned, dried and returned to storage following use or replacements are available if necessary.
- The emergency inhaler is only used by children with asthma with written parental consent for its use.
- appropriate support and training for staff in the use of the emergency inhaler in line with the schools wider policy on supporting pupils with medical conditions.
- A record of use of the emergency inhaler is kept and parents/Carers are informed that their child has used the emergency inhaler There should be at least two volunteers responsible for ensuring the protocol is followed.

All school staff will let children take their medication 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 asthma. Medical administration logs are signed whenever the child uses their reliever inhaler.

PE

Taking part in sports is an essential part of school life. Teachers are aware of which children have asthma from the asthma register. Children with asthma are encouraged to participate fully in PE. Teachers will remind children whose asthma is triggered by exercise to take their reliever inhaler before the lesson and complete a warm up of a couple of short sprints over five minutes before the lesson. Each child's inhalers will be labelled and kept in a box at the site of the lesson. If a child needs to use their inhaler during the 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 children with asthma. The school does not keep furry and feathery pets and has a non-smoking policy. As far as possible the school does not use chemicals in science and art lessons that are potential triggers

for children with asthma. Children are encouraged to leave the room and go and sit in the secretary's office if particular fumes trigger their asthma.

Making the School Asthma Friendly

The school ensures that all children understand asthma. Asthma can be included in Key Stages 1 and 2 in science, design and technology, geography, history and PE of the national curriculum. Children with asthma and their friends are encouraged to learn about asthma; information for children and teens can be accessed from the following website www.asthma.org.uk.

When a Child is falling behind in lessons

If a child is missing a lot of time from school because of asthma or is tired in class because of disturbed sleep and falling behind in class, the class teacher will initially talk to the parents. If appropriate the teacher will then talk to the school nurse and special educational needs coordinator about the situation. The school recognises that it is possible for children with asthma to have special education needs because of asthma.

Asthma Attacks

All staff who come into contact with children with asthma know what to do in the event of an asthma attack. The school follows the following procedure, which is clearly displayed in all classrooms.

- 1.Ensure that the reliever inhaler is taken immediately.
- 2.Stay calm and reassure the child.
- 3.Help the child to breathe by ensuring tight clothing is loosened.

After the attack

Minor attacks should not interrupt a child's involvement in school. When they feel better they can return to school activities.

The child's parents must be told about the attack.

Emergency procedure

Call the child's doctor urgently from the secretary's office using the asthma register to find out the number of the GP if:

- The reliever has no effect after five to ten minutes
- The child is either distressed or unable to talk
- The child is getting exhausted
- You have any doubts at all about the child's condition

If the Doctor is unobtainable, call an ambulance

- If for any reason the child stops breathing, an ambulance should be called immediately

A child should always be taken to hospital in an ambulance. School staff should not take them in their car as the child's condition may deteriorate