



Bomere Heath Church of England Primary School
ASTHMA POLICY AUTUMN 2014

We **welcome** all children.

Our pupils are the heart of everything we do.

We strive for **outstanding teaching and learning** with a **Christian ethos** for every individual in a **safe and stimulating environment**.

We demonstrate by example the power of **creativity, respect for others and teamwork**.

We play our part in the **wider community**.

School Asthma Policy updated October 2014

The school's approach to Asthma

The School:

- Recognises that Asthma is a condition affecting many children
- Welcomes all pupils with asthma into the school community
- Encourages them to achieve their full potential in all aspects of school life
- Helps and encourages them to manage their own condition effectively and safely
- Ensures they have the confidence to ask for support in school when needed.

The school believes this policy will:

- Promote increased attendance, participation and achievement for pupils with asthma
- Enable all pupils to understand, appreciate and encourage the achievements of people with asthma
- Enable staff to understand and assist pupils with asthma when necessary and appropriate
- Enable opportunities for studying asthma as part of the National Curriculum

Training

- The school has a regular programme of training and staff consultation, covering all the medical conditions, including asthma, of all the children in their care. Regular training and updates are given to new staff, trainee teachers and other temporary members of staff. All staff are made aware of where and when to ask for help in dealing with medical conditions.

Using inhalers and responsibilities

- The school understands that immediate access to inhalers is vital. Pupils should be allowed to carry and use their own inhalers as soon as their doctors/ carers/school nurse and teacher agree they are mature enough to do so.
- Younger children should have their inhalers stored safely in the classroom and are available for use on request or when indicated
- It is the parents/carers responsibility to ensure that the child has a labelled inhaler with the issue date and child's name on.
- It is the Parents/carers responsibility to check the inhalers are checked termly and renewed where necessary and are fit for current use.
- Parents/carers are responsible for supplying new inhalers if it is lost, runs out or is forgotten. Spare inhalers must be checked renewed annually.
- We are advised by Asthma UK that inhalers are an inherently safe medicine but clearly children should not be allowed to use each others inhalers. It is school policy that staff may administer another child's inhaler in an emergency

Staff:

- Our staff member with designated responsibility for the care of pupils and staff with asthma in this school is ;Gill Maycock whose training was updated in May 2011
- Trained staff are insured to assist children with inhalers and nebulisers when acting in accordance with this policy.
- The designated member of staff (Gill) will:

** update policy in accordance with new legislation or advice of changes

** deliver training for all staff following her training

** keep lists of pupils with asthma updated and displayed on safeguarding board

** liaise with parents/guardians and secure permissions and store paperwork in asthma file

** ensure asthma procedures instruction are close to equipment needed

Staff are not required or able to supervise the administration of or to administer, any other medication associated with asthma.

Medical Information and responsibilities

- The school has a system to inform staff of pupils medical needs and the arrangements in place to meet them. At the beginning of the school year , or when the pupil joins the school parents/carers have the opportunity to inform staff if their child has asthma.
- Parents/Carers have the responsibility to inform school if their child's medication for asthma changes.
- **The school keeps an asthma register** which is updated in accordance with information from parents /carers.
- **The school will keep sufficient records** to facilitate support for the pupil
- The school does not undertake to keep definitive records of all asthma incidents

PE/Sport/Off site activities

- The school seeks to take all practical steps to encourage and enable pupils with asthma to take part in P.E
- All staff are aware that pupils must use their inhalers when they need to and will give appropriate support to children to take their inhaler before the lesson and /or warm up before exercise.
- The school is working towards children confidently managing their own asthma condition and pupils can request opportunities to use their inhalers and to warm up prior to P.E lessons.
- When classes take place off site or away from classrooms, the school requires pupils who need them to have inhalers and make arrangements for the safe storage/transport of inhalers when it is not practical for the pupil to carry his/her own.
- On extended/residential trips the school will require pupils who use inhalers to bring an appropriate supply.

Triggers for asthma

- The school undertakes to do all it can to ensure that the school environment is favourable for pupils or members of staff with Asthma or other respiratory conditions

Action taken includes:

- A No smoking policy throughout school.
- Housing of an access to school pets and animals will be managed to minimise the risk of an asthma attack.
- **Alternatives will be used to chemicals or art materials which may trigger asthma. Where this is not possible alternative lesson activities will be provided.**
- Where building works create a dusty environment, remedial action will be taken to prevent attacks.

When a child is falling behind in lessons

- If a child is absent from school because of Asthma, or is tired in class due to disturbed sleep due to the condition, the class teacher will initially talk to the parents/carer
- If appropriate the teacher will consult the school nurse and /or special needs co-ordinator regarding any action to be taken

- The school recognises that children with asthma may have special educational needs because of their condition

Asthma Attacks- Action to take:

- The school follows this procedure which is appropriately displayed in school:
- Ensure the reliever inhaler (blue one) is taken immediately
- Stay calm and reassure the child
- Help the child to breathe by ensuring that tight fitting clothing is loosened
- If the child is in extreme distress **CALL AN AMBULANCE.**

Emergency Procedure/Severe Attacks

A severe attack is defined as:

- 1) The inhaler has no effect after five to ten minutes
- 2) The child is distressed or unable to talk
- 3) The child is becoming exhausted
- 4) The child shows rapid signs of deterioration
- 5) There is any doubt at all about the child's condition

The procedure is **CALL AN AMBULANCE**

Repeat the inhaler every five minutes until the ambulance arrives. If a child is in severe distress or loses consciousness, call an ambulance **IMMEDIATELY.**

Display of action and emergency procedures

The school will prominently display the information given above and particularly the information about severe attacks. **The display will be available in the staff room, Head Teachers office and school medical area.**

Minor Attacks

- Minor attacks should not interrupt a child's involvement in school. A short rest period may be indicated.
- The child's parent/carer will be told about attacks which are minor but frequent.
- The child's class teacher is expected to have sufficient information to comment on the general nature of the condition and the effect it has on the child's educational progress.
- The school does not undertake to keep definitive records of all asthma attacks.

Recording of Severe attack

- In the event of a child having a severe asthma attack it is the responsibility of the school to inform the parent/carer
- Severe attacks will be recorded according to the school's normal procedures for recording medical incidents
- It is the responsibility of the parent/carer to give the school contact telephone numbers in case of a severe attack. These should consist of primary parent/carer workplace and home telephone numbers, plus a further contact number (which could be either parent or relative) in case they are not reachable at work or home.

