



# Asthma Policy

School Responsibility: Mrs. K Choma

Headteacher: Miss K Choma

Governor: Ben Thompson

Adopted: September 2021

Review: September 2024

## ETHOS STATEMENT

The School was founded by and is part of the Catholic Church. The School is to be conducted as a Catholic School in accordance with the canon law and teachings of the Catholic Church and in accordance with the Trust Deed of the Diocese of Leeds in particular:

1. Religious education is to be in accordance with the teachings, doctrines, discipline and general and particular norms of the Catholic Church;
2. Religious worship is to be in accordance with the teachings, doctrines, discipline and liturgical norms of the Catholic Church;

And at all times the school is to serve as witness to the Catholic faith in our Lord Jesus Christ.

## MISSION STATEMENT

*As a family with God in our hearts we love, laugh, and learn.*

The Lockdown Policy is based on the Catholic ethos of the school in which all members of the community are respected and valued.

## Asthma

Asthma is a condition that affects the small tubes (airways) that carry air in and out of the lungs. When a person with asthma comes into contact with something that irritates the airways (an asthma trigger), the muscles around the walls of the airways to tighten so that the airways becomes narrower and the lining of the airways becomes inflames and starts to swell. Sometimes, sticky mucus or phlegm builds up, which can further narrow the airways. These reactions make it difficult to breathe, leading to symptoms of asthma (Source: Asthma UK).

In 2004, Education Leeds consulted with Headteachers and other partners concerning a recommended asthma policy based on National Asthma Campaign guidance.

As a school, we recognise that asthma is a widespread, serious but controllable condition. This school welcomes all pupils with asthma and aims to support these children in participating fully in school life.

We endeavour to do this by ensuring we have:

- An asthma register
- Up-to-date asthma policy
- An asthma lead
- All pupils with immediate access to their reliever inhaler at all times
- All pupils have an up-to-date asthma action plan
- An emergency salbutamol inhaler
- Ensure all staff have regular asthma training
- Promote asthma awareness for pupils, parents and staff

### **Asthma Register**

We have an asthma register of children within the school which we update when required. We do this by asking parents and carers if their child is diagnosed as asthmatic or has been prescribed a reliever inhaler. When parents/carers have confirmed that their child is asthmatic or has been prescribed an reliever inhaler we ensure that the pupil has been added to the asthma register and has:

- An up-to-date copy of their personal asthma plan
- The reliever inhaler in school
- Permission from the parents/carers to use the emergency salbutamol inhaler if they require it and their own inhaler is broken, out of date, empty or has been lost

### **Asthma Lead**

This school's asthma lead's are **Miss Wilkinson and Miss Choma**. It is the responsibility of the asthma lead to manage the asthma register, update the asthma policy, manage the emergency salbutamol inhalers (please refer to the Department of Health guidance on the use of emergency salbutamol inhalers in schools March 2015) and to ensure measures are in place so that children can have immediate access to their inhalers.

### **Training**

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

### **Using Inhalers and Responsibilities**

The school understands that immediate access to reliever inhalers is vital. Pupil's inhalers are stored safely in the classroom and are available for use on request or when indicated. It is the parent/carer's responsibility to ensure that the child has a labelled inhaler with the issue date and child's name, and that those in daily use are checked termly and renewed when necessary. Parents/carers are advised to supply the school with a spare inhaler for use if the child's inhaler is lost, runs out or is forgotten. Spare inhalers must also be checked/renewed annually.

We are formally advised by Asthma UK that reliever inhalers are inherently safe medicines, however it should be noted that pupils should not be allowed to use each other's inhalers as it is illegal and increases the risk of spreading infection. Trained staff are insured to assist children with inhalers and nebulisers

when acting in accordance with this policy. 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 with a child who has asthma are given a National Asthma Campaign school card to give to their child's GP or asthma nurse. Parents/carers have the responsibility of making sure that the card is completed and returned to the school. The school will send update cards on an annual basis to parent/carers for updating. Once updated these cards must be returned to the school.

Parent/carers have the responsibility to inform the school if the medication of their child changes. This helps school keep 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.

### **School Environment**

The school does all that it can to ensure the school environment is favourable to pupils with asthma. The school has a definitive no-smoking policy. Pupil's asthma triggers should be recorded as part of their asthma action plan and the school will ensure that pupils will not come into contact with their triggers, where possible. As part of our responsibility to ensure all children are kept safe within the school grounds and on trips away, a risk assessment will be performed by staff.

Actions taken include:

- A no smoking policy throughout the school.
- 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 may create a dusty environment, remedial action will be taken to prevent asthma attacks.
- Reducing the risk of triggers such as dust, pollen, feathers etc

### **When asthma is effecting a pupil's education**

If a child is absent from school because of asthma, or is tired in class because of disturbed sleep due to the condition, the class teacher will initially talk to the parent/carer. It may simply be that the pupil needs an asthma review, to review inhaler technique, medication review or an updated Personal Asthma Action Plan. If appropriate, the class teacher will consult the school nurse and/or special educational 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**

The school follows the following procedure which is appropriately displayed in school:

1. Ensure that the reliever inhaler is taken immediately
2. Stay calm and reassure the child
3. Help the child to breathe by ensuring that tight-fitting clothing is loosened
4. If the child is in extreme distress, call an ambulance

## **Emergency procedure/Severe attacks**

A severe attack is defined as:

- the inhaler has no effect after five to ten minutes;
- the child is distressed or unable to talk;
- the child is becoming exhausted;
- the child shows signs of rapid deterioration;
- there is any doubt at all about the child's condition.

The procedure for a severe attack is to **call an ambulance**. Staff will repeat the reliever inhaler every few minutes until help arrives. If a child is in severe distress, or experiences any loss of consciousness, school will call an ambulance immediately.

### **Display of Action and Emergency Procedures**

The school will prominently display the information given in points 8 and 9 above and in particular the instructions for dealing with a severe asthma attack. The display will be available in the staff room, Headteacher's office and classrooms.

### **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, however the school does not undertake to keep definitive records of all asthma attacks. 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 pupil's educational progress.

### **Recording of severe attacks**

In the event of a pupil having a severe asthma attack it is the responsibility of the school to inform the parent/carer. Severe attacks will be recorded through the school's normal procedure 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 other parent or relative) in case they are not reachable at workplace or home.

### **Monitoring**

The effectiveness of this policy will be monitored in line with the school's monitoring and reviewing of school policy procedures.

Any questions regarding this policy should be directed to Miss Wilkinson and Miss Choma who are the school's lead teachers on this issue.