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| **Name of Policy:**  Asthma Policy | **Version/Last Review Date:**  September 2020 (V3) |
| **Statutory documents linked to policy:** | **Previous review date:**  April 2013 (V1)  September 2017 (V2) |
| **Other Policies linked to this policy:**  Medicines Policy | **Next Review Date:**  December 2023 (V4) |
| **Governor Committee Responsible** | People |

WNA Vision: All children will achieve their full potential, with holistic support, whilst enjoying and driving their own learning, gaining self-respect, self-esteem and self- belief. Our classroom extends to rich, exciting environments within the forest, the beach, the city and the community as a whole.

WNA:

* Recognises that asthma is a widespread, serious but controllable condition and the school welcomes all pupils with asthma
* Ensures 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
* Recognises that pupils with asthma need immediate access to reliever inhalers at all times
* Keeps a record of all pupils with asthma and the medicines they take
* Endeavours that the whole school environment, including the physical, social, sporting and educational environment, is favourable to pupils with asthma
* Ensures 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

**Asthma medicines**

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

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 office. All inhalers must be labelled with the child’s name by the parent/carer.

If a parent/carer 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/carer and request that the inhaler is brought into school without delay.
* If the parent/carer fails to supply the inhaler as requested, write to the parent using the example letter. 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.

All school staff will facilitate pupils to take their medicines when they need to.

**For information on how to clean spacers please go to www.asthma4children**

**Record keeping**

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 given an asthma information form to complete and return to school. 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.

**Exercise and activity - PE and games**

All children are encouraged to participate fully in all aspects of school life including PE. Children are encouraged/reminded to use their inhalers before 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 down. Each pupil’s inhaler will be labelled and kept in a box at the site of the lesson.

**School Environment and Outside**

WNA endeavours to ensure that the learning 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.

**Asthma Attacks –WNA’s Procedure**

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

* Encourage the pupil to use their inhaler
* Will give schools own Blue inhaler
* Summon a first aider who will bring the pupil’s Asthma Information Form and will ensure that the inhaler is used according to the dosage on the form
* If the pupil’s condition does not improve or worsens, the First Aider will follow the ‘Emergency asthma treatment’ procedures
* The First Aider will call for an ambulance if there is no improvement in the pupil’s condition
* If there is any doubt about a pupil’s condition an ambulance will be called

**Access and Review of Policy**

The Asthma Policy will be accessible to all staff and the community through the school’s website. Hard copies can be obtained from the school office. This policy will be reviewed on a three yearly cycle.

Signed ………………………….. (Chair of Governors) Signed ……………………..... (Headteacher)

Dear Parent/Carer

**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 NAME …………………………………………………………………………………………………………………………………

Class ………………………………………………………………………………………………………………………………………………….

1. Does your child need an inhaler in school? Yes/No

2. Please provide information on your child’s current treatment. (Include the name, type of inhaler, the dose and how many puffs? Do they have a volumiser?

|  |  |
| --- | --- |
| Name of medication |  |
| Type of inhaler |  |
| Dose |  |
| Frequency |  |
| Volumiser |  |

3. What triggers your child’s asthma?

…………………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………

It is advised to have a spare inhaler in school. Spare inhalers may be required in the event that the first inhaler runs out is lost or forgotten. Inhalers must be clearly labelled with your child’s name and must be replaced before they reach their expiry date.

I agree to ensure that my child has in-date inhalers and a volumiser (if prescribed) in school.

Circle the appropriate statements

* My child carries their own inhaler.
* My child requires a volumiser and I have provided this to the school office
* My child does not require a volumiser
* I need to obtain an inhaler/volumiser for school use and will supply this/these as soon as possible

4. Does your child need a blue inhaler before doing exercise/PE? If so, what dosage?

………………………………………………………………………………………………………………………………………………………

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

* Give **6 puffs of the blue inhaler via a volumiser**
* Reassess after 5 minutes
* If the child still feels wheezy or appears to be breathless they should have a further **4 puffs of the blue inhaler**

Reassess after 5 minutes

* **If their symptoms are not relieved with 10 puffs of blue inhaler then this should be viewed as a serious attack:**
* **CALL AN AMBULANCE and CALL PARENT**
* **While waiting for an ambulance continue to give 10 puffs of the reliever inhaler every few minutes**

Yes/No

**I agree to ensure that my child has in-date inhalers and a volumiser (if prescribed) in school.**

Signed: …………………………………………………………. Date…………………………………

Name: ………………………………………………………………………………………………………………………………………………….

*I am the person with parental responsibility*

Please remember to inform the school if there are any changes in your child’s treatment or condition.

Thank you

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| **Parental Update** (only to be completed if your child no longer has asthma) | |
| My child ……………………………………………….. No longer has asthma and therefore no longer requires an inhaler in school or on school visits. | |
| Signed | Date |
|  |  |

For office use:

NAME OF CHILD:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Provided by parent (Yes/No) | Location (delete as appropriate) | Expiry date | Date of phone call requesting inhaler/spacer | Date of letter (attach copy) |
| 1st inhaler |  | With pupil/In classroom |  |  |  |
| 2nd inhaler  Advised |  | In office/first aid room |  |  |  |
| Spacer (if required) |  |  |  |  |  |
| Emergency Inhaler | School | First aid kit in the office |  |  |  |
| Record any further follow up with the parent/carer, permission signed. | | | | | |

**Emergency asthma treatment**

**Asthma attacks & wheeziness**

Signs of worsening asthma:

* Not responding to reliever medication
* Breathing faster than usual
* Difficulty speaking in sentences
* Difficulty walking/lethargy
* Pale or blue tinge to lips/around the mouth
* Appears distressed or exhausted
* Give **6 puffs of the blue inhaler via a spacer**
* Reassess after 5 minutes
* If the child still feels wheezy or appears to be breathless they should have a further **4 puffs of the blue inhaler**

* Reassess after 5 minutes
* **If their symptoms are not relieved with 10 puffs of blue inhaler then this should be viewed as a serious attack:**
* **CALL AN AMBULANCE and CALL PARENT**
* **While waiting for an ambulance continue to give 10 puffs of the reliever inhaler every few minutes**

In case of emergency I give permission for my child to be given 6 puffs of blue salbutamol inhaler (Ventolin) which is kept in the school first aid kit.

This permission is given with the understanding that their own (Named) inhaler will be given normally and in the first instance.

**I agree that my child be given the emergency inhaler provided by school.**

Signed: …………………………………………………………. Date…………………………………

Name: …………………………………………………………………………

*I am the person with parental responsibility*

**Headteacher: Susan Percy, BEd, MA, NPQH**

**Benwell Nature Park**

**Atkinson Road**

**Newcastle upon Tyne**

**NE4 8XT**

**Company Number7647538**

**0191 273 9477**

[date]

Dear [Name of parent]

Following today’s phone call regarding [Name of pupil]’s asthma inhaler, I am very concerned that an inhaler has not been provided. You have stated on [name of pupil]’s Asthma Information Form that [name of pupil] requires an inhaler in school and you have agreed to provide an inhaler [and spacer]. Please ensure that:

* an inhaler
* a spacer are provided without delay.

If [name of pupil] no longer requires an inhaler, please request his/her Asthma Information form from the school office and complete the parental update section.

Please be aware that in the absence of an inhaler, should [name of pupil] suffer an attack, staff will not be able to follow the usual Asthma Emergency inhaler procedures. They will be reliant on calling 999 and awaiting the Emergency Services.

Yours sincerely