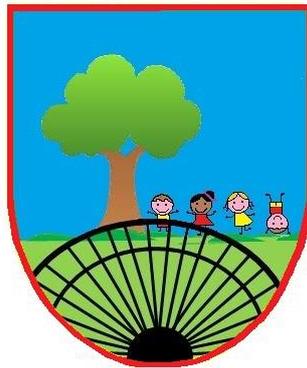


Shilbottle Primary

Shilbottle Primary

Fun, Respect & Friendship



Asthma Policy

Staff and Pupils

At Shilbottle Primary we value and respect everyone in our community and work as a team

‘Fun, Respect & Friendship – Every Child Matters to Us’

Date approved: 22 – 02 – 2018

Review Period: annually

Date to be reviewed: spring 2019

Asthma Policy for Pupils

It's a big moment for any parent: leaving your child at school for the first time and when your child has asthma, or 'suspected asthma', it can be even harder to let go and trust someone else to look after them.

Statement of Intent

About one in seven children have asthma and numbers are increasing. We want to make sure that having asthma does not mean children losing out when they are at school. Most children with asthma can have a full and active life.

This policy will help pupils with the management of their asthma while they are at school. This policy supplements the 'Administration of medication in school' and 'Health and Safety' policies.

Asthma register

- When a child joins the school part of their admission pack is a form to alert the school to asthma needs. The return of this completed form will ensure that they are placed on the Shilbottle Primary School Asthma Register (see appendix 1). The Asthma Link person will collate the register and also contact the parents or named responsible carer, to obtain the inhalers that will be held by the school.

Indemnity

- Staff who are 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 off site activities, or residential trips.
- Inhalers should be taken outside along with the register for fire drills.

Staff Awareness and action in asthma emergencies

- All staff need to be able to manage attacks. Staff will do what a 'reasonable parent' would do in the circumstances prevailing at the time.
- For mild attacks children should take their usual reliever inhaler, as per instructions.
- For severe attacks a Metered Dose Inhaler should be used. Encourage relaxation. An asthma box is kept in each classroom for the children to access.
- If the child does not
 - feel better in 5 – 10 minutes,
 - is distressed or exhausted,
 - is unable to talk in sentences,
 - has blue lips
 - or you have any doubts

THEN THE ACTION REQUIRED IS...

- One adult should stay with pupil and use reliever inhaler via spacer while another adult dials 999 for ambulance and states that the child is having a severe asthma attack requiring immediate attention.
- Continue to give relief inhaler while help arrives as per instructions on inhaler.
- Inform parents of the situation and actions taken.
- The incident should then be recorded in the Asthma register in the main office by the person who dealt with the attack, and the entry should be signed and dated by them.

Forgotten or Lost Inhalers

- If a child's condition does not indicate the need to dial 999 i.e. not a severe attack, contact parents to bring in inhaler or collect child.
- If the child is experiencing a severe attack call 999 without delay. .

Training

- Head teachers are responsible for assessing and arranging for training needs to be met.
- Posters which contain emergency information will be displayed at key points throughout the school.

Home/School Liaison

- Parents are asked to complete and update asthma records on admission, and to update them annually. They are also required to update them more frequently if the condition or medication changes.
- Absence of parental consent should not stop staff from acting appropriately in emergencies.
- Parents will be informed if an inhaler is used during the day by use of a slip (see appendix 1), and the use of an inhaler will also be recorded in school, in the Asthma register.

Minimising exposure to triggers

Where possible...

- We will avoid feathery or furry school pets.
- We will avoid pollen producing plants.
- There is a complete ban on smoking in or on the premises.

Asthma link staff member – Yvonne Hood.

Policy due for review Spring 2019

APPENDIX 1

Asthma Record (Care Plan)

Surname

First Name

Date of Birth

My child's details and contact numbers:

Parent name[s]			
Mobile		Home phone	
Work phone			
Doctor [GP] name		Doctor [GP] phone	
Asthma Nurse			
Known triggers			
Any other medical problems?			

My Child's Medication

Reliever medication (usually blue)

Medication name (e.g. SALBUTAMOL)	Device (e.g. diskhaler)	Dose (e.g. 1 blister)	When taken (e.g. when wheezy, before exercise)

Other Medication

Most preventers can be taken outside of school hours – check with your GP or asthma nurse

Medication name	How taken/device	Dose	When taken

Emergency Treatment

In the event of a severe asthma I am happy for my child to receive up to 10-20 puffs of their reliever (usually Salbutamol) inhaler via a spacer until they get further medical help.

Signed: (Parent) Date

Key points for parents to remember:

This record is for your school. Remember to update it if treatment is changed. Remember to check you have enough inhaler doses and that the inhaler is in date and labeled by the pharmacist with your child's name and dosage details.

The section below is to be completed by school staff

Has this child got a healthcare plan for any other condition?

Yes (discuss with school staff)

No

Asthma record checked by asthma link person

(Name)

Any concerns to be discussed with school nurse:

Record of discussion:

Signature:

Date:

It is recommended that staff complete the following online module:

<https://www.supportingchildrenshealth.org/asthma-module/>