



---

# BISHOP CORNISH SCHOOL

---



## ASTHMA POLICY

### PHILOSOPHY

- 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.
- As a school our belief is that every child deserves to succeed regardless of his or her ability.

### *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. All staff who come into contact with children with asthma are provided with training on asthma regularly, from the school nurse who has had asthma training.

### **Medication**

Immediate access to reliever is vital. Children are encouraged to carry their reliever inhaler as soon as the parents, doctor or nurse and class teacher agree they are mature enough. The reliever inhalers of younger children are kept in the classroom.

All inhalers must be labelled with the child's name by the parent. School staff are not required to administer medication to children except in an emergency however many of our staff are happy to do this. School staff who agree to do this are insured by the local education authority when acting in accordance with this policy. **All school staff will let children take their own 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 any medical needs. All parents of children with asthma are given a National Asthma Campaign school card to give to their child's GP or asthma nurse to complete and return to the school. From this information the school keeps its asthma register which is available for all school staff on the whole school tracking system and medical concerns form. If medication changes in between times, parents are asked to inform the school.

### **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 by the parent and kept in an appropriate place in school (as above). 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. 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 Reception area if particular fumes trigger their asthma.

### **Making the School Asthma Friendly**

The school tries to ensure 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](http://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:

- 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**

- Contact Head Teacher, Deputy Head, First Aider
- Dial 999
- Contact parents

**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**

Agreed by staff and adopted by Governors.

Reviewed November 2014

Next review November 2016