ASTHMA POLICY
JUNIORS

This Policy has been written with advice from the Department for Education and Employment, Asthma UK, the School Doctor and the School Nurse.

From 1st October 2014 the Human Medicines (Amendment) (No 2) Regulations 2014 allow schools to keep a salbutamol inhaler for use in emergencies.

Asthma is a long term medical condition which affects the airways. Triggers can irritate the lining of the airways causing them to become inflamed and the muscles around the airways to tighten. This leads to difficulty in breathing.

QEH recognises that Asthma is an important medical condition affecting many pupils and staff within the school but it can be managed successfully with the co-operation of the parents/guardians, the teaching staff and the School Nurse. Children and young people can usually control their asthma by taking the appropriate medication (using the correct technique) and avoiding or managing known triggers.

The School encourages students with asthma to participate in all aspects of school life.

The School recognises the possible triggers and where possible reduces or manages the risks.

Known triggers are:

- **Tobacco Smoke** - A no smoking policy is adopted within the school.
- **Colds and Flu**
- **Chalk Dust** - White boards to be used within the school.
- **House Dust mites -** rooms are to be regularly wet dusted, cleaned and vacuumed and soft furnishing and toys kept to a minimum.
- **Mould** - Rooms should be well aired and damp and mould reported to maintenance to be dealt with quickly. Autumn leaves should be cleared regularly.
- **Pollen and grass cuttings** - No pollinating plants should be kept in the classroom. Playing fields and grass areas should be mown out of school hours. During High Pollen days - children with pollen allergies should be allowed to remain indoors.
- **Stress and emotion** - Support (educational and emotional) is offered to all students.
- **Furry animals** - No pets to be kept in school.

- **Scented Deodorants and perfumes -** Staff and pupils to be encouraged not to wear strong perfumes. No air fresheners or room deodorisers to be used and unscented /no aerosol products to be encouraged. Changing rooms to be well ventilated.
- **Latex gloves -** The school is to use latex free gloves.
- **Dust from flour and grain** - Kitchens are well ventilated.
- **Chemicals and fumes** - where possible avoid chemicals and fumes in science and art that may trigger pupils' asthma. Store such items in a fumes cupboard.
- **Cleaning and gardening products** - where possible cleaning sprays, aerosols and lawn weed/insect sprays not be used. If required use out of school hours. Ensure rooms are well ventilated.
- **School maintenance or woodwork chemicals** - avoid isocynate chemicals (spray paint, foam moulding, adhesives, foundry core and surface coatings). Colophony chemicals (soldering fumes, glues and floor cleaners).
- **Wood dust** - masks to be used by asthma sufferers during carpentry, joinery and D/T lessons and extractors fans. Avoid working with hard woods.
- **Weather and air quality** - avoid leaving windows open during thunderstorms as this can increase the pollen in the air. Give pupils who suffer from asthma the option of staying indoors during high pollen days, very hot or cold days.

All staff should be aware of who suffers from asthma. An updated list is displayed on prominent notice boards within the staff room, and sports fields. All staff should ensure they are aware of any pupil who has asthma whilst under their care (sporting fixtures/school trips). All staff have been given advice on the signs and symptoms of asthma, how to deal with an asthma attack and how and when to contact the school nurse.

RECORD KEEPING

A list of all known asthmatics will be held in the Health Centre, Failand, School Office and online via **School base and Staff Shared Documents**. Each year Parents/guardians will be requested to ensure they have an **annual Asthma review** and update their child's medical record via schoolbase. An **allergy action plan** will be provided by a medical professional with detailed instructions on how to manage asthma for each individual pupil with an asthma diagnosis.

All parents are required to complete their child's individual Care Plan in conjunction with a medical professional, for example using the Asthma UK template and provide this information to the nurse team at school.

GAMES

Although exercise can be an asthma trigger, taking part in sport is an essential part of school life and promotes healthy living, therefore it is a trigger that should be managed rather than avoided. QEH encourages pupil's with asthma to participate fully in all sports and activity based lessons.

Sport coaches, **class teachers and support staff** should make sure they are aware of pupils who have asthma and their potential triggers. **A list of all asthmatics will be kept in every Junior school First Aid bag, school office and first aid room at Failand**.

In the Junior School it is recognised that younger pupils may not always remember to bring their inhalers. Staff are to **remind the pupils before leaving school** for games or a fixture about bringing their inhalers. Staff should also ensure the pupils bring their inhalers with them **pitchside** or offer to be responsible for them whilst playing if a pupil prefers for safe -keeping. This should be handed back to them at the end of games/fixture.

MEDICATION AND TREATMENT

Every child and young person with asthma should have a reliever inhaler - these are essential in treating asthma attacks. Reliever inhalers are usually blue but come in various shapes/sizes.
A spare inhaler and spacer are in every class first aid kit, PE Staff first Aid kit and 'Away' First Aid Kit bags. A first Aid Kit Bag should always be brought pitch side for quick access. First Aid kits will be checked every term by nursing staff to ensure inhalers are in date.

Reliever medication can be taken immediately when asthma symptoms start

- Immediate access to reliever inhaler is vital.
- Asthmatics at QEH are expected to carry their own inhalers with them and a spare one, provided by their parents, should be kept in the Health Centre. It is recommended that one should also be kept in pupil's sports bags.

When a pupil has an asthma attack or difficulty breathing the School Nurse is contacted and when possible, he is escorted to the Health Centre for treatment.

The school will hold an Emergency Salbutamol inhaler. These should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.
All parents should consent via the Medical Information and Consent Form for administration of Emergency Reliever medication (e.g. Salbutamol inhaler) An emergency inhaler will be held in the Health Centre, Failand, School Office, and Gym An emergency inhaler will also be provide with a first aid kit for appropriate school trips.

The School emergency kit- located in the Health Centre

An emergency asthma inhaler kit should include:

- A salbutamol metered dose inhaler
- At least two single use plastic spacers compatible with the inhaler
- Instructions on how to use the inhaler and spacer/plastic chamber
- Instruction on cleaning and storing the inhaler
- Manufacturer's instructions
- A list of children permitted to use the emergency inhaler.

EMERGENCY PROCEDURES

Common signs of an asthma attack:

- Coughing
- Shortness of breath
- Wheezing
- Feeling tight in the chest
- Being unusually quiet
- Difficulty speaking in full sentences
- Younger children may express feeling tight in the chest as tummy ache.
- Pale skin, possible blue tinge around the lips.

AN ASTHMA ATTACK - WHAT TO DO:

- Keep calm
- If possible escort the pupil to the Health Centre. Otherwise let the pupil sit up and slightly forward. Do not let them lie down. Never leave the pupil alone.
- Make sure the pupil takes two puffs of their reliever inhaler (usually blue) immediately. If possible use a spacer. If the child's own inhaler is not available, use the emergency inhaler.
- Loosen tight clothing.
- Reassure the pupil.
- If there is no immediate improvement, continue to make sure the pupil takes two puffs of reliever inhaler every two minutes up to a maximum of 10 puffs

After 5-10 minutes

- If symptoms cease, the pupil can return to what they were doing.
- If the symptoms improve but not completely disappeared, escort the pupil to the Health Centre

Call 999/Ambulance if

- The pupil's symptoms do not improve in 5-10 minutes
- The pupil is too breathless or exhausted to talk
- The pupil's lips are blue
- You are in any doubt or worried
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way.

Inform the Parents and the Health Centre. It is not necessary to accompany the pupil to hospital if a parent can arrive promptly. However, if there may be a delay a member of staff should attend the hospital to "handover" to a parent when she/he arrives.

REVIEW:

Date policy updated	16/10/2026
Date policy to be reviewed by	01/10/2027 or earlier if required
Policy Owner	School Nurse