Edwalton Primary School



Policy Reviewed: September 2025

Date of next review: September 2026

The school

- Welcomes all children/young people with asthma.
- Recognises asthma as a serious but controllable condition.
- Aims to ensure that all children/young people with asthma participate fully in all aspects of school life, including PE.
- Recognises that immediate access to reliever (blue) inhalers is vital.
- Will keep records of children/young people with asthma and their medication requirements. There will be a full list of asthmatic children displayed in the staffroom.
- Will ensure that all relevant members of staff know what to do in the event of a child/young person having an asthma attack.
- Does not assume responsibility for the routine treatment of asthma (preventative therapy) which remains the prerogative of the parent/carer in conjunction with their GP and/or specialist.
- Will work in partnership with all school staff, parents/carers, governors, doctors and nurses to ensure that the asthma policy is implemented.

Parent/Carer

- The parent/carer should inform the school if their child/young person has asthma and their medication requirements.
- The parent/carer assumes responsibility for the routine treatment of asthma (preventative therapy) in conjunction with their GP and/or specialist.

Access to inhalers

- 1. Inhalers for younger children should be readily available and labelled with the child's name. Children/young people should take more responsibility regarding their inhaler as they get older. Decisions regarding this issue should be made by parent, child and school jointly.
- 2. It is important that all children/young people with asthma keep a labelled reliever (blue) inhaler in school.

- 3. All staff need to know where inhalers are kept (in each child's classroom, teacher's desk). School now keeps 2 spare inhalers which are kept centrally (staffroom) for use in emergencies. Therefore, an inhaler is available to be taken on day trips out of school, the other inhaler to remain onsite for emergency use.
- 4. It is important that staff check all children/young people with asthma have their reliever blue inhaler with them when they go outside for PE or other activities and when they leave the school site for school activities.

Staff awareness

- 1. Advice regarding the management of asthma in schools may be given by the school nurse when requested by the school.
- 2. Each class teacher should be aware of the children/young people with asthma in their class.

Treatment of Asthma in School

Reliever (blue) inhaler

All children/young people with asthma should have a blue inhaler in school. Its use should give relief in about 5 minutes by opening up the airways.

Preventative treatment (brown inhaler) is for use at home only and should not be used during an asthma attack; therefore they are not needed in school.

What to do in the event of asthma attack

Signs and symptoms

- Coughing.
- Shortness of breath.
- Wheezing.
- Tightness in the chest.
- Being unusually quiet.
- Difficulty in speaking in full sentences.

Treatment and action

- Keep calm and do not panic.
- Encourage the child/young person to sit up and slightly forwards.
- Give the child/young person two puffs of their reliever (blue) inhaler preferably through a spacer.
- · Loosen tight clothing.
- · Reassure them.

AFTER A MINOR ASTHMA ATTACK

- As soon as the child/young person feels better they can resume normal activities.
- The parents/carers must always be told if their child/young person has had an asthma attack.

IF THERE IS NO IMPROVEMENT after 5 minutes or so

- Give at least 5 (max 10) puffs of reliever slowly through spacer. This should last 4 hours.
- Call NHS 111 for advice. You may be asked to repeat dose.

CALL 999 IMMEDIATELY IF:

- Their symptoms do not improve after 5-10 minutes.
- They are too breathless to talk.
- Their lips are blue.
- The child/young person collapses.
- You have any doubt about the child/young person's condition.

Whilst awaiting the ambulance, continue to give reliever inhaler as instructed by operator.

Health Care Plans

For some pupils who have frequent or severe asthma attacks, the school first aid lead will, in discussion with parents and medical professionals, implement a child specific health care plan- this will outline the individual child's triggers and personalised treatment plan. These will be updated regularly, at a minimum, yearly, but may be amended more frequently, for example, after a severe asthma attack. School will ensure that regular communication takes place between themselves and individual parents and carers and health professionals to enable us to monitor and adapt to each child's needs.