

# Federation of Fairfield Infant and Colneis Junior Schools

## Asthma Policy

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# Federation of Fairfield Infants and Colneis Junior School

## Asthma Policy

### Preface

The Federation Vision and Values can be found here  
<https://www.fairfieldandcolneis.co.uk/our-federation/our-ethos-and-values/>

This policy and its associated procedures are based on these key principles and values.

### Policy Statement:

- This school is an inclusive community that aims to support and welcome students with medical conditions.
  - This school aims to provide all students with all medical conditions the same opportunities as others at school.
  - This policy is to be read in conjunction with the Federation of Fairfield Infant and Colneis Junior School Supporting Children with Medical Conditions Policy which can be found here <https://www.fairfieldandcolneis.co.uk/key-information/policies/>

### The Federation of Fairfield Infant and Colneis Junior School ensures that:

- staff understand their duty of care to children and young people in the event of an emergency.
- staff feel confident in knowing what to do in an emergency.
- staff understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- staff understand the importance of medication being taken as prescribed.
  - staff understand the common medical conditions that affect children at this school
- staff receive training on the impact medical conditions can have on students.

## What is asthma?

Asthma is a long-term medical condition that affects the airways – the small tubes that carry air in and out of the lungs. Children and young people with asthma have airways that are almost always red and sensitive (inflamed). Asthma triggers then irritate these airways, causing them to react. When a child or young person with asthma comes into contact with an asthma trigger, the mucus around the walls of the airways tightens so that the airways become narrower. The lining of the airways becomes inflamed and starts to swell. Often sticky mucus or phlegm is produced. These reactions lead to the symptoms of asthma.

### Location of Medication:

All emergency responsive medication for asthma can be found in a Red First Aid box in each classroom, alongside copies of the child's completed IHCP or School 'My Asthma Plan' (appendix B). My Asthma Plans completed with the child's GP or asthma nurse are also accepted.

### Commitment:

The Federation of Fairfield Infant and Colneis Junior School will:

- Identify students with asthma during the admission process and by the annual check of completed data sheets.
- Provide parents/carers with a My Asthma Plan template which they are to complete and return promptly to school if the child does not already have a completed asthma plan.
- Make available to all staff a copy of the Asthma policy.
- Ensure that all reasonable and practical steps are taken to safeguard the health and safety of students when they are at school or engaged in authorised activities elsewhere.
- Raise awareness of asthma amongst those involved with Federation through training opportunities.
- Provide an environment where students with asthma can participate in all activities to their full potential.
- Provide a clear set of guidelines and expectations to be followed with regard to the management of asthma.
- Store spare inhalers for individual students in each class room Red First Aid box, along with copies of their completed IHCP or My Asthma Care Plan / Card.
- Keep a register of all asthmatic students which will include details of the treatment that each student uses and in particular any inhalers which need to be used at school.

In addition, spare inhalers and spacers will be provided by the school to keep in line with government procedures in case of emergencies. This 'emergency asthma inhaler kit' will contain:

- A salbutamol metered dose inhaler.

- At least two single – use spacers compatible with the inhaler.
- Instructions on using the inhaler and spacer/ plastic chamber.
- Instructions on cleaning and storing the inhaler.
- Manufacturer’s information.
- A checklist of inhalers, identified by their batch number and expiry date, with half termly checks recorded.
- A note of the arrangements for replacing the inhaler and spacers.
- A list of children permitted to use the emergency inhaler as written parental consent has been obtained.
- A record of administration.

To avoid possible risk of cross infection, the disposable spacer is not to be re-used and, if plastic, must be sent home with the child for future personal use.

### **Staff Responsibilities:**

- The Lead for Medical Needs in School, will liaise with key staff in each year group to ensure that inhalers are checked half termly.
- Replacement emergency inhalers are obtained before the expiry date.
- Replacement emergency spacers are re-ordered and replaced after use.
- Empty out of date inhalers are returned to parents/carers
- It is a whole staff responsibility to provide support during an asthma attack (training is completed by all staff and First Aiders are given in-depth training in addition to this).

### **Staff will:**

- Ensure they are aware of students in their care with asthma.
- Administer emergency asthma medication, if required, according to the students’ completed IHCP or asthma care plan.
- Promptly communicate to the Class Teacher and parents/carers, any concerns about the student’s asthma limiting his / her ability to participate fully in all activities.
- Identify and, where possible, minimise asthma triggers. Many things can trigger an asthma attack. This may be because of an allergy to e.g. pollen or animal hair. Care will also be taken if animals are to be brought into school.
- Encourage open communication with parents/carers regarding the status and impact of a student’s asthma.
- Liaise with parents/carers, the school nurse, SLT and SENCo if a child is falling behind with work because of asthma.
- Ensure that if the emergency inhaler has been used it is cleaned correctly and the plastic spacer is sent home with the child
- Ensure the inhaler kept at school is returned home at the end of the academic year
- Staff will retain the red First Aid boxes in class and forward any paperwork to the school office for archiving at the end of the academic year.

**PE lessons, staff will have a responsibility to:**

- Understand asthma and the impact it can have on students. Students with asthma should not be forced to take part in an activity if they feel unwell. They should also not be excluded from activities that they wish to take part in if their asthma is well controlled.
- Ensure students have their reliever inhaler with them during activity or exercise and are permitted to take it when needed. Students with asthma may need to take a dose of their reliever inhaler before exercise.
- If a student has asthma symptoms while exercising, allow them to stop, take their reliever inhaler and as soon as they feel better allow them to return to their activity. Most students may need at least five minutes to maintain their breathing again.
- Remind students with asthma whose symptoms are triggered by exercise to use their reliever inhaler immediately before warming up.
- Ensure students with asthma always warm up and down thoroughly.
- Communicate concerns to the child's parent/carer if a student seems over-reliant on their inhaler as this may mean that the student's asthma is poorly controlled.

**School Nurse has a responsibility to:**

- Help Federation of Fairfield Infant and Colneis Junior School to update and review this asthma policy.
- Assist with the completion of asthma care plans / cards when needed.
- Provide training or organise training on an annual basis.

**Individual doctor / asthma nurse of a student with asthma will have a responsibility to:**

- Complete school My Asthma Plans provided by parents/carers.
- Ensure the young person knows how to use their inhaler (and spacer) effectively.
- Provide the school with information and advice if a young person in their care has severe asthma symptoms (consent must be given by the young person and/ or parents/ carers for this support to take place).

**Parents/Carers will:**

- Inform The Federation of Fairfield Infant and Colnies Junior School, either upon admission or on initial diagnosis, that their child has a diagnosis of asthma.
- Provide all relevant information regarding the child's asthma via the IHCP/ My Asthma Plan.
- Notify the school, in writing, of any changes to the IHCP/ My Asthma Plan during the year.
- Ensure that their child has an adequate supply of appropriate medication (reliever) in school at all times. This will be returned at the end of the academic year, and parents will ensure that the medication in school paperwork is signed.
- Provide the school with a spare reliever inhaler (and spacer where relevant) labelled with their child's name on it.
- Ensure their child has regular asthma reviews with their doctor or asthma nurse (every six to 12 months).

**Students will:**

- Respect other students with and without asthma equally.
- Feel empowered to speak to staff if they feel they need to use their inhaler.

**Considerations:**

## Nebulisers

Any student with severe asthma may use an electric compressor called a nebuliser to deliver their asthma drugs. The school nurse or the student's GP should liaise with the school to give correct management advice for these children.

## APPENDIX A – SCHOOL ASTHMA CARE PLAN LETTER

School Asthma Care Plan

Dear Parent/Carer,

This letter has been sent to you as the parent / carer of an asthmatic child. The Federation of Fairfield Infant and Colneis Junior School takes its responsibilities to pupils with asthma very seriously and we have an Asthma Policy in place to enable all staff members to help your child.

I would be grateful if you would fill in the requested details on the attached My Asthma Plan. If you are in any doubt about the treatment details then please take the sheet to your child's doctor or nurse who will explain your child's asthma treatment to you. The completed record will provide details of your child's treatment and what steps need to be taken if he/she has an asthma attack at school.

It is very important that the record is updated if the treatment is changed at a future date. Every child who has been diagnosed with asthma should provide the school with a spare inhaler. Please send a spare inhaler, in its original packaging that is clearly labelled with your child's name, in with the completed My Asthma Plan.

Please also complete the attached forms regarding your permission regarding the use of the school's emergency inhaler in the case of extreme emergency for your child as well as 'Parental Agreement to administer medicine.' Without these forms staff will not be able to administer medication.

I look forward to receiving this important record and thank you in advance for your co-operation in this important matter.

Yours sincerely

### PERMISSION TO USE SCHOOL EMERGENCY INHALER

Name of child:..... Class: .....

I **do/not** (please delete as relevant) give permission for the above child to be administered the school emergency salbutamol inhaler

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

# Parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

## Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

**NB: Medicines must be in the original container as dispensed by the pharmacy**

## Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_



**APPENDIX B (i) GENERIC LETTER ABOUT ASTHMA TO ISSUE TO ALL PARENTS/ CARERS Children with Asthma/All children at the start of the academic year**

Dear Parent/Carer

The Federation of Fairfield Infant and Colnies Junior School takes its responsibilities to support students with medical conditions very seriously. As part of our responsibility we are currently working towards becoming an “Asthma Friendly School” and as such, part of this means we have an Asthma Policy in place to enable all staff members to help children with asthma.

For all children diagnosed with asthma we require the following steps to be taken in order to help us care for your child:

- If your child has been diagnosed with asthma and you haven't already informed the Federation, then please can you do so immediately.
- Please ensure that your child always has access to his/her inhaler whilst in school. • A spare inhaler (in its original packaging clearly labelled with your child's name and the GP surgery label) should be given to the Main Office or to the class teacher so that it can be logged and recorded within our central systems
- As a matter of urgency, you should complete and return a My Asthma Plan (attached). This is a new child friendly version of the Asthma Card
- You complete the form to state whether you give permission for the school emergency inhaler to be used for your child should they need it.

Your child's GP or Asthma Nurse can support you in completing the document, which are also available from the Main Office. It is very important that we have an up to date record of your child's medical needs and you must inform the Federation immediately if treatment is changed.

Please note that we cannot administer an emergency inhaler to a child where his/her diagnosis is not on our records and where we have not received prior consent from the parent/carer. The full Asthma Policy can be found on our website, along with further information on our procedures for managing medication and supporting students with medical conditions.

If you wish to discuss this or have any concerns please do not hesitate to contact the Main Office.

Yours faithfully

Headteacher

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**PERMISSION TO USE SCHOOL EMERGENCY INHALER**

Name of child:..... Class: .....

I **do/not** (please delete as relevant) give permission for the above child to be administered the school emergency salbutamol inhaler

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

## **APPENDIX B (ii) – SCHOOL ASTHMA FOLLOW UP LIASION No My Asthma Plan**

Your child is identified on our system as having Asthma. Please complete and return the attached My Asthma Plan by XXXXXXXX so we can keep our records accurate. If your child no longer suffers from Asthma, we require you to inform us in writing either via email or a letter.

Many thanks for your co-operation in this matter.

### **No Inhaler**

Your child is identified on our system as having Asthma. We do not currently have an inhaler in school for your child. Please send an inhaler to the Main Office (this must be in the box with the prescription label on it) by XXXXXX.

Many thanks for your co-operation in this matter.

### **No My Asthma Plan and no Spare Inhaler**

Your child is identified on our system as having Asthma. Please complete and return the attached My Asthma Plan by XXXXXXXX so we can keep our records accurate. We do not currently have one in school for your child. Until we receive the completed My Asthma Plan, our staff will not be able to administer the inhaler. Please send an inhaler to the Main Office (this must be in the box with the prescription label on it) by XXXXXX. If your child no longer suffers from Asthma, we require you to inform us in writing either via email or a letter

Many thanks for your co-operation in this matter.

### **Out of date Inhaler**

Your child is identified on our system as having Asthma. We have recently checked their inhaler and it is out of date/due to be out of date shortly. Please can you contact your GP and arrange for a new inhaler.

Please send an inhaler to the Main Office (this must be in the box with the prescription label on it) as soon as possible. When you hand the inhaler in please ensure you complete the “Parental agreement for setting to administer medicine” at the office. The inhaler needs to come via the office and not into school with your child.

Many thanks for your co-operation in this matter.

## APPENDIX C- ADVISE RE EMERGENCY SALBUTAMOL INHALER USE

Text messages to parents

### ADVISE SALBUTAMOL INHALER USE

As a parent/carer you will be notified via TEXT message if your child has had to use their inhaler at school outside of their plan.

You will be informed of the time and the number of puffs.

As a school, we will keep a record of this on our medical files.

The message will read: **“Your child has been administered x puffs of their inhaler at x time, we will continue to monitor them and contact you if needed.”**

### ADVISE EMERGENCY SALBUTAMOL INHALER USE

As a parent/carer you will be notified via TEXT message if your child has had to use the Emergency Inhaler at school.

You will be informed of the time and the number of puffs and the reason that they were not able to use their own inhaler.

As a school, we will keep a record of this on our medical files.

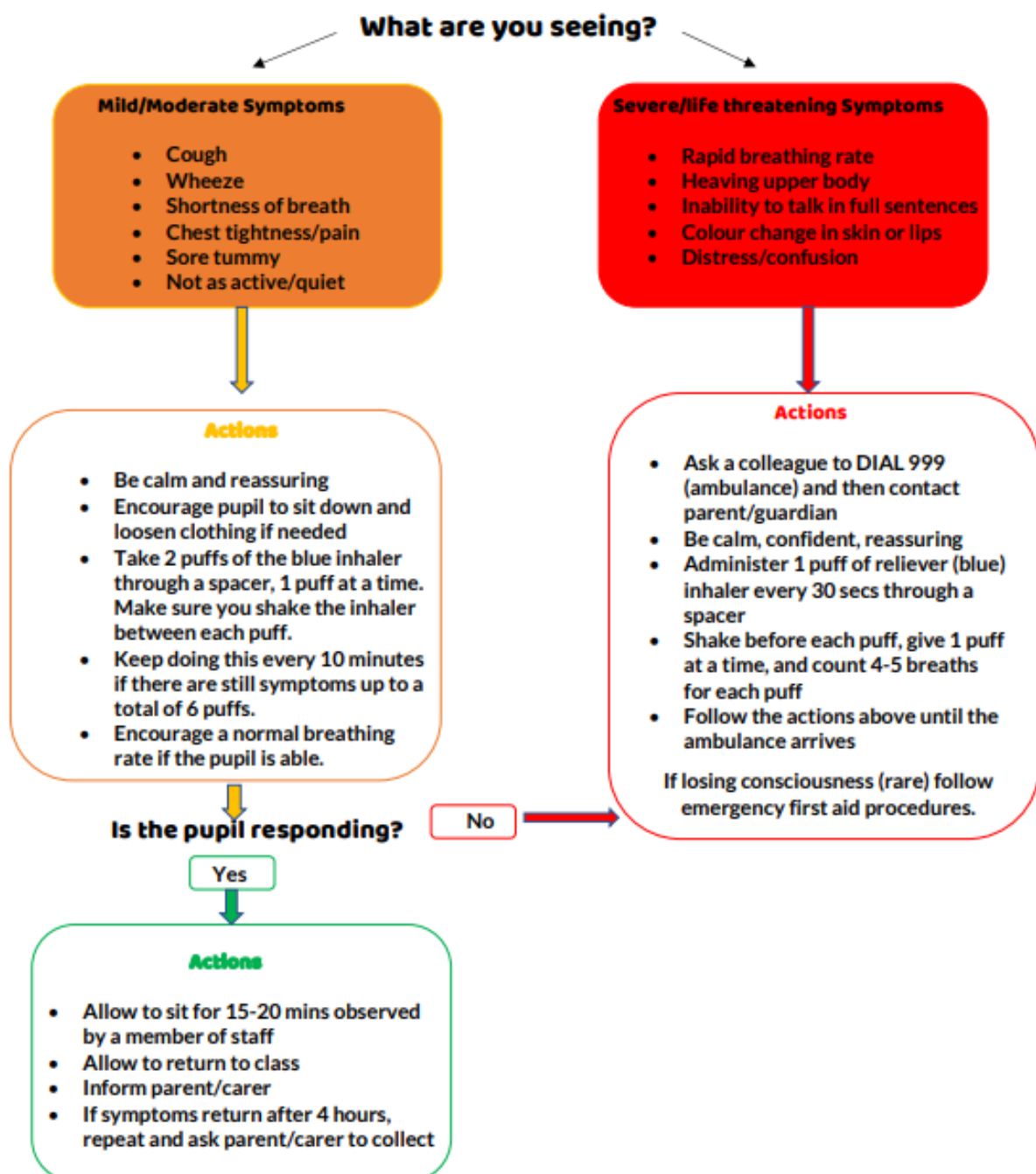
The message will read: **“Your child has been administered x puffs of the emergency inhaler at x time. They were not able to use their inhaler because x. We will continue to monitor them and contact you if needed.”**

## APPENDIX D – ASTHMA ATTACK PROCEDURES

### WHAT TO DO IF A STUDENT HAS AN ASTHMA ATTACK AT SCHOOL



#### How Do I Manage a Pupil Having an Asthma Attack?



## WHAT ARE THE TREATMENT DEVICES?

There is a large and growing array of inhalation delivery devices. The expiry dates is stamped on each device.

### 1. Metered Dose Inhaler

The pressurised aerosol (metered dose) inhaler (MDI) is the most commonly used device. It is cheap but requires very good co-ordination during the breathing in of the drug. Under the age of four and until a child can differentiate between sucking and blowing, a MDI is often used together with a spacer device (e.g. Volumatic, Nebuhaler, Fisonair). Spacer devices may also be used by older children for inhalation of topical steroids or of a "reliever" during an acute attack. Most children up until the age of ten (and many thereafter!) have difficulty acquiring the necessary technique. The Autohaler is a special MDI which overcomes co-ordination problems as the drug is released automatically upon breathing in through the mouthpiece.

### 2. Dry Powder Device

These do not require co-ordination as the drug is breathed in as a dry powder. There are various devices available: e.g. Accuhaler, Aerohaler, Cyclohaler, Diskhaler, Rotahaler, Spinhaler, Turbohaler.

### 3. Nebuliser

A nebuliser is a machine which breaks up liquid drugs into tiny droplets, forming a mist which is breathed in. It is an effective way of delivering treatment for children with severe asthma. When children who use nebulisers are admitted to school and when children at school start to use nebulisers, Head Teachers should liaise with the school doctor or school nurse with regard to management with and administration of the nebuliser. This should include how the nebuliser is used, how often it should be used and when to seek help. Electric nebulisers need to be serviced from time to time.