

## **Definition**

We understand asthma to be a condition which causes the airways in the lungs to narrow, making it difficult to breathe. Sudden narrowing produces an attack.

Asthma sufferers have almost continuously inflamed airways and are therefore particularly sensitive to a variety of triggers or irritants.

These include:

- Viral infections (especially colds)
- Allergies (e.g. grass pollen, furry or feathery animals)
- Exercise
- Cold weather, strong winds or sudden changes in temperature;
- Excitement or prolonged laughing
- Numerous fumes e.g. from glue, paint, tobacco smoke.

We are aware that psychological stress may sometimes make symptoms worse.

## **Aims**

The school:

- Welcomes all pupils with asthma
- Ensures that pupils with asthma can and do participate fully in all aspects of school life, including art lessons, PE, science, visits, outings and other out of school activities
- Recognises that pupils with asthma need immediate access to reliever inhalers at all times
- Keeps records of all pupils with asthma and medicines they take
- Ensures that the whole school environment, including the physical, social, sporting and educational environment is favourable to pupils with asthma
- Ensures that all pupils understand asthma
- Ensures that all staff who come into contact with pupils with asthma know what to do in an asthma attack
- Will work in partnership with all interested parties to ensure that the policy is planned, implemented and maintained successfully.

## **Lingham Primary School recognises that immediate access to inhalers is vital.**

### **Procedure:**

At the beginning of the school year, or when a child joins the school, parents will be asked if their child has asthma.

An asthma details form will then need to be completed and signed by the parent and passed to the illnesses and medical conditions coordinator.

The illnesses and medical conditions coordinator will ensure that the business/administrations manager is given information in order to update the records and inform SIMS.

A medication box will be assigned to the child and labelled clearly with a photograph of the child, name and date of birth, class name and details of medication and asthma type.

The asthma form will be placed in a central file under the child's class section.

If medication changes within the school year the parents are asked to inform the school.

Immediate access to inhalers is vital. Children are encouraged to carry their reliever inhaler as soon as the parent, doctor and class teacher agrees they are mature enough (probably KS2)

The reliever inhalers of young children or children who are not mature enough are kept in a designated space in each year group/class that is known to all staff in that year group and relevant children.

All school staff will let children take their own medication when they need to but all children will be supervised and a form will be completed to inform the parent and the school records that an inhaler has been used.

### **Training**

Teachers will be trained about the implications of asthma and the appropriate action with regard both to relief and prevention.

This will form part of the induction process for new teachers to the school.

Teachers and other staff with fuller training and responsibility for first aid in school will have had more in-depth training

**The aims of treatment are:**

- To relieve symptoms
- To reduce the risk of severe attacks
- To enable normal growth and development in children
- to minimise absence in school.

**The principles of management are:**

- To involve children and parents in the management of the condition
- To avoid identifiable causes of exacerbation where possible
- To use the lowest effective doses of convenient medications, minimising short and long-term side effects.

Management of asthma requires a partnership between the child and the family, health professionals and other adults caring for the child. Since asthma is a chronic disease, it is important that children understand their condition, the factors, which make it worse, and their medication.

Many teachers are concerned that an unsupervised child with an inhaler may result in the medication being taken by the peer group. **This does not pose a danger to the health of other children.**

Many teachers are concerned that using the device of another child will leave them vulnerable to legal action or criticism. Teachers are reminded **they have a duty of care to the children in school. Taking no action, or not using another device could be interpreted in a failure of that care.**

Reliever inhalers and spacer devices should always be taken to swimming lessons, sports and educational visits out of schools, and used according to need. Children with known exercise induced asthma will need to take their reliever immediately prior to exercise.

Self administration of the reliever is the usual and best practice. Any concerns about inappropriate use or abuse of the devices should be reported to the Head Teacher or the parents/guardian.

In an event of an uncertainty about a child's symptoms being due to asthma, **TREAT AS FOR ASTHMA.** This will not cause harm even if the final diagnosis turns out to be different.

## **ROLES AND RESPONSIBILITIES**

### **Class teachers have a responsibility to:**

- Read children's records for information about medical conditions and to inform other classroom staff of conditions such as asthma.
- Be vigilant over basic health and safety issues
- Assess the educational needs of the child with asthma regularly and inform the illnesses and medical conditions coordinator of any concerns
- Follow the guidelines for managing asthma relief and attacks
- Ensure the dignity of the child at all times
- Co-operate with the illnesses and medical conditions coordinator to produce information for medical professionals

### **The illnesses and medical conditions coordinator role is to:**

- Prepare a central list of children with a diagnosis of asthma
- Monitor school assessments for signs of underachievement and prepare a special needs file for those with a learning difficulty
- Ensure that all staff are aware of and that new teachers are given guidance on supporting children with asthma
- Liaise with medical services and parents with regard to changes in treatment or medication and any implications for the school
- Alert the Head teacher about issues relating to the health and safety of children with asthma

### **The Headteacher should:**

- Ensure that reporting and recording issues are covered by school systems
- Meet with parents to deal with concerns they may have
- Monitor equal opportunities issues for pupils with asthma

### **Administering Medicines:**

- All staff should be aware that there is no legal or contractual duty to administer medicine or supervise a pupil taking medicine unless they have been specifically contracted to do so.
- It is the parent's responsibility to ensure new and in date medicines come into school on the first day of the new academic year.
- Parents are asked to dispose of all out of date medicines.

- All staff members who agree to administer medicines to pupils are provided with full indemnity by the local authority.

### **Treatment:**

#### **Inhalers**

The most common forms of treatment are by Inhaler of which there are two distinct types – relief (usually blue) and preventative (usually brown). The brown inhaler is not permitted for use in school.

It should be the parent's responsibility to ensure that the inhaler is loaded or to provide a spare.

Most school-age children should be able to use their own reliever inhaler which should be clearly labelled and accessible.

### **Physical Education**

Taking part in school sports is an essential part of school life.

Teachers/Sports coaches will be made aware of which children have asthma.

Children with asthma are encouraged to participate fully in PE lessons. Teachers will remind their children to take their asthma inhaler with them when having PE lessons (to take when required).

The teachers/sports coaches will look after the inhalers during these lessons.

### **Activities off site**

Teachers will ensure that all pupils' asthma inhaler are taken with them when attending educational visits or activities that are off site.

### **Making the school asthma friendly**

The school will endeavour to ensure that all children understand asthma and does not endorse any activity that is unfavourable to children with Asthma.

### **Supporting children with asthma**

Lingham Primary school staff are aware that in extreme cases children with asthma may miss some time off school, or fall behind because of symptoms related to the child's asthma. If this does happen a meeting will be called with the parents, illnesses and medical conditions coordinator, EWO and school nurse to discuss concerns.

Appendices:

1. Asthma letter to parents
2. Asthma Details form
3. Inhaler Use form
4. Record of use
5. Asthma protocol
6. Protocol for storage of inhalers.