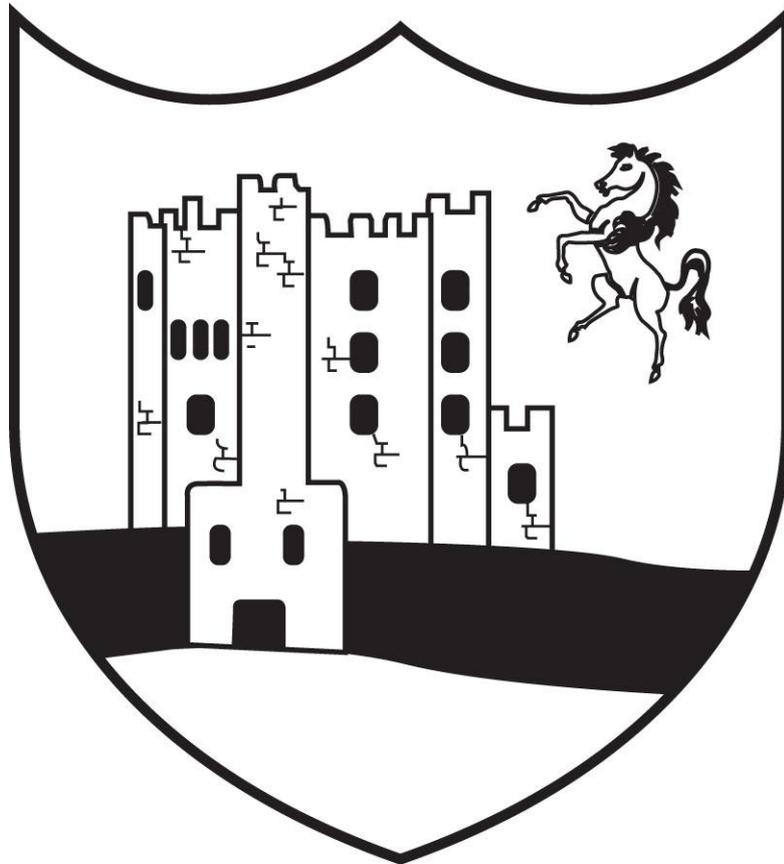


Balfour Infant School Asthma Policy



Date Written: September 2025
Next Review: September 2026

Asthma Policy Statement

Introduction

Balfour Infant School recognises that asthma is a widespread, serious but controllable condition affecting many children. The school positively welcomes all pupils with asthma. Balfour Infant School encourages pupils with asthma to achieve their potential in all aspects of school life by having a clear policy and guidance that is understood by all school staff and pupils. All the first aiders in school are trained on how to deal with asthma attacks and have experience in doing this.

Policy Guidelines

This school is an inclusive community that aims to support and welcome pupils with asthma

- Pupils with asthma are included in all school activities
- All staff feel confident in knowing what to do in an emergency
- The school asthma policy is understood and supported by the whole school
- This school is committed to providing pupils with a physical environment, which is accessible to pupils with asthma
- This school's commitment to an accessible physical environment includes out of school visits and the school ensures these visits are accessible to all pupils
- This school ensures the needs of children and young people with asthma are adequately considered to ensure they have full access to extended school activities
- Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of asthma amongst pupils and to help create a positive social environment
- Risk assessments must be carried out for any out of school visit and asthma must be considered during this process. Factors to consider include how routine and emergency medicines will be stored and administered and where help could be obtained in an emergency

Record Keeping

It is a parent/carers responsibility to inform school of their child's medical condition and needs. It is also important that the school are informed of any changes. The school will keep an accurate record of each occasion a child is given or supervised taking their inhaler. Details of the supervising staff member, child, dose, date and time are recorded. Parents will be informed if a child uses their inhaler more than 3 times a week in excess of their usual requirements e.g. If a child normally uses their inhaler pre or post exercise this would be recorded, if they also require their inhaler in addition to this 3 times or more, parents will be informed. The school has an up-to-date medical register including those with asthma.

Safe Storage

- Parents are responsible for collecting out of date medicines from school
- Each class teacher is responsible for ensuring the safe storage of medications in the classroom and for logging all doses given.

Exercise and activity – PE and games

Taking part in sports, games and activities is an essential part of school life for all pupils. All staff are aware of the children in their class who suffer from asthma. Pupils with asthma are encouraged to participate fully in all PE lessons. If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.

Parents' Responsibility

- Informing the school if their child has asthma.
- Ensure the school has a complete and up-to-date asthma plan for their child.
- Inform the school about the medicines their child requires during school hours.
- Inform the school of any medicines the child requires while taking part in visits, outings, field trips and other out-of-school activities such as school sports events.
- Inform the school of any changes to their child's condition.
- Ensure their medicines and medical devices are labelled with their full name and date of birth, in the original pharmacy packaging.
- Ensure that their child's medicines are within their expiry dates.
- Ensure their child has regular reviews (usually every 3 months) with their doctor or specialist healthcare professional.
- Ensure their child has a completed care plan from their doctor or specialist asthma nurse and they share this with school.
- 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.

All staff responsibilities

- All staff to attend asthma training yearly.
- Know what the procedures are and which pupils have asthma
- Communicate parental concerns and updates to the inclusion lead immediately.
- Staff must record all inhaler use.
- All children with asthma must have easy access to their reliever inhaler and spacer.
- All children are encouraged to carry and administer their own inhaler when their parents and health care provider determine they are able to start taking responsibility for their condition. Children who do not carry and administer their own emergency medicines, should know where their inhalers are stored.
- All staff attending off site visits should be aware of any children on the visit with asthma.
- All staff should be trained about what to do in an emergency

Emergency Inhalers

The school keeps a supply of salbutamol inhalers for use in emergencies when a pupil's own inhaler is not available. These are kept in the school's emergency asthma kits.

Emergency asthma kits contain the following:

- A salbutamol metered dose inhaler
- Two plastic, compatible spacers
- Instructions on using the inhaler and spacer
- Instructions on cleaning and storing the inhaler
- Instructions for replacing inhalers and spacers
- The manufacturer's information
- A checklist, identifying inhalers by their batch number and expiry date
- A list of pupils with parental consent and/or individual healthcare plans permitting them to use the emergency inhaler
- A record of administration showing when the inhaler has been used

The school buys its supply of salbutamol inhalers from a local pharmacy. The emergency inhaler should only be used by pupils, for whom written parental consent has been received and who have been either diagnosed with asthma or prescribed an inhaler as reliever medication. Parental consent for the use of an emergency inhaler should form part of any pupil with asthma's individual healthcare plan.

When not in use, emergency inhalers are stored in the Medical Room.

The Leader for Inclusion is responsible for overseeing the protocol for the use of the emergency inhaler, monitoring its implementation, and maintaining an asthma register. The designated staff member who oversees the supply of salbutamol inhalers is responsible for:

- Checking that inhalers and spacers are present and in working order, with a sufficient number of doses, on a monthly basis.
- Ensuring replacement inhalers are obtained when expiry dates are approaching.
- Ensuring replacement spacers are available following use.
- Ensuring that plastic inhaler housing has been cleaned, dried and returned to storage following use, and that replacements are available where necessary.

Symptoms of an asthma attack

Members of staff will look for the following symptoms of asthma attacks in pupils:

- Persistent coughing (when at rest)
- Shortness of breath (breathing fast and with effort)

- Wheezing
- Nasal flaring
- Complaints of tightness in the chest
- Being unusually quiet
- Difficulty speaking in full sentences. Younger pupils may express feeling tightness in the chest as a 'tummy ache'.

Response to an asthma attack

In the event of an asthma attack, staff will follow the procedure outlined below:

- Keep calm and encourage pupils to do the same.
- Encourage the pupil to sit up and slightly forwards – do not hug them or lie them down.
- Summon the assistance trainer first aider to care for the pupil and help administer an emergency inhaler.
- Ensure tight clothing is loosened.
- Reassure the pupil.
- Help the child to take two separate puffs of his/her inhaler or the emergency salbutamol inhaler via the spacer
- If there's no immediate improvement, continue to give two puffs every two minutes up to a maximum of 10 puffs, or until symptoms improve
- Call an ambulance if the child doesn't feel better or you're worried at any time before reaching 10 puffs

You should also call an ambulance immediately if a child:

- Appears exhausted
- Has a blue/white tinge around his/her lips
- Is going blue
- Has collapsed

Monitoring and Review

The effectiveness of this policy will be monitored regularly by the Head Teacher. Any necessary amendments may be made immediately. The School will review this policy annually. Any changes made to this policy will be communicated to staff, pupils, parents and other relevant stakeholders.

Other related policies

Managing Medicines
First aid Policy
SEND Policy