Bracken Hill School

Asthma School Policy

Author: Mrs Clarke

Policy Type: Whole School

This policy is reviewed annually to ensure compliance with current regulations

School Asthma Policy

1. Purpose

This policy sets out how Bracken Hill School supports pupils with asthma. We aim to ensure that all pupils with asthma can participate fully in school life in a safe and inclusive environment. Bracken Hill School works in partnership with pupils, parents/carers, healthcare professionals, and the school nursing service to ensure effective management of asthma.

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2. Legal Framework

This policy is based on the following legislation and guidance:

- Children and Families Act 2014 (Section 100)
- DfE: *Supporting pupils at school with medical conditions* (2014)
- DfE: *Guidance on the use of emergency salbutamol inhalers in schools* (2015)
- Equality Act 2010
- UK GDPR and Data Protection Act 2018

The governing body has a statutory duty to make arrangements to support pupils with medical conditions.

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3. Aims

The school will:

- Maintain an up-to-date asthma policy reviewed annually
- Ensure sufficient staff are trained to support pupils with asthma
- Maintain an accurate register of pupils with asthma
- Ensure all pupils with asthma have access to their medication at all times
- Provide a safe and inclusive environment for all pupils

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4. Responsibilities

Headteacher, Governing Body and Senior Leadership Team

- Ensure this policy is implemented effectively
- Ensure staff receive appropriate training
- Ensure systems are in place for identifying and supporting pupils with asthma

Parents/Carers

- Inform the school if their child has asthma
- Provide written consent for the use of prescribed and emergency medication
- Provide at least one in-date inhaler (and spacer where required), clearly labelled
- Ensure the school has an up-to-date Personal Asthma Plan (where required)
- Inform the school of any changes in condition or medication

School Staff

- Be aware of this policy and follow procedures

- Know which pupils have asthma
- Recognise signs and symptoms of asthma attacks
- Ensure pupils have immediate access to inhalers
- Support pupils in taking medication when needed
- Record all medication use in line with school procedures
- Inform parents/carers of inhaler use where appropriate

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5. Asthma Register and Individual Healthcare Plans

- The school will maintain an up-to-date asthma register
- Information will be shared on a need-to-know basis in line with data protection legislation
- Pupils may have an Individual Healthcare Plan where required

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6. Storage and Access to Medication

- Pupils will have immediate access to their inhalers
- Inhalers will be stored safely but not locked away (e.g., classroom or carried by pupil where appropriate)
- Spare inhalers may be stored according to school procedures

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7. Emergency Salbutamol Inhaler

The school hold an emergency salbutamol inhaler in our school office.

- It will only be used for pupils diagnosed with asthma
- Written parental consent must be in place
- The pupil must have a prescribed inhaler
- A register will be kept of pupils allowed to use the emergency inhaler
- Use of the inhaler will be recorded

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8. Record Keeping

- All inhaler use must be recorded on a medication administration record (MAR)
- Records will include pupil name, date, time, and dosage
- Records will be stored securely

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9. Managing an Asthma Attack

Staff must remain calm at all times, stay with the pupil, and act quickly. If in doubt, treat the situation as a severe attack and seek emergency help.

Common triggers include:

- Exercise
- Dust
- Cold Air
- Infections

Mild to Moderate Attack

Symptoms may include:

- Complaints of breathlessness
- Wheezing or persistent cough
- Slight difficulty speaking but able to talk in sentences
- Appearing uncomfortable but not distressed

Action:

1. Sit the pupil upright and reassure them. Do not allow them to lie down.
2. Encourage the pupil to take slow, steady breaths.
3. Retrieve the pupil's inhaler without delay.
4. Encourage the pupil to administer their inhaler independently where possible, under supervision. If needed, trained staff may assist.
5. Use a spacer device where available to improve medication delivery.
6. Administer the prescribed dose as outlined in the pupil's Individual Healthcare Plan.
7. Observe the pupil carefully. Improvement should be seen within 3–5 minutes, with maximum benefit within approximately 15 minutes.

If symptoms do not improve within 5 minutes or worsen at any time, follow the procedures for a severe attack.

If the pupil requires their inhaler again later in the same day, parents/carers must be informed and advised to seek medical advice.

Severe Attack

Symptoms may include:

- Difficulty breathing, rapid or laboured breathing
- Inability to complete full sentences
- Use of chest and neck muscles to breathe
- Nasal flaring
- Appearing exhausted, distressed, or unusually quiet
- Complaints of chest tightness (younger pupils may describe this as tummy ache)

Action:

1. Stay calm and reassure the pupil. Do not leave them alone.
2. Sit the pupil upright and slightly forward.
3. Send for the pupil's inhaler immediately. If unavailable, use the school's emergency inhaler (if criteria are met).
4. Shake the inhaler and remove the cap.
5. Use a spacer where possible.
6. Place the mouthpiece in the pupil's mouth ensuring a good seal, or use a mask if appropriate.
7. Give one puff of salbutamol at a time, allowing the pupil to take 5 breaths between each puff.
8. Repeat up to a total of 10 puffs.
9. If there is no improvement, or if you are concerned at any point, call 999 immediately for an ambulance.

10. If the ambulance has not arrived within 10 minutes and symptoms persist, repeat up to 10 puffs as above.
11. Continue to reassure the pupil and monitor their condition closely.
12. Contact parents/carers as soon as possible.

A member of staff must accompany the pupil to hospital and remain with them until a parent/carer arrives.

After an Asthma Attack

- The pupil should not be left alone immediately following an attack.
- The pupil may return to normal activities once fully recovered.
- Parents/carers must be informed of all asthma attacks requiring significant inhaler use.
- If a pupil has required 6 or more puffs within a 4-hour period, parents/carers should be advised to seek medical review.
- Staff should record the incident in line with school procedures.

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10. Inclusion

Pupils with asthma will not be excluded from physical activity or school trips. Reasonable adjustments will be made to support participation in these activities. Where a child cannot verbally communicate their need for an inhaler aided communication boards will be used to provide opportunity. If a child cannot self-administer an inhaler a staff member will administer it on behalf of the child.

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11. Training

Key staff will receive appropriate training from the NHS nursing team to support pupils with asthma. This will typically be two members of staff from each class group which has an asthmatic child. Training will be refreshed annually.

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12. Monitoring and Review

This policy will be reviewed annually by Mrs Clarke or sooner if guidance changes.

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13. Data Protection

All personal and medical information will be handled in accordance with UK GDPR. Information will only be shared with staff who need it to support the pupil.

Review date – May 2027