

ASTHMA POLICY

Including the use of emergency Salbutamol in school

This policy was presented and accepted by the Governing Body – 04.04.19

Bassaleg School – Asthma Policy

1. Introduction

The school fully recognises that asthma is a widespread, serious but controllable condition affecting many pupils at school. The school positively welcomes all pupils with asthma. All pupils with asthma should have an inhaler in school. This school encourages pupils with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, their employers (the local education authority) and pupils. Supply teachers and new staff are also made aware of this policy. Staff training will be provided annually as recommended by the School Health Nurses Team.

2. Asthma medicines

Immediate access to reliever medicines is essential. Students with asthma are encouraged to carry their reliever inhaler as soon as the parents/carer, doctor or asthma nurse and school medical officer agree they are mature enough.

Parents/carers are asked to ensure that the school is provided with a labelled spare reliever inhaler. The school will hold this separately in case the student's own inhaler runs out, or is lost or forgotten. All inhalers must be labelled with the child's name by the parents/carer.

School staff are not required to administer asthma medicines to students (except in an emergency). School staff who agree to administer medicines are insured by local education authority when acting in agreement with this policy. All school staff will let students take their own medicines when they need to.

3. Record keeping

At the beginning of each school year or when a student joins the school, parents/carers are asked if their child has any medical conditions including asthma on their data form.

All parents/carers of students with asthma are consequently sent a School Asthma Card to complete. Parents are asked to return them to school. From this information the school keeps its asthma register, which is available to all staff.

Parents/carers are required to update the School Asthma Card annually or at any point their child's medication or dose changes during the year.

The school medical officer will contact parents/carers when a student's spare inhaler is about to expire.

4. Exercise and activity – PE and games

Taking part in sports, games and activities is an essential part of school life for all students. All teachers know which children in their class have asthma and all PE teachers at the school are aware of which students have asthma from the school's asthma register.

Students with asthma are encouraged to participate fully in all PE lessons. PE teachers will remind students whose asthma is triggered by exercise to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after the lesson. It is agreed with PE staff that each student's inhaler can be taken to the site of the lesson. If a student needs to use their inhaler during a lesson they will be encouraged to do so.

Students with asthma will not be forced to take part in activity if they feel unwell. They will also not be excluded from activities that they wish to take part in if their asthma is well controlled.

Classroom teachers follow the same principles as described above for games and activities involving physical activity.

5. Out-of-hours sport

There has been a large emphasis in recent years on increasing the number of children and young people involved in exercise and sport in and outside of school. The health benefits of exercise are well documented and this is also true for children and young people with asthma. It is therefore important that the school involve students with asthma as much as possible in after and off site activities.

PE teachers, classroom teachers and out-of-hours school sport coaches are aware of the potential triggers for students with asthma when exercising, tips to minimise these triggers and what to do in the event of an asthma attack.

6. School environment

The school does all that it can to ensure the school environment is favourable to students with asthma. The school has a definitive no-smoking policy.

7. Making the school asthma-friendly

The school ensures that all students understand asthma.

8. When a student is falling behind in lessons

If a student is missing a lot of time at school or is always tired because their asthma is disturbing their sleep at night, the class teacher will initially talk to the parents/carers to work out how to prevent their child from falling behind. If appropriate, the teacher will then talk to the school medical officer and special education needs co-ordinator about the student's needs.

9. Asthma attacks

All trained first aid staff who come into contact with students with asthma know what to do in the event of an asthma attack.

10. Use of emergency salbutamol inhalers in school

Two emergency salbutamol inhalers will be held in school and will only be used by students, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

A student may be prescribed an inhaler for their asthma which contains an alternative reliever medication to salbutamol (such as terbutaline). The salbutamol inhaler should still be used by these students if their own inhaler is not accessible.

11. The emergency kit

The emergency asthma inhaler kits include:

- A salbutamol metered inhaler
- At least two single use plastic 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 monthly checks recorded
- A note of arrangements for replacing the inhaler and spacers
- A list of students permitted to use the emergency inhaler as per parental consent form
- A record of administration

12. Storage, care and disposal of the emergency inhaler

The school's emergency inhaler kits will be maintained and checked regularly. At least two named volunteer staff will have responsibility for ensuring that:

- On a monthly basis that the inhaler and spacers are present and in working order, and the inhaler has sufficient number of puffs;
- Batch numbers on the inhalers are recorded, and that replacement inhalers are obtained when expiry dates approach;
- Replacement spacers are available following use;
- The mouthpiece of the inhaler has been cleaned, dried and returned to storage following use, or that replacements are available if necessary;
- The emergency inhaler kits will be kept in the medical room and Forge office away from students;
- The spacer should not be reused by the school. However, the inhaler itself may be reused when it has been cleaned after use;
- If there is any risk of contamination with blood (for example if the inhaler has been used without a spacer) it will not be re-used but disposed of

13. Named volunteer Staff

Volunteer staff are asthma trained.

- Mrs L Compton (medical officer)
- Mrs P Williams
- Mrs H Woodman
- Mrs D Tudge
- Mrs C Hunt

14. Roles and Responsibilities

The School

The School has a responsibility to:

- Provide a Salbutamol inhaler for emergency use only;
- Ensure the health and safety of their employees (all staff) and anyone else on the premises or taking part in school activities (this includes students). This responsibility extends to those staff and others leading activities taking place;

off site, such as visits, outings or field trips. Employers therefore have a responsibility to ensure that an appropriate asthma policy is in place;

- Make sure the asthma policy is effectively monitored and regularly updated;
- Report to parents/carers, students, school staff and local health authorities about the successes and failures of the policy;
- Provide indemnity for teachers who volunteer to administer medicine to students with asthma who need help

The Headteacher

The Headteacher has a responsibility to:

- Plan an individually tailored school asthma policy with the help of school staff, school nurses, local education authority advice and the support of their employers;
- Plan the school's asthma policy in line with devolved national guidance;
- Liaise between interested parties school staff, school nurses, parents/carers, governors, the school health service and students;
- Ensure every aspect of the policy is maintained;
- Assess the training and development needs of staff and arrange for them to be met;
- Ensure all supply teachers and new staff know the school asthma policy;
- Regularly monitor the policy and how well it is working;
- Delegate a staff member to check the expiry date of spare reliever inhalers and maintain the school asthma register;
- Report back to their employers and their local education authority about the school asthma policy

School staff

All school staff have a responsibility to:

- Understand the school asthma policy;
- Know which students they come into contact with have asthma;

- Know what to do in an asthma attack;
- Allow students with asthma immediate access to their reliever inhaler;
- Tell parents/carers if their child has had an asthma attack;
- Tell parents/carers if their child is using more reliever inhaler than they usually would;
- Ensure students have their asthma medicines with them when they go on a school trip;
- Ensure students who have been unwell catch up on missed school work;
- Be aware that a student may be tired because of night-time symptoms;
- Keep an eye out for students with asthma experiencing bullying;
- Liaise with parents/carers, the school medical officer and SENCO if a child is falling behind with their work because of their asthma

PE teachers

PE teachers 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 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 allowed to take it when needed;
- Ensure that if a student has asthma symptoms while exercising, they allow them to stop, take their reliever inhaler and as soon the student feels better, allow them to return to activity. (Most students with asthma should wait at least five minutes);
- Ensure students with asthma always warm up and down thoroughly

Medical officer

Medical officer has a responsibility to:

- Help plan/update the school asthma policy;
- Provide regular training for school staff in managing asthma;

- Provide information about where schools can get training if they are not able to provide specialist training themselves;
- Liaise with asthma nurses of individual students with asthma;
- Maintain asthma register;
- Check asthma register as part of initiating an emergency response;
- Recognise an asthma attack;
- Respond appropriately to a request for help;
- Recognise when emergency action is necessary;
- Administer inhaler through a spacer;
- Make appropriate records of asthma attacks;
- Record inhaler batch numbers;
- · Obtain replacement supplies;
- Follow the Welsh Assembly Government guidance

Doctors and asthma nurses

Doctors and asthma nurses have a responsibility to:

- Ensure the student knows how to use their asthma inhaler (and spacer) effectively;
- Provide the school with information and advice if a student in their care has severe asthma symptoms (with the consent of the students' parents/carers);
- Offer the parents/carers of every student a written personal asthma action plan

Students

Students have a responsibility to:

- Treat other students, with and without asthma, equally;
- Let any student having an asthma attack take their reliever inhaler (usually blue) and ensure a member of staff is called;
- Tell their parents/carers, teacher or PE teacher when they are not feeling well;
- Treat asthma medicines with respect;
- Know how to gain access to their medicine in an emergency;
- Know how to take their own asthma medicines

Parents/carers

Parents/carers have a responsibility to:

- Tell the school if their child has asthma;
- Ensure the school has a complete and up-to-date school asthma card 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 or field trips and other out-of-school activities such as school team sports;
- Tell the school about any changes to their child's medicines, what they take and how much;
- Inform the school of any changes to their child's asthma (for example, if their symptoms are getting worse or they are sleeping badly due to their asthma);
- Ensure their child's reliever inhaler (and spacer where relevant) is labelled with their name;
- Provide the school with a spare reliever inhaler labelled with their child's name;
- Ensure that their child's reliever inhaler and the spare is within its expiry date;
- Keep their child at home if they are not well enough to attend school;
- Ensure their child catches up on any school work they have missed;

•	Ensure their child has regular asthma reviews with their doctor or asthma nurse (every six to twelve months)

HOW TO RECOGNISE AN ASTHMA ATTACK

The signs of an asthma attack are

- Persistent cough
- A wheezing sound coming from the chest
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences
- Unusually quiet
- May try to tell you that their chest 'feels tight'
- Tummy ache (usually younger students)

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE STUDENT

- Appears exhausted
- Has shown no sign of improvement
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed
- If you are worried at ANYTIME

If the ambulance has not arrived within 10 minutes, give up to 10 further puffs of the emergency inhaler one puff at a time every 30-60 seconds, via the spacer device if possible

WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK

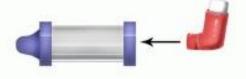
Medical room: Ext 261 or emergency mobile 07968 397220, Forge office: Ext 201

- Keep calm and reassure the student
- Send for help
- Encourage the student to sit up leaning slightly forward and take slow breaths
- Use the student's own inhaler if not available or there is a
 problem ie: broken, empty, out of date, not in school; check the
 asthma register for consent to use the emergency inhaler which is
 located in the medical room and Forge office
- Remain with the student while the inhaler and spacer are brought to them
- Prime the emergency inhaler by spraying 2 puffs into the air
- Using the spacer provided, immediately help the student to take two puffs of salbutamol via the spacer
- If there is no immediate improvement, continue to give one puff at a time every 30-60 seconds, up to a maximum of 10 puffs
- Stay calm and reassure the student. Stay with the student until they feel better. The student can return to school activities when they feel better
- If the student does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- Ask for parents/carers to be called immediately
- If an ambulance has not arrived in 10 minutes give another 10 puffs in the same way
- If student collapses, follow first aid protocol

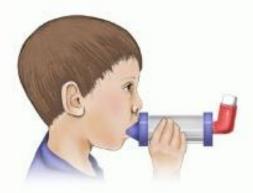
HOW TO USE A METERED DOSE INHALER & SPACER



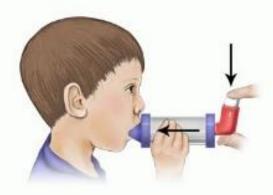
1. Shake the medicine.



Insert the mouthpiece of the inhaler into the rubber-sealed end of the spacer.



 Breathe all of the air out of your lungs.
 Then put the spacer into your mouth between your teeth. Make a tight seal around the mouthpiece with your lips.



 Press the metered-dose inhaler down once to release a spray of medicine.
 The medicine will be trapped in the spacer. Breathe in slowly and deeply.



Hold your breath for at least 5 to 10 seconds. Breathe out slowly.

WHAT TO DO AFTER AN ASTHMA ATTACK

- Stay with the student until they feel better
- The student can return to school activities when they feel better or if unwell parents/carers can be contacted to collect and take home
- Give the spacer used to the student or dispose of appropriately
- Complete a 'Letter to inform parents/carers of emergency salbutamol inhaler use' for the student to take home
- Inform the school medical officer within 24 hours of incident

WHAT TO DO WITH EMERGENCY KIT AFTER USAGE

- Complete 'record of administration log'
 - Student details
 - o Date
 - o Time
 - Location
 - By whom
 - o Was a spacer used?
 - Number of puffs given, including the number of primer puffs
 - Account of what happened including any relevant details to the asthma attack
 - Outcome (eg. student returned to lesson or sent home)
 - Which parent/carer was contacted
- Inhaler must be cleaned and dried as per manufacturer's instructions and returned to its usual storage place. If there is risk of contamination with blood the inhaler should be disposed of
- Inform medical officer within 24 hours if kit has been used



Letter to inform parents/carers of emergency salbutamol inhaler use

Students name:						
Registration:						
Date:						
Dear parent/guardian,						
This letter is to notify you that has had problems with their breathing today.						
This happened when						
A member of staff helped them use their asthma inhaler. They did not have their own asthma inhaler with them, so a member of staff helped them to use the school's emergency asthma inhaler containing salbutamol. They were given puffs. Their own inhaler was not working, so a member of staff helped them to use the school's emergency asthma inhaler containing salbutamol. They were given puffs. Please contact your doctor urgently to supply an inhaler for your child to use in school.						
Although they soon felt better, we strongly advise that you have your child seen by your own doctor as soon as possible.						
Yr eiddoch vn avwir.						

School Asthma Card

SCIIO	OI ASUII	1116	l Gard				
To be filled	in by parent/carer						
Child's name							
Date of birth							
Parent/carers Name							
Telephone - home		_					
Talanhana -							
Telephone - mobile							
Email							
Ellivii							
Doctor's name							
Doctor's							
telephone							
Doctor's							
address							
This card is for your child's school. Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year. Medicines and spacers should be clearly labelled with your child's name and kept in agreement with the school's asthma policy.							
Policyer fre	atment when neede	-A					
For shortnes	s of breath, sudden	tightne					
wheeze or cough, help or allow my child to take the medicines below. After treatment and as soon as they feel							
better they can return to normal activity.							
Reliever medic	cine		Number of puffs				
Dage you ch	Does you child need to take any other asthma medicines						
_	schools care?	y ou	f astiiiia iiieuisiiioo				
Yes No							
If yes please describe below							
			much and when taken				

Please attach a recent photograph of your child for identification in an emergency



Medical room use only

Consent recorded on asthma register

Does your child tell you when he/she needs medicine?						
	Yes		No			
Does your child need help taking his/her medicine?						
	Yes		No			
What are your child's triggers (things that make their asthma worse)?						
	Pollen		Exercise			
	Stress		Weather			
	Cold/flu		Air pollution			
If other please list						

Parental/carer consent

I confirm my child has been diagnosed with asthma / has been prescribed an inhaler (please delete as appropriate).

My child will have a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.

In the event of my child displaying symptoms of asthma, and if their inhaler is not available or unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Parent/carer's signature	
Date	

Please return completed from to the medical room at Bassaleg school

What to do if a child is having an asthma attack

- Keep calm and help them sit up straight, leaning slightly forward
- Help them take one puff of their own reliever inhaler (usually blue) every 30-60 seconds up to a maximum of 10 puffs
- 3 Call 999 for an ambulance if their symptoms get worse while they're using their inhaler, they don't feel better after 10 puffs or you're worried at any time
 - Repeat step 2 if ambulance takes longer than 10 minutes

This policy was presented and accepted by the Governing Body - 04.04.19

This policy will be reviewed - 04.04.21