



Prince Henry's Grammar School
COLLABORATIVE LEARNING TRUST



SCHOOL ASTHMA POLICY FOR STUDENTS

DRAFT

Purpose and scope of this policy

Prince Henry's Grammar School welcomes and supports children and young people with medical and health conditions. We aim to include all students with medical conditions in all school activities, including off site visits, differentiated as appropriate. We recognise that some medical conditions may be defined as disabilities and consequently come under the Equality Act 2010.

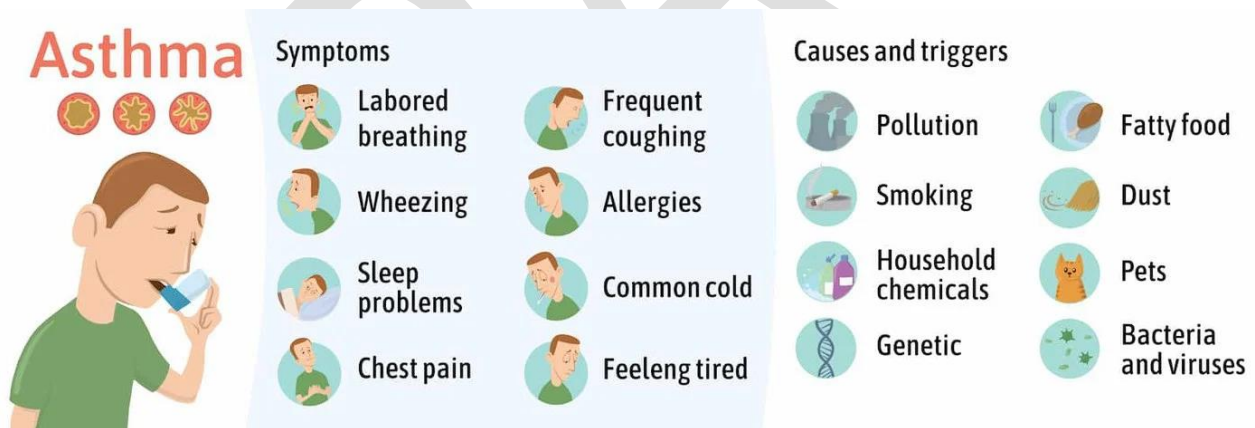
Introduction

Asthma is the most common chronic childhood condition affecting 1 in 11 children, with 2-3 children having asthma in every classroom. Whilst asthma deaths are thankfully rare, children with poorly controlled or severe asthma are more likely to miss school, with research studies suggesting asthma is responsible for 18% of school absences.

Having asthma can affect a student's schooling and learning. They may need to be supported to help them manage their asthma and prevent missing time engaging in the school day. Having appropriate asthma care is important for the student to ensure their immediate safety, long-term wellbeing, and optimal academic performance.

What is asthma?

Asthma is a condition that affects small tubes (airways) that carry air in and out of the lungs. When a child with asthma is exposed to something that irritates their airways (an asthma trigger), the muscles around the walls of the airways tighten so that the airways become narrow and inflamed. Sticky mucus or phlegm also builds up, which can further narrow the airways. These reactions make it difficult to breathe, leading to symptoms of asthma.



As a school, we recognise that asthma is a widespread, serious, but controllable condition. This school welcomes all students with asthma and aims to support them in participating fully in school life. We endeavour to do this by ensuring that:

- we have an asthma register,
- we have an up-to-date asthma policy,
- we have a named asthma lead,
- all students have immediate access to their reliever inhaler at all times,
- all students with a serious condition will have an Independent Healthcare Plan
- we have emergency salbutamol inhalers in school
- all relevant staff have regular asthma training,
- we promote asthma awareness with students, parents/carers and staff.

Asthma Register

Prince Henry's Grammar School has an asthma register of students within the school, which is updated yearly. This is done at the start of each academic year by asking all parents/carers to check and update where necessary their child's medical information on Arbor. When parents/carers have confirmed that their child is asthmatic or has been prescribed a reliever inhaler we ensure that:

- they are advised that their child should carry their own inhaler at all times during the school day.
- they are requested to complete an online permission form allowing their child to use the school emergency salbutamol inhaler if they require it and their own inhaler is broken, out of date, empty or has been lost (Appendix 1).

Asthma Lead

Prince Henry's Grammar School has appointed asthma leads for each Key Stage. It is the responsibility of the asthma lead to manage the asthma register, update the asthma policy, manage the emergency salbutamol inhalers (please refer to the Department of Health Guidance on the use of emergency salbutamol inhalers in schools, March 2015) and to ensure measures are in place so that students have immediate access to their inhalers.

Guidance can be found here:

https://assets.publishing.service.gov.uk/media/5a74eb55ed915d3c7d528f98/emergency_inhalers_in_schools.pdf

Medication and Inhalers

All students with asthma should have immediate access to their reliever (usually blue) inhaler at all times. The reliever inhaler is a fast-acting medication that opens up the airways and makes it easier for them to breathe (Source: Asthma UK). Some students may also have a preventer inhaler, which is usually taken morning and night, as prescribed by the doctor/nurse. This medication needs to be taken regularly for maximum benefit. Students should not bring their preventer inhaler to school as it should be taken regularly as prescribed by their doctor/nurse at home. However, if the student is going on a residential trip, we are aware that they will need to take the inhaler with them so they can continue taking their inhaler as prescribed.

Emergency Salbutamol Inhalers in school

As a school we are aware of the guidance 'The use of emergency salbutamol inhalers in schools from the Department of Health' (March 2015) which gives guidance on the use of emergency salbutamol inhalers in schools.

The emergency salbutamol inhalers will only be used by students who have been diagnosed with asthma and prescribed a reliever inhaler AND for whom parental consent for use of the emergency inhaler has been given.

The name(s) of these students will be held and updated by us as required.

Prince Henry's Grammar School will hold a limited stock for emergency use and our named asthma lead will:

- ensure that a minimum stock level is held
- ensure that they are replaced before they expire
- update/maintain accurate records of students who may require their use and ensure the school holds parent/carer consent (see appendix 1 below) giving permission for one to be administered where required

- ensure that relevant staff receive an asthma update annually, and as part of their training, will be taught how to recognise an asthma attack and how to manage an asthma attack.

In addition, guidance will be displayed in the staff room (see Appendix 2).

DRAFT

Appendix 1

CONSENT FORM

USE OF EMERGENCY SALBUTAMOL INHALER

- 1) I can confirm that my child has been diagnosed with asthma and has been prescribed an inhaler
- 2) I can confirm that they have a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day and carry with them at all times
- 3) In the event of them displaying symptoms of an asthma attack, and their inhaler is not available or is unusable, I consent for them to receive salbutamol from an emergency inhaler held by the school for such emergencies

Signed

Date.....

Name (print).....

Relationship to student.....

Student's Name.....

Form.....

Parent/Carer's address and contact details:

.....
.....
.....

Telephone.....

Email.....

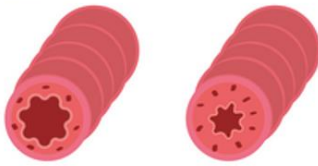
This is for use in the event of an acute asthma attack only and does not replace the need for your child to carry their own inhaler with them whilst at school.

ASTHMA ATTACKS IN SCHOOLS



WHAT IS ASTHMA?

Asthma is caused by swelling (inflammation) of the breathing tubes that carry air in and out of the lungs. This makes the tubes highly sensitive, so they temporarily narrow.



Normal Airway

Asthma Attack

WHO DOES IT AFFECT?

It affects people of all ages and often starts in childhood, although it can also develop for the first time in adults.

There's currently no cure, but there are simple treatments that can help keep the symptoms under control so it does not have a big impact on your life.

SYMPTOMS OF ASTHMA

The main symptoms of asthma are:



- Chest pain or tightness



- Wheezing & shortness of breath

The symptoms can sometimes get temporarily worse. This is known as an asthma attack.

COMMON TRIGGERS

Symptoms may happen randomly or after exposure to a trigger.

Common asthma triggers include:



- Allergies (to house dust mites, animal fur or pollen, for example)



- Smoke, pollution and cold air



- Exercise



- Infections like colds or flu

Identifying and avoiding your asthma triggers can help you keep your symptoms under control.



INHALERS

Inhalers can help:

- relieve symptoms when they occur (reliever inhalers)
- stop symptoms developing (preventer inhalers)

Inhalers, which are devices that let you breathe in medicine, are the main treatment. Tablets and other treatments may also be needed if your asthma is severe.

You'll usually create a personal action plan with a doctor or asthma nurse.

This includes information about your medicines, how to monitor your condition and what to do if you have an asthma attack.

If using reliever and preventer inhalers does not control your asthma, you may need an inhaler that combines both.

Combination inhalers are used every day to help stop symptoms occurring and provide long-lasting relief if they do occur.



ASTHMA ATTACK SYMPTOMS

Signs that you may be having an asthma attack include:

1. Your symptoms are getting worse (cough, breathlessness, wheezing or tight chest)
2. Your reliever inhaler (usually blue) is not helping
3. You're too breathless to speak, eat or sleep
4. Your breathing is getting faster and it feels like you cannot catch your breath
5. Your peak flow score is lower than normal
6. Children may also complain of a tummy or chest ache

The symptoms will not necessarily occur suddenly. In fact, they often come on slowly over a few hours or days.

WHAT TO DO DURING AN ASTHMA ATTACK

If you think you're having an asthma attack, you should:

1. Sit upright (do not lie down) and try to take slow, steady breaths. Try to remain calm, as panicking will make things worse.



2. Take 1 puff of your reliever inhaler (usually blue) every 30 to 60 seconds, up to a maximum of 10 puffs.



3. Call 999 for an ambulance if you do not have your inhaler with you, you feel worse despite using your inhaler, you do not feel better after taking 10 puffs or you're worried at any point.



4. If the ambulance has not arrived within 15 minutes, repeat step 2.

Never be frightened of calling for help in an emergency.

Try to take the details of your medicines (or your personal asthma action plan) with you to hospital if possible.

If your symptoms improve and you do not need to call 999, get an urgent same-day appointment to see a GP or asthma nurse.

This advice is not for people on SMART or MART treatment. If this applies to you, ask a GP or asthma nurse what to do if you have an asthma attack.

REMEMBER

Always inform paramedics of:

- The child's name
- The number of puffs taken by the pupil
- The total length of time of the asthma attack

Use of an emergency inhaler should always be recorded and include details of:

- Where the attack took place
- When the attack took place
- How much medication was given and by whom