



ASHMORE PARK

AND

PHOENIX NURSERY SCHOOLS

FEDERATION

ASTHMA POLICY

*(Written in conjunction with the Federation's
Supporting Children with Medical Conditions Policy)*

Senior Leadership Team Review Date	10.07.2025
Governing Board Approved/Adopted	30.09.2025
Signed on behalf of the Governing Board/Committee	<i>S. Thacey</i>
Policy to be Reviewed Date	30.09.2026

The Principles of our Federation Asthma Policy

- The Federation recognises that asthma is a widespread, serious, but controllable condition affecting many children
- Ensures that children with asthma participate fully in all aspects of school life
- Recognises that immediate access to reliever inhalers is vital
- Keeps records of children with asthma and the medication they take
- Ensures all staff who come into contact with children with asthma know what to do in the event of an asthma attack
 - All Educators and the qualified 'First Aider at Work' complete the 'Supporting Children and Young People's Health: Improving Asthma Care Together' online training module, annually in the autumn term
 - With the exception of the academic year when all Educators attend and complete their 'Level 3 – Paediatric First Aid' training and the academic year when the Senior Administrator attends and completes their 'Level 3 – First Aid at Work' training, both of which are renewed every three years.
- Will work in partnership with all stakeholders to ensure the policy is implemented and maintained successfully.

Our policy has been written with advice from the Department for Education and Employment, the National Asthma Campaign, Wolverhampton City Council and the School Health Service.

1. The Federation encourages children with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by all school staff, the Governing Board and families
 - a. Supply staff and all newly appointed staff are also made aware of the policy 'in-year' when they commence their placement/employment.

The School Environment

All Educators are responsible for acquainting themselves with the triggers of a possible attack and are aware that triggers can include:

- Colds and infection
- Dust and house mites
- Pollen, spores and moulds
- Feathers and furry animals
- Exercise and laughing
- Stress
- Cold air, a change in the weather
- Chemicals, glue, paint and aerosols
- Food allergies
- Fumes and cigarette smoke (Source: Asthma UK).

The Federation does all that it can to ensure each schools' environment is fully inclusive to children with asthma. Subsequently, schools do not keep furry and/or feathery pets, and we have a strict no smoking policy on and around the school grounds. On occasions when children may be exposed to animals e.g. during visits to The Kingswood Trust centre, visits from an external provider etc. the school will identify any child who has a fur or feather allergy and will take the necessary actions to ensure all children remain safe.

Taking part in all aspects of school life is important to us, especially as we place an emphasis on the importance of our outdoor environment to both the children and their families. Educators are aware of which children have asthma from the asthma register. Children with asthma are encouraged to participate fully in school life; however, if a child needs to use their inhaler during the session, they will be supported to do so.

Information pertaining to each child can be found in the medication wallet along with their medication, in the first aid box.

Medication

We understand that immediate access to a reliever inhaler (usually blue) is vital for all asthmatic children. The reliever inhaler is a fast acting medication that opens up the airways and makes it easier for the child to breathe. (Source: Asthma UK). Some children will also have a preventer inhaler, which is usually taken morning and night, as prescribed by their doctor/nurse. This medication needs to be taken regularly for maximum benefit. Children should not bring their preventer inhaler into school, as it should be taken regularly as prescribed by the child's health professional at home. (Source: Asthma UK). Parents/Carers should always tell their child's Educator or the appointed first aider when their child has had to use their reliever inhaler as this will improve staffs understanding of the child and their condition, triggers etc.

Records are kept each time an inhaler is used. All reliever inhalers and spacers are kept in the designated first aid box marked with a green and white first aid sign. All inhalers are labelled with the child's name by the parent/carer. School staff are not required to administer medication to children except in an emergency. School staff who agree to do this are insured by the Local Education Authority when acting in accordance with this policy.

Record Keeping

When a child joins one of our schools, parents/carers are asked to inform the school if their child is asthmatic. All parents/carers of children with asthma are required to complete a 'School Asthma Card (Asthma UK)' and return it to the school, see Appendix 1. From this information the school keeps an asthma register which is uploaded to the staff's 'Microsoft Team' and a copy is retained in each school's office. If any changes are made to a child's medication it is the responsibility of the parent/carer to inform the school.

Both Ashmore Park Nursery School and Phoenix Nursery School hold an emergency inhaler and spacer as per 'Guidance on the use of emergency salbutamol inhalers in schools' March 2015. This medication can only be administered to children on the school's Asthma Register. All Educators and the qualified 'First Aider at Work' have been trained to administer the emergency inhaler. Parents/Carers of children with Asthma are sent a letter asking permission for the emergency inhaler to be used in the event that their own inhaler is not available, see Appendix 2. Parents/Carers will be informed by letter if their child has used the emergency inhaler, see Appendix 3.

Records are kept every time a child uses their inhaler and the member of staff administering the medication countersigns the child's 'Record of Medication Administered to an Individual Child' form, see Appendix 4.

The qualified 'First Aider at Work' regularly checks asthma inhalers for each child, for expiry dates. Each child's inhaler is kept in the designated first aid box marked with a green and white first aid sign. A medication wallet containing their individual asthma card is also available in the school office.

School Trips and Outside Activities

As part of our responsibility to ensure all children are kept safe within the school grounds and when on a school trip, a risk assessment will be undertaken by the Federation's 'Educational Visit Co-ordinator' (EVC). The risk assessments will establish asthma triggers, which children could be exposed to, and plans will be put in place to ensure all triggers are avoided, where possible. When out of the school grounds or on a school trip, the child's inhaler will be retained by the child's Educator/Parent/Carer and will be available to them at all times.

Asthma Attacks

All Educators and the qualified 'First Aider at Work' know what to do in the event of an asthma attack. All staff take the necessary action and follow the emergency procedure:

1. Stay calm and reassure the child
2. Encourage the child to sit up and slightly forward
3. Use the child's own reliever inhaler, if not available, use the emergency inhaler
4. Remain with the child while the inhaler and spacer are brought to them
5. Help the child to breathe by ensuring tight clothing is loosened
6. Immediately help the child to take two separate puffs of their salbutamol inhaler, via their spacer
7. If there is no immediate improvement, continue to give two puffs every two minutes up to a maximum of 10 puffs, or until the symptoms improve
 - a. The inhaler should be shaken between puffs.
8. Stay calm and reassure the child, stay with the child until they feel better
 - a. The child can return to school activities once they are feeling better.
9. If the child does not feel better or the member of staff is worried at any time before reaching 10 puffs from the inhaler, the member of staff will call 999 for an ambulance
10. If the ambulance has not arrived in 10 minutes, an additional 10 puffs will be given, as detailed above
11. In the event of an ambulance being called, the child's parents/carers will always be contacted
12. If the child is taken to hospital by an ambulance, a member of staff will always accompany them to the hospital and remain with them until a parent/carers arrives.

Children Not Known to have Pre-existing Asthma:

In this situation staff will:

1. Call an ambulance and state that the child is having difficulty breathing
2. Sit the child upright and calm them to reassure them
3. Stay with the child until the emergency services arrive
4. In the event of an ambulance being called, the child's parent/carers will always be contacted
5. If the child is taken to hospital by an ambulance, a member of staff will always accompany them to the hospital and remain with them until a parent/carers arrives.

After the Attack

Minor attacks should not interrupt a child's involvement in school. When they feel better they can return to school activities. The child's parent/carers must be informed about the attack.

SCHOOL ASTHMA CARD

School Asthma Card

To be filled in by the parent/carer

Child's name

Date of birth

Address

Parent/carer's name

Telephone – home

Telephone – mobile

Email

Doctor/nurse's name

Doctor/nurse's telephone

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 policy.

Reliever treatment when needed

For shortness of breath, sudden tightness in the chest, 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.

Medicine	Parent/carer's signature

If the school holds a central reliever inhaler and spacer for use in emergencies, I give permission for my child to use this.

Parent/carer's signature Date

Expiry dates of medicines

Medicine	Expiry	Date checked	Parent/carer's signature

Parent/carer's signature Date

What signs can indicate that your child is having an asthma attack?

Does your child tell you when he/she needs medicine?

☐ Yes ☐ No

Does your child need help taking his/her asthma medicines?

☐ Yes ☐ No

What are your child's triggers (things that make their asthma worse)?

☐ Pollen ☐ Stress

☐ Exercise ☐ Weather

☐ Cold/flu ☐ Air pollution

If other please list

Does your child need to take any other asthma medicines while in the school's care?

☐ Yes ☐ No

If yes please describe

Medicine	How much and when taken

Dates card checked

Date	Name	Job title	Signature / Stamp

To be completed by the GP practice

What to do if a child is having an asthma attack

- 1 Help them sit up straight and keep calm.
- 2 Help them take one puff of their 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 – this could be a cough, breathlessness, wheeze, tight chest or sometimes a child will say they have a 'tummy ache'
 - they don't feel better after 10 puffs
 - you're worried at any time.
- 4 You can repeat step 2 if the ambulance is taking longer than 15 minutes.



Any asthma questions?

Call our friendly helpline nurses

0300 222 5800

(Monday-Friday, 9am-5pm)

www.asthma.org.uk



CONSENT FORM
USE OF EMERGENCY SALBUTAMOL INHALER



Child's Name		Educator	
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I confirm that my child has been prescribed an in date inhaler, which is clearly labelled with their name, which is to be kept at school with their labelled spacer. *(please tick all which apply)*

☐	My child has been prescribed an inhaler
☐	My child has been diagnosed with Asthma

In the event of your child displaying symptoms of asthma, and if their inhaler is not available or is unusable we ask if we are able to provide Salbutamol from an emergency inhaler held by the school for such emergencies. *(please tick as appropriate)*

☐	I do consent for my child to receive Salbutamol from an emergency inhaler
☐	I do not consent for my child to receive Salbutamol from an emergency inhaler

Signed: Date:

Parent/Carer Name:

Parent/Carer's Address and Contact Details:

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Telephone:

E-Mail:



EMERGENCY SALBUTAMOL INHALER



USE FORM

Child's Name:

Educator Group:

Name of Person Administering Medication:

Date Administered:

Dear Parent/Carer

This letter is to formally notify you that your child has had problems with his/her breathing today.

This happened when

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*They did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing Salbutamol. They were given Puffs.

*Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing Salbutamol. They were given puffs.

**N.B: Delete as appropriate*

Although your child soon felt better, we would strongly advise that you have your child seen by your own doctor as soon as possible.

Yours sincerely

Mrs Jane Parocki

Headteacher

Name of School

Name of Child

Date Medicine Provided by Parent/Carer

Educator Group

Name of Medication

Expiry Date

Quantity returned

Dose and Frequency of Medication

[illegible][illegible]