

Mount Primary School

Asthma Policy



Approved by:	Governing Board	Date: 11/3/25
Last reviewed on:	March 2025	
Next review due by:	March 2026	

This policy has been written with advice from the Department for Education and the respiratory team on Wirral.

Introduction

The Principles of our school Asthma Policy at Mount Primary School are to:

- recognise that asthma is a condition affecting many school children
- welcomes all pupils with asthma
- encourage children 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 the policy
- Ensure that all staff who come into contact with children with asthma are provided with training on asthma regularly.
- ensure that children with asthma participate fully in all aspects of school life including PE and outdoor learning
- recognise that immediate access to a reliever inhaler is vital
- keep a record of children who have asthma and the medication they take
- ensure the school environment is favourable to children with asthma
- ensure that other children understand asthma
- ensure all staff who come into contact with children with asthma know how to support children with asthma
- ensure all staff who come into contact with children with asthma know what to do in the event of an asthma attack
- work in partnership with all interested parties including all school staff, parents, governors, health professionals, and children to ensure the policy is implemented and maintained successfully

Medication

Immediate access to a reliever inhaler is vital. The reliever inhalers are kept in the classroom in the medical box. Each inhaler must have a pharmacy label with the child's name on the box or on the reliever inhaler. The advice from health is that all children of primary school age should have a spacer. Boxes are taken out on the playground and into the hall during PE lessons.

School staff are not required to administer medication to children except in an emergency. However, many of our staff are happy to do this. School staff who agree to do this are insured by the local education authority when acting in accordance with this policy. **All school staff will let children take their own medication when they need to.**

Record Keeping

At the beginning of each school year, or when a child joins the school, parents are asked if their child has asthma. If medication changes in between times, parents are asked to inform the school. The school holds an inhaler for each child and they are regularly checked for expiry dates by the office staff. The school office keeps a list of children in school with inhalers and the expiry date of the inhaler. This information is added to Medical Tracker, which is our internal system used to track medical conditions and use of medication.

It is the parents' responsibility to check the expiry date of any inhaler and provide a new inhaler or spacer at the request of the school.

If a child has used their inhaler in school, the number of puffs and the time of administration will be recorded on Medical Tracker. A notification will then be sent to parents. All children with asthma should have an 'asthma action plan.' This can be obtained from a health care provider.

This action plan will detail how your child's asthma will be managed and this will coincide with the below traffic light system, which we follow as a school, in line with the advice from the respiratory team within Wirral:

(GREEN) MILD Wheeze / Exacerbation

If you start with a mild cough or wheeze, but able to continue your day to day activities
I have **2 PUFFS** of my Salbutamol / Blue inhaler no more than **every 4 hours**

If I've continued to need it every day for a week, I should contact my GP for advice / review

If I have it in the day, I may need it overnight so it's important to check
I can continue to go to school, however the school should be told I needed my inhaler, what time I
had it and to monitor me throughout the day.

(ORANGE) MODERATE Wheeze / Exacerbation

My cough, wheeze or shortness of breath is still there after the 2 puffs or I am not lasting 4 hours
between doses I should take **4 PUFFS** of my blue / Salbutamol inhaler no more than **4 hourly**

At this point, I should contact my GP to make an appointment to be seen that day, or GP out of hours
or Walk in Centre if there are no appointments

If I am at school, at this point my parents should be contacted as I need a closer eye kept on me / be
reviewed by a health care professional

(RED) SEVERE or LIFE-THREATENING Wheeze / Exacerbation

If I am breathless and working hard to breath / using tummy muscles to suck in breath / unable to
talk in full sentences / lips go blue / getting pale, drowsy or weak

Call 999 immediately stating 'life threatening Asthma Attack'

Give **10 PUFFS** of my blue / Salbutamol inhaler

(1 puff every 30 seconds - 1 minute via spacer device, this should take 5-10
minutes)

Whilst waiting for an ambulance you can repeat the dose (10 puffs) every 15 minutes

If this happens in school, call 999 first - give medication - then ring parents

School staff also have annual training on supporting pupils with asthma. If your child's asthma is well managed an asthma action plan may provide sufficient information for us to support them. However, there are instances in which we require more information as a school. In this case, we will suggest that we draw up an Individual Health Care Plan (IHCP). As a parent, you can request an Individual Health Care plan or the school SENDCo, Mrs. Rachel Sexton-Perinkadakatt will contact you if we feel, as a school, an IHCP would be important to run alongside the asthma action plan.

Parents **must** notify school if their child has used their preventer inhaler before the school day, so that we can monitor your child's use of the preventer inhaler and ensure you are informed of this use.

Emergency Use Inhaler

Mount Primary School does hold an emergency inhaler kit:

- A salbutamol metered dose inhaler
- At least two plastic spacers compatible with the inhaler
- Instructions on using the inhaler and spacer
- Instructions on cleaning and storing the inhaler
- A note of the arrangements for replacing the inhaler and spacers
- A list of children permitted to use the emergency inhaler
- A record of when the inhaler has been used

The spare inhaler will only be used by children who:

- have been diagnosed with asthma and been prescribed a reliever inhaler
- have been prescribed a reliever inhaler

This is in line with the guidance published in March, 2015 by the Department of Health: *Guidance on the use of Emergency Salbutamol Inhalers in School* and you can find this information here: https://assets.publishing.service.gov.uk/media/5a74eb55ed915d3c7d528f98/emergency_inhalers_in_schools.pdf

Parents will provide a signed consent to allow the school to provide use of the emergency inhaler and spacer when they feel that it is necessary. This inhaler is kept in the first aid room.

PE

Taking part in sports is an essential part of school life. All teachers are aware of the children in their class who have asthma – this is listed on the class medical register. Children with asthma are encouraged to participate fully in PE. Each child's inhalers will be labelled and kept in a box at the site of the lesson. If a child needs to use their inhaler during the lesson, they will be encouraged to do so. Staff will then record this on Medical Tracker with the date and time. A notification will be sent home, informing the parents that the inhaler has been used.

The School Environment

The school does all that it can to ensure the school environment is favourable to children with asthma. The school does not keep furry and feathery pets indoors and has a non-smoking policy. As far as possible the school does not use chemicals in science and art lessons that are potential triggers for children with asthma.

Making the School Asthma Friendly

The school ensures that all children understand asthma. Asthma can be included in Key Stages 1 and 2 in the National Curriculum. Children with asthma and their friends are encouraged to learn about asthma; information for children and teens can be accessed from the following website www.asthma.org.uk.

Staff training

The SENDCo and identified staff attend training offered by the respiratory team at Arrow Park Hospital. This training is then disseminated to all staff.

When a Child is falling behind in lessons

If a child is missing a lot of time from school because of asthma or is tired in class because of disturbed sleep and falling behind in class, the class teacher will initially talk to the parents. If appropriate the teacher will then talk to the health professionals and SENDCo about the situation. The school recognises that it is possible for children with asthma to have special education needs because of asthma.

Asthma Attacks

All staff who come into contact with children with asthma know what to do in the event of an asthma attack.

We follow a child's asthma action plan and if appropriate, their IHCP. These will coincide with the below traffic light section for supporting a child having an asthma attack.

(RED) SEVERE or LIFE-THREATENING Wheeze / Exacerbation

If I am breathless and working hard to breath / using tummy muscles to suck in breath / unable to talk in full sentences / lips go blue / getting pale, drowsy or weak

Call 999 immediately stating 'life threatening Asthma Attack'

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After the attack

If a child has an asthma attack in school we will ask parents to share medical advice given by the medical practitioner that received your child. We will request this before the child returns to school to ensure their asthma action plan remains up-to-date.