

## **ASTHMA POLICY**

### **RATIONALE**

Safa School recognizes that asthma is a widespread, serious but controllable condition affecting many children at the school. The school welcomes all children with asthma. We 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 and children. Supply teachers and new staff are also made aware of the policy.

### **ASTHMA MEDICINES**

Access to reliever medicines is essential.

**KS1:** The reliever inhalers are kept in the school clinic, in a clear plastic box, with the child's name on it. If a KS1 child requires their reliever inhaler they will be accompanied to the school clinic. They will immediately tell the school nurse of their need for reliever inhaler. There is no need for them to wait, should other children be in the clinic at the same time. They will be given their reliever inhaler and allowed to rest until well enough to return to lessons.

Parents / carers are asked to ensure that the school is provided with a labelled reliever inhaler, which must be labeled with the child's name by the parent / carer.

**KS2:** Those children who have shown that: they can recognise their asthma symptoms and can show that they know how to administer their reliever, are encouraged to carry their reliever inhaler on their person. Each individual case will be discussed with parents and the most suitable place for the inhaler decided.

### **RECORD KEEPING**

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

From this information the school keeps its medical register, which is held in the School Clinic, classes and PE Department. Parents / carers are asked to update the school clinic if their child's medicines, or how much they take, changes during the year. Parents / carers are also required to update the school of any changes in contact phone numbers

### **EXERCISE AND ACTIVITY – PE AND GAMES**

Taking part in sports, games and activities is an essential part of school life for all children. All teachers know which children in their class have asthma. Children with asthma are encouraged to participate fully in all PE lessons. If a child needs to use their inhaler during a lesson they will be encouraged to do so. PE teachers will remind children, whose asthma is triggered by exercise, to take their reliever inhaler before the lesson, and to thoroughly warm up before and cool down after the lesson. Classroom teachers follow the same principles as described above for games and activities involving physical activity.

### **OUT-OF-HOURS SPORTS**

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 with asthma. It is therefore important that the children with asthma join in with after school clubs.

When a child with asthma is attending an activity outside of school (e.g. soccer match / field trips / residential trip to Dibba for Years 5 and 6 children) their reliever inhaler is taken along on the trip: for

the younger children; under the care of the accompanying First Aid Provider; for the older children on their person.

### **SCHOOL ENVIRONMENT**

The school does all it can to ensure the school environment is favorable to children with asthma. The school does not allow furry or feathery animals and has a definitive no-smoking policy. As far as possible the school does not use products in science and art lessons that are potential triggers for children with asthma.

### **SPECIFIC CONCERNS ABOUT YOUR CHILD**

Please speak with the school nurse if you have concerns about your child's asthma. The nurse will advise whether you should speak with the class teacher.

This policy has been written following guidelines set out by Asthma UK.

**Implementation Date: September 2019**

**Review Date: September 2020**

**Reviewed by:** \_\_\_\_\_  
**May Ann Angeles, DHA-RN**  
**Lead School Nurse**

**Approved By:** \_\_\_\_\_  
**Zara Harrington**  
**Principal**

PHOTO

[Sample]Asthma Health Care Plan

Child's name:	D.O.B:
Class:	

Emergency contact details	
Primary parent/guardian:	Mobile:
Other contact nos: Home	

**Medical condition: Asthma**

Condition: Asthma is a disease affecting the airways that carry air to and from your lungs. People who suffer from this chronic condition (long-lasting or recurrent) are said to be asthmatic.

The inside walls of an asthmatic's airways are swollen or inflamed. This swelling or inflammation makes the airways extremely sensitive to irritations and increases your susceptibility to an allergic reaction. As inflammation causes the airways to become narrower, less air can pass through them, both to and from the lungs. Symptoms of the narrowing include wheezing (a hissing sound while breathing), chest tightness, breathing problems, and coughing. Asthmatics usually experience these symptoms most frequently during the night and the early morning.

**Allergens/triggers**

Allergens/Triggers:	
1. Allergies Can Cause Asthma	1. Airborne substances such as tree, grass, and weed pollens, mold, animal dander, dust mites,
2. Infections	2. Such as cold, flu, bronchitis, allergic rhinitis (hay fever)
3. Weather	3. Such as extreme cold air, changes in temperature, and humidity.
4. Strong Emotions	4. Anxiety, crying, yelling, stress, anger, or laughing hard can trigger an asthma attack.

**Triggers: Exposure to the above listed foods and medication should be avoided at all times!**

**Medication to avoid: Aspirin, Ibuprofen & Beta blockers**

#### **Symptoms:**

- Coughing
- Wheezing
- Trouble breathing
- A tight, uncomfortable feeling in the chest
- Recurring bronchitis

Asthma attacks are triggered or worsened by colds and other respiratory infections. You may notice that the child's colds last longer than they do in other children, or that signs and symptoms include frequent coughing that may get worse at night.

#### **Emergency Procedure "The Five Minute Rule"**

- ✓ Keep calm, attacks can be frightening and it is important to stay calm and reassure the student.
- ✓ Encourage the student to sit up and lean slightly forward (tripod position) - do not hug them or lie them down.
- ✓ Encourage the student to breathe slowly and calmly and ensure tight clothing is loosened.
- ✓ Make sure the student takes their reliever inhaler (usually blue) immediately - Preferably through a spacer: **TWO** puffs if metered dose inhaler (MDI)/evohaler. **ONE** puff if turbohaler.

#### **If there is no immediate improvement**

- ✓ Continue to make sure the student takes the reliever inhaler every minute or until their symptoms improve

#### **Call an ambulance or a doctor urgently if the:**

- ✓ Student's symptoms do not improve in 5-10 minutes
- ✓ Student is too breathless or exhausted to walk
- ✓ Student's lips are blue or if you are in any doubt

#### **Monitor the Person Until Help Arrives**

- ✓ Do not mistake drowsiness as a sign of improvement; it could mean asthma is worsening.
- ✓ Do not assume the person's asthma is improving if you no longer hear wheezing

#### **Important things to remember in an asthma attack**

1. Never leave the student having an asthma attack

2. If the student does not have their inhaler and/or spacer with them, send another teacher or student to their classroom or assigned room to get their spare inhaler/or spacer
3. In an emergency situation, school staff are required under common law duty of care to act like any reasonable prudent parent
4. Reliever medicine is very safe. During an asthma attack do not worry about a student overdosing
5. Send another student to get another teacher/adult if an ambulance needs to be called
6. A member of staff should always accompany a student taken to hospital by ambulance and stay with them until their parent's arrives
7. The parent must always be told if their child has had an asthma attack.

#### **How to use an Evohaler/Reliever Inhaler:**

- ✓ Remove cap and shake inhaler well.
  - ✓ Insert inhaler into spacer.
  - ✓ Have the person breathe out completely and put mouth tightly around spacer mouthpiece.
  - ✓ Press inhaler once to deliver a puff.
  - ✓ Have the person breathe in slowly through the mouth and then hold breath for 10 seconds.
  - ✓ Give a total of two puffs, waiting about a minute between each puff.
- ❖ ENSURE THE STUDENT CONTINUES TO TAKES ONE PUFF OF THEIR RELIEVER INHALER EVERY MINUTE UNTIL THE AMBULANCE OR DOCTOR ARRIVES.**

