

June 2020



General policy statement

Grampound Road Primary School is an inclusive community that welcomes and supports pupils with medical conditions. The school provides all pupils with any medical condition the same opportunities as others at school.

The school makes sure all staff understand their duty of care to children and young people in the event of an emergency. All staff feel confident in knowing what to do in an emergency. This school understands that certain medical conditions are debilitating and potentially life threatening, particularly if poorly managed or misunderstood. This school understands the importance of medication and care being taken as directed by healthcare professionals and parents. All staff understand the medical conditions that affect pupils at this school. Staff receive training on the impact medical conditions can have on pupils.

What is asthma

Asthma is a condition that affects the airways – the tubes that carry air in and out of the lungs. A child with asthma has 'sensitive' airways that are inflamed and ready to react to things that can irritate them – these can include pets, pollen, cold weather and mould. When the airways react, they become narrower, even more irritated and can create more mucus. This causes a child to have asthma symptoms and means they find it harder to breathe.

What are the symptoms of asthma?

The usual symptoms of asthma in children are:

- Wheezing
- Coughing
- Finding it hard to breathe
- Tightness in the chest sometimes children say, 'my chest hurts' or 'I have a tummy ache'.

Asthma symptoms can come and go. Even when a child is well, the asthma is there in the background. There is not a cure for asthma. It is a long-term condition. If it is not treated properly, asthma can be serious and lead to a potentially life-threatening asthma attack. The good news, though, is that most children who get the right medicines and support can manage their asthma well and live a symptom-free life, doing all the things they want to do.

Medication

Immediate access to inhalers is vital.

The reliever inhalers and spacers, if necessary, are kept in the classroom with the teacher.

Parents are asked to ensure that the school is provided with a labelled reliever inhaler.

All inhalers must be labelled with the child's name by the parent and include guidelines on administration- a asthma care plan is completed. (see below)

School staff are not required to administer medication to children except in an emergency; however, many of our staff are prepared to do this. School staff who agree to do this are insured by the Celtic Cross Education when acting in accordance with this policy.

All school staff will ensure children take their medication when they need to. If a child refuses to take their inhaler, staff should not force them to do so, but should note this in the records, inform parents or nominated carers immediately and follow the emergency procedures detailed in this policy.

It is the responsibility of parents/carers to regularly check the condition of inhalers and ensure that they are working and retain a therapeutic dose.

Record Keeping

When a child joins the school, parents are asked if their child has asthma. From this information the school will record on the child's record (Pupil Asset) that they have asthma and all staff are alerted. If medication changes in between times, parents are asked to inform the school and complete a change of medication form, which is kept with the child's records. Parents must be made aware that it is their responsibility to ensure the inhaler left at school is always in date and to dispose safely of expired inhalers.

This school <u>asthma card</u> is designed to help primary schools keep a central asthma register at school that is available to all staff.

PΕ

Taking part in sports and swimming is an essential part of school life. Children with asthma are encouraged to participate fully in PE. Teachers will always remind children with asthma to take their reliever inhaler (usually blue) and spacer with them. Each child's inhaler 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.

If a child is exercising outside when it's damp or cold, getting them to cover their mouth and nose with a scarf can help because it warms up the air before they breathe it in and it hits their sensitive airways.

Visits

Teachers will ensure inhalers are taken with them on all out of school activities for those children identified as requiring one.

On school trips, there will be a 'first aider' who looks after any health needs the children have. They will carry children's medicines, including a spare reliever inhaler (usually blue) and spacer (if they use one). They will need a copy of the child's written asthma action plan.

The school environment

As far as possible the school does not use chemicals that are potential triggers for children with asthma. Children are encouraged to leave the room if their asthma is triggered by certain fumes.

If a child is missing a lot of time from school because of asthma or is tired in class because of associated 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 school nurse and special educational needs co-ordinator about the situation and put in place a remedial plan. The school recognises that it is possible for children with asthma to have special educational needs because of asthma.

Asthma attacks

It can be very frightening to see a child having asthma symptoms. And sometimes it can be hard to judge whether to call an ambulance or treat them at school and make a call to parents.

If a child is having an asthma attack, recognising the signs, and acting quickly save their life.

Signs that a child is having an asthma attack:

Their reliever inhaler (usually blue) is not helping or they need it more than every four hours, or

They cannot talk or walk easily, or

They are finding it hard to breathe, or

They are coughing or wheezing a lot, or

Their chest is tight or hurts, or

Their peak flow is less than what it says on their asthma action plan.

If a child under 12 has an asthma attack

- 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 10 puffs.
- 3 Call 999 for an ambulance if:
 - they don't feel better after 10 puffs
 - their symptoms get worse e.g. cough, breathlessness, wheeze, tight chest or 'tummy/chest ache'
 - you're worried at any time.
- 4 Repeat step 2 if the ambulance takes longer than 15 minutes.







5 simple steps

Staff should be familiar with the steps below as it could save a child's life

- 1. Call for help
- 2. Help them to sit up do not let them lie down. Try to be calm
- 3. Help them take a puff of their reliever inhaler (usually blue), with their spacer, if they have it every 30 to 60 seconds up to a total of 10 puffs
- 4. If they do not have their blue inhaler, it's not helping or if you are worried at any time, call 999 straight away
- 5. While you wait for an ambulance, the child can use their blue reliever again, every 30 to 60 seconds (up to 10 puffs) if they need to.

If the child goes to A&E, remember to take their <u>written asthma plan</u> with you – either as a photo on your phone or a paper copy.

If you don't need to call 999 because the child's asthma symptoms improved after they used their blue inhaler, you need to make sure the parent makes an urgent same-day appointment with their GP or asthma nurse.

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 parents must be told about the attack.

Staff with asthma

Staff are encouraged to ensure they keep an asthma inhaler accessible in school, but not in reach of pupils.

Staff are encouraged to take account of all medical advice with regards to maintaining their health, including annual checks and action plans.

Staff must inform the Head of School when their asthma is impacting on their ability to carry out usual duties.

Staff must adhere to all guidance as laid out in the Asthma Risk Assessment.

Further advice

https://www.asthma.org.uk/

Asthma nurse specialists for advice (Monday-Friday, 9am-5pm): call 0300 222 5800; WhatsApp 07378 606728.