

Brandwood Community School

Asthma Policy

Approved by: Pupil Inclusion & Community Committee - October 2025
Review Date: October 2026

Asthma Policy

Introduction

We recognise that asthma is a widespread, potentially serious but controllable condition that affects many learners at our school. We positively welcome and seek to care for all learners with asthma and are committed to ensuring that they are supported to fully access the whole curriculum. We strive to ensure that learners with asthma can participate fully in all aspects of school life so they are able to achieve their full potential and have equality of opportunity.

Aims

We aim to ensure that:

- Learners with asthma have immediate access to reliever inhalers at all times
- Emergency asthma medication (reliever inhalers) is kept on each floor of the school
- Careful records are kept of all learners with asthma and the medicines they take via IHCPs
- Individual Health Care Plans (IHCPs) are updated bi-annually
- The whole school environment, including the physical, social, sporting and educational environment is favourable to learners with asthma
- All learners understand and know asthma as a medical condition
- All staff (including supply teachers and support staff) who come into contact with learners with asthma know what to do in the event of an asthma attack
- Staff attend regular training led by a qualified asthma nurse
- By working in partnership with all interested parties including: the Governing Board, all school staff, the school nurse, parents and carers and learners this policy will be planned, implemented and maintained successfully

Asthma Medicines

Immediate access to reliever inhalers is essential. Individually prescribed, personal inhalers are kept in an unlocked cupboard in classrooms and taken on all school trips and into all PE lessons by the teacher, coach or the child concerned. All learners with asthma are aware of where their inhaler is kept and they are able to access it as and when it is required. Spare 'emergency' reliever inhalers and spacers are kept on each floor of the school and are taken on trips in the first aid kits, in case personal inhalers are empty, lost or forgotten.

Staff are not required to administer asthma medicines to learners (except in an emergency, when it could be necessary) each individual will take their own inhaler when they need to. However, this must be supervised by: the class teacher, staff member or a first aider and a record kept. Parents and carers are informed by the class teacher at the end of the school day if their child needed their reliever inhaler during school hours. This could indicate an increase in breathing difficulties, which could require a visit to the GP to review the effectiveness of preventative treatment.

It is the responsibility of the first aiders to check all inhalers in school for expiry dates, monitor records of usage and make contact with parents or carers whenever an emergency inhaler has been needed so that a new personal inhaler is provided to be kept in school.

Record Keeping

At the beginning of each school year or when admitted to the school during the academic year, parents or carers are asked if there are any medical conditions, including asthma, the school should be aware of on their admission. This is recorded on the information collation form. This information is collated and the school keeps a register of all learners with a medical condition including asthma on Bromcom and on the electronic system CPOMS. Parents or carers are asked to inform the school of any medication or dosage changes during the year.

An Individual Health Care Plan (IHCP) is drawn up for all learners with asthma by the relevant Year Group Lead in consultation with parents or carers and a relevant healthcare professional, if appropriate. Learners are involved wherever possible and the IHCP is reviewed bi-annually. As well as the IHCP, a child asthma action plan (**Appendix 1**) must also be completed by parents or carers of the child concerned and a signed copy kept in school. This must be updated as and when required, particularly if the child has had an asthma review by their GP or if any information has changed. A record of asthma relief inhaler usage during the school day is kept by the class teacher. This record is kept and recorded on CPOMS. As previously mentioned any need for the relief inhaler is reported to parents or carers or, for example, if the reliever inhaler has been needed to be taken more than is usual. This reporting would also be recorded on CPOMS. Parents or carers must also agree and sign a declaration form that gives permission for the school to administer an emergency inhaler if and when needed (**Appendix 2**).

Exercise & Activity - PE & Games

Taking part in sports, games and activities is an essential part of school life for all learners. All teachers know who has asthma in their class and the PE coaches are also aware of any learner who has asthma as the medical conditions register is shared, confidentially, with all staff at the start of each year.

Learners with asthma are encouraged to participate fully in all PE lessons, wherever possible. Teachers remind learners whose asthma is triggered by exercise to take their reliever inhaler to the lesson with them. If any learner needs to use their inhaler during a lesson they will be encouraged to do so and the coach or teacher will ensure the personal inhalers are taken into the hall, outside or to the all-weather pitches in case of this eventuality. The sports coaches inform the class teacher at the end of the lesson if any child has needed to use their reliever inhaler.

Swimming & Trips

Personal asthma inhalers as well as spare 'emergency' inhalers are taken off site. Learners keep their own inhaler and the emergency inhalers are kept by the leader of the group during participation in swimming, sports activities and educational visits.

School Environment

The school does all that it can to ensure the school environment is favourable to learners with asthma. Animals are not kept on site and there is a definitive no-smoking policy on site and on school grounds. As far as possible the school does not use chemicals in science and art lessons that are potential triggers for learners with asthma. The school is cleaned to a high standard and this is monitored regularly by key staff so that dust is kept to an absolute minimum.

Attendance

If a learner is missing a lot of their education due to chronic asthma or is tired because their asthma is disturbing their sleep at night, the class teacher will inform the relevant SENDCo. Parents or carers will then be invited into school to discuss any support needed to counteract this, the school nurse or another health professional may also attend the meeting. If appropriate, the relevant SENDCo will liaise with the Year Group Lead to make any adjustments to the IHCP and action plan that may need to be made. (The school recognises that it is possible for learners with chronic asthma to under-achieve due to their asthma.)

Asthma Attacks

Staff members who come into contact with learners with asthma know what to do in the event of an asthma attack. All staff working with learners with asthma receive training from a health professional regularly as part of the autumn term medical conditions training plan.

In the event of an asthma attack the school follows the procedure outlined by Asthma UK in their school asthma pack. This procedure is displayed in every classroom (**Appendix 3**).

A Holmes

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My asthma triggers

List the things that make your asthma worse so you can try to avoid or treat them.

I will see my doctor or asthma nurse at least once a year (but more if I need to)

Date my asthma plan was updated:

Date of my next asthma review:

Doctor/asthma nurse contact details:

Children's Community Team -01204 463939

Parents and carers – get the most from your child's action plan

- Take a photo and keep it on your mobile (and your child's mobile if they have one)
- Stick a copy on your fridge door
- Share your child's action plan with their school

Learn more about what to do during an asthma attack [asthma.org.uk/child-asthma-attacks](https://www.asthma.org.uk/child-asthma-attacks)

ASTHMA QUESTIONS?

Parents and carers ask our respiratory nurse specialists
Call **0300 222 5800**
WhatsApp **07378 606 728**
(Monday-Friday, 9am-5pm over 16 only)



CHILD ASTHMA ACTION PLAN

Fill this in with your GP or nurse

Name and date:

Always keep your reliever inhaler (usually blue) and your spacer with you. You might need them if your asthma gets worse.

Last reviewed and updated 2021; next review 2024.

Asthma and Lung UK, a charitable company limited by guarantee with company registration number 01653614, with registered charity number 126730 in England and Wales, SC008415 in Scotland, and 1177 in the Isle of Man

1 My every day asthma care

I need to take my preventer inhaler every day.

It is called:

and its colour is:

I take _____ puff/s of my preventer inhaler in the morning and _____ puff/s at night. I do this every day even if my asthma's OK

Other asthma medicines I take every day:

My reliever inhaler helps when I have symptoms.

It is called:

Salbutamol

and its colour is:

Blue

I take 1 or 2 puff/s of my reliever inhaler when I wheeze or cough, my chest hurts or it's hard to breathe.



If I need my reliever inhaler (usually blue) when I do sports or activity, I need to see my doctor or my asthma nurse.

2 My asthma is getting worse if...

- I wheeze, cough, my chest hurts, or it's hard to breathe **or**
- I need my reliever inhaler (**usually blue**) three or more times a week **or**
- I'm waking up at night because of my asthma (this is an important sign and I will book a next day appointment with my GP or nurse).

If my asthma gets worse, I will:

- Take my preventer medicines as normal
- And also take 2, 4, 6 puff/s of my reliever inhaler (**usually blue**) every four hours if needed
- See my doctor or nurse **within 24 hours** if I don't feel better.

URGENT!

If your reliever inhaler is not lasting four hours, you need to take emergency action now (see section 3)

Remember to use my spacer with my inhaler if I have one.

If I don't have one, I'll check with my doctor or nurse if it would help me.

Other things my doctor or nurse says I need to do if my asthma is getting worse (e.g. check my peak flow)

GP appointment after 48 hours of 4 puffs 4 hourly if no worse but no change in condition.
Same day GP ,OOH or 111 appointment after starting to use 6 puffs every 4 hours.

3 I'm having an asthma attack if...

- My reliever inhaler isn't helping or I need it more than every four hours **or**
- I can't talk, walk or eat easily **or**
- I'm finding it hard to breathe **or**
- I'm coughing or wheezing a lot or my chest is tight/hurts.

If I have an asthma attack I will:

1. Call for help. Sit up – don't lie down. Try to keep calm.
2. Take one puff of my reliever inhaler (with my spacer, if I have it) every 30 to 60 seconds, up to a total of 10 puffs.
3. If I don't have my reliever inhaler, or it's not helping, or if I am worried at any time, call 999 for an ambulance.
4. If the ambulance has not arrived after 10 minutes and my symptoms are not improving, repeat step 2.
5. If my symptoms are no better after repeating step 2, and the ambulance has still not arrived, contact 999 again immediately.



Even if I start to feel better, I don't want this to happen again, so I need to see my doctor or asthma nurse today.



School Emergency Salbutamol Inhaler Consent Form

Dear Head teacher

I confirm that my child has been diagnosed with asthma and has been prescribed a blue reliever inhaler – (usually salbutamol)

I _____ give consent for _____ to use the school emergency salbutamol inhaler and spacer if needed.

I am aware that the spacer will remain in school for future use.

I will provide a new large volume spacer for school to replace the one my child has used.

Signed _____ Date _____



How Do I Manage a Pupil Having an Asthma Attack?

