

# South Otterington Church of England V.C. Primary School

## ASTHMA POLICY STATEMENT

Pupils with asthma are encouraged to take a full part in all activities of the school. All staff are responsible for children in their care, so will need to undertake some practical asthma management. All teachers, teaching assistants, admin staff and the Senior MSA have First Aid qualifications which include asthma training.

### **Parental Involvement**

We will ask all parents whether their son/daughter has asthma (or is ever wheezy). A record of all pupils with asthma is maintained. Details of treatment is requested from parents, together with clear guidance on correct usage.

*(The National Asthma Campaign School Asthma Card is a clear and practical treatment record. The school may promote use of the card as part of good practice in asthma management.)*

The School Nurse is available to provide further information if required.

### **Access to Inhalers**

Pupils will need to have one reliever inhaler at home and an additional one with them at school. Some pupils may also need two preventer inhalers if these have to be taken during the school day.

At school, the issue of access to inhalers is very important. Inhalers are kept in the class medicine baskets in the office.

**IT IS ESSENTIAL THAT THE PUPIL HAS IMMEDIATE ACCESS TO THEIR RELIEVER INHALER AT ALL TIMES.**

We will therefore ensure that the pupil has easy access to their reliever inhaler at all times i.e.: in the classroom, on the sportsfield, at the pool, at break and lunchtimes and on school trips. Delay in taking reliever treatment can lead to a severe attack and, in rare cases, could even prove fatal.

**Teachers must ensure that the reliever inhaler is taken to the sportsfield or swimming pools.**

Children are taught that medicines are only prescribed for personal use - inhalers should never be shared.

### **Sports**

The teacher has a major role to play in the good management of asthma during any sports activities. The aim of total normal sporting activity should be the goal which is beneficial for all but the most severely asthmatic pupil. However, nearly all young people with asthma can become wheezy during exercise, particularly in cold weather.

Staff should be aware that a number of pupils with asthma will need to take a dose of their reliever inhaler and/or Intal **before** exercise. This will help to prevent exercise-induced asthma. If the pupil does become wheezy or breathless a further dose of the reliever inhaler should be taken and the pupil allowed to rest.

Asthmatic pupils who are normally active should not be forced to participate in games if they say they are too wheezy to continue.

### **Passive Smoking**

Both staff and pupils should understand that inhaling someone else's cigarette smoke can trigger attacks of asthma. The no-smoking policy within our school building and grounds should ensure that pupils are not exposed to this hazard.

## **THE ASTHMA ATTACK - WHAT TO DO**

A pupil having an asthma attack will normally respond well and quickly to their reliever treatment. However, severe attacks of asthma need urgent medical attention. In rare cases, asthma can prove fatal and so it must never be underestimated.

All of our school staff know how to help in an attack. The following list is a breakdown of what will be done in an emergency.

1. Ensure that the reliever medicine is taken.
2. Stay calm and reassure the child.
3. Encourage the child to breathe slowly and deeply.
4. Sit child down leaning forward, elbows leaning on a desk or back of a chair.
5. Get medical advice, call for ambulance if:
  - no improvement after the use of a reliever for a maximum of 10 minutes.
  - Shortness of breath so severe that asthmatic cannot get out of a chair or speak more than a few words.
  - The child is exhausted with the effort of breathing.
  - If the sufferer looks blue.
  - If the pulse rate is faster than 120 beats each minute.