

THE PAINSLEY CATHOLIC ACADEMY



The Painsley Catholic Academy
Better Together

Asthma Policy
September 2018

St. Patricks Catholic Primary School

1. Introduction

St. Patrick's welcomes pupils with asthma. The School recognises asthma as an important condition and encourages and helps children with asthma to participate fully in school life.

2. The context of the policy and its relationship to other policies

The purpose of this policy is to:

- Meet **St. Patrick's** commitment to the health and wellbeing of students.
- Recognise the need for immediate access to inhalers
- Provide a school environment as favourable as possible to asthmatic children
- Ensure all staff are aware of asthma and know what to do in the event of an attack and if necessary will give emergency treatment.

This policy details St. Patrick's approach to dealing with asthma. Other school policies should be considered in conjunction with its guidance. These include:

- **Supporting Children with Medical needs policy**
- Health and Safety
- Trips and Visits

3. Record Keeping

On School entry, children with asthma or those possibly asthmatic should be identified through the medical conditions proforma completed by the parent / carer with parental responsibility. A positive response will result in the consent form being sent to parents for completion and a copy of the asthma action plan. These children will be added to the School asthma register. This is held by Miss Davies who is responsible for maintaining this register.

When a child needs to use their inhaler **outside of their routine use**, a record will be entered into the use of inhaler log held by Miss Davies. This will generate a letter home to inform parents and carers with parental responsibility that the child has required use of the inhaler. A copy of this letter will be kept on the child's record. If the same child has to use the inhaler more than once a term they should seek medical advice from their GP. This may indicate a child inadequately treated and therefore a risk.

The asthma register also notes all students with asthma care plans, which will be reviewed annually at the end of the academic year by Miss Davies.

4. Emergency Procedure Notice

This is to be displayed in the medical room. Miss Davies is responsible for ensuring this notice is present. All first aiders are to be provided with the asthma policy.

5. Staff Training

All first aiders have training in dealing with asthma through the First Aid at Work Qualification. All staff receive asthma awareness training annually, delivered by the school nurse, at the start of each academic year.

Review Date: December 2018

Member of Staff: Mrs E Baskeyfield/Miss Davies

ASTHMA INFORMATION RECORD 2018/19

Name of Child : _____

Academic Year: _____

Please tick each appropriate box:

My child has been diagnosed with asthma in the past but no longer has prescribed medications.

My son / daughter has a blue reliever inhaler for asthma and carries a spare in school

My son / daughter does not have a blue reliever inhaler for asthma.

Signed by Parent /Carer: _____

Print Name of signatory above: _____

Relationship to child: _____

Date: _____

Please complete a separate form for each child with asthma. Thank you.

ASTHMA PROFORMA CONSENT 2018/19

If your child has been diagnosed as asthmatic and has been prescribed reliever therapy (blue inhaler) please complete the first part of this form which gives your consent for school staff to administer this if required.

I hereby give my consent for school staff to give my child reliever therapy for the treatment of an asthma attack/prior to PE if required. I understand that I will be informed when the treatment has been given other than for routine self-administration.

Please note:

Your child should carry their own inhaler in school. Please ensure a spare reliever inhaler and spacer are kept in school (labelled with your child's name on) and that your child's inhalers are within their expiry date. Please return the consent form to Mrs Hambleton.

If your child experiences breathing problems, especially at night or after exercise, or when laughing or crying, or she/he suffers from repeated chest infections, please contact your G.P.

Name of Child (print): _____

Signed by parent/carer:

Date: _____

Print Name of person signing above: _____

Relationship to child: _____

Asthma Care Plan 2018/19

Name: _____ DOB: _____

Identified Need	Action Plan	Step 1	Date:
<i>To promote optimum health by maintaining good control of asthma symptoms</i>	<i>School staff are able to identify when reliever inhaler is needed.</i>	<i>Staff training completed, including First Aid at Work for all First Aiders</i>	2018 all staff First aiders on going – all trained
	<i>Consent for medication in school</i>	Step 2 <i>To ensure appropriate consent forms are signed.</i>	date
	<i>Easy access to inhalers whilst in school</i>	Step 3 <i>Parents/person with parental responsibility to supply inhaler and spacer.</i>	ongoing
		Step 4 <i>Parents to check expiry dates and change accordingly</i>	ongoing
	<i>To monitor and record inhaler use</i>	Step 5 <i>School staff should complete the audit form and inform parents/person with parental responsibility when reliever inhaler used during school day</i>	ongoing

Signed by Parent / person with parental responsibility: _____

Print Name: _____ Date: _____

Relationship to child: _____

School: _____ Date: _____

Date:

RE: Asthma

Dear Parent / Carer of _____,

Your child has had problems with his/her breathing today which has required the use of their own inhaler.

Schools are advised to let you know this has occurred as this may indicate your child's asthma is not well controlled at this time. You are therefore strongly advised to see your own doctor or practice nurse as soon as possible. Ensuring you of our best intention at all times.

Yours sincerely,

Mrs Hambleton

First Aider

