Asthma Policy
Supporting and Safeguarding Children with Asthma in School

Policy Updated	**June 2026**
Next Review Date	**June 2027**

Asthma Policy

Contents

The Principles of our Asthma Policy

Spring Grove Primary School

- Recognises that asthma is an important condition affecting many school children and positively welcomes all pupils with asthma.
- Ensures that children with asthma participate fully in all aspects of school life including PE
- Recognises that immediate access to reliever inhalers is vital
- Keeps records of children with asthma and the medication they take
- Ensures the school environment is suitable to children with asthma
- Ensures that other children understand asthma
- Ensures all staff who come into contact with children with asthma know what to do in the event of an asthma attack
- Will work in partnership with all interested parties including all school staff, parents, governors, doctors and nurses, and children to ensure the policy is implemented and maintained successfully

This policy has been written with advice from the Department for Education and Employment, National Asthma Campaign, the local education authority, the school health service and parents.

Medication

Immediate access to a reliever inhaler is vital.
Records are kept each time an inhaler is used. The reliever inhalers of children are kept in their individual classroom in a designated first aid area.

All inhalers are labelled with the child's name and class and kept in a zip lock wallet bag (with their names and class). All school staff will let children take their own medication when needed.

Record Keeping

When a child joins the school, parents are asked to inform the school if their child is asthmatic. All parents of children with asthma are required to complete a parental request for administration of salbutamol inhaler and health care plan form and return it to the school. If any changes are made to a child's medication it is the responsibility of the parents or carer to inform the school.

Spring Grove Primary holds 2 emergency inhalers and a spacer as per 'Guidance on the use of Emergency Salbutamol inhalers in schools' March 2015. This medication can only be administered to children on the Asthma Register (or children who have been prescribed an inhaler for cold/wheezing).

Asthma inhalers for each child are regularly checked for expiry dates by the Welfare officer. Each child's inhaler is kept in their own classroom in a named wallet containing their individual medication and record book.

All staff members are responsible for acquainting themselves with the triggers of a possible attack (allergies, colds, cough, cold weather) for each individual in their care. All this information is found in their class and a medical list can also be found in the register.

PE

Taking part in sports is an essential part of school life. Teachers are aware of which children have asthma from the asthma register. Children with asthma are encouraged to participate fully in PE. Teachers will remind children whose asthma is triggered by exercise to take their reliever inhaler before the lesson (if needed). If a child needs to use their inhaler during the lesson, they will be encouraged to do so. Records are kept every time a child uses their inhaler. Each child has a personal record book kept with their inhaler pack.

School Trips and Outside Activities

When a child is away from the school classroom on a school trip, club, outside sport or PE, their inhaler should accompany them and be made available to them at all times.

Making the School Asthma Friendly

The school ensures that all children understand asthma. Asthma can be included in Key Stages 1 and 2 in science, design and technology, geography, history and PE of the National Curriculum. Children with asthma and their friends are encouraged to learn about asthma; information for children and teens can be accessed from the following website www.asthma.org.uk.

When a Child is falling behind in lessons

If a child is missing time from school because of asthma or is tired in class because of 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 nursing team and special educational needs coordinator about the situation. The school recognises that it is possible for children with asthma to have special education needs because of asthma.

Asthma Attacks

All staff who come into contact with children with asthma know what to do in the event of an asthma attack. The school follows the following procedure, which is clearly displayed in all classrooms.

1. **Ensure that the reliever inhaler is taken immediately.**
2. **Stay calm and reassure the child.**
3. **Help the child to breathe by ensuring tight clothing is loosened.**

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 informed about the attack.

Emergency procedure

If the pupil does not feel better or you are worried **at any time** before reaching 10 puffs from the inhaler, **call 999 for an ambulance**.

If the ambulance has not arrived after 10 minutes, give an additional 10 puffs as detailed above.

In the event of an ambulance being called, the pupil's parents or carers should always be contacted.

In the event of a pupil being taken to hospital by ambulance, they should always be accompanied by a member of staff until a parent or carer is present.

Appendix 1 Parental request for administration of salbutamol inhaler

Record of inhalers administered to an individual child

Name of school/setting	
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Appendix 2 Individual Health Care Plan for children with medical needs

Individual healthcare plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications,

administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency *(state if different for off-site activities)*

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to