

KEA SCHOOL ASTHMA POLICY

Approved by:	Governing Body	Date: 1 May 2025
Last reviewed on:	Summer Term 2025	
Next review due by:	Summer Term 2026	
Signed:		

This policy is written with guidance from the Department for Health and deals specifically with the responsibilities of Kea School with asthma.

What is Asthma?

Asthma is the most common chronic condition, affecting one in eleven children. Children should have their own reliever inhaler at school to treat symptoms and for use in the event of an asthma attack. If they are able to manage their asthma themselves they should keep their inhaler on them, and if not, it should be easily accessible to them.

Common 'day to day' symptoms of asthma are:

- · Cough and wheeze (a 'whistle' heard on breathing out) when exercising
- Shortness of breath when exercising
- Intermittent cough

These symptoms are usually responsive to use of their own inhaler and rest (e.g. stopping exercise). They would not usually require the child to be sent home from school or to need urgent medical attention.

Signs of an asthma attack include:

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Being unusually quiet
- The child complains of shortness of breath at rest, feeling tight in the chest (younger children may express this feeling as a tummy ache)
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences. Some children will go very quiet.
- Appearing exhausted
- Blue/white tinge around lips
- Going blue

If a child is displaying the above signs of an asthma attack, the guidance below on responding to an asthma attack should be followed.

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE CHILD

- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed

WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler if not available, use the emergency inhaler.
- Remain with the child while the inhaler and spacer are brought to them.
- Immediately help the child to take two separate puffs of salbutamol via the spacer.

- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs.
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better.
- If the child does not feel better or you are worried at ANY TIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE.
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way.

Kea School has emergency Salbutamol inhalers to use in the event of an emergency, for children who have been diagnosed with asthma and has a prescribed inhaler or who have been prescribed an inhaler as reliever medication. They will only be used by children, for whom written parental consent has been received.

A child may be prescribed an inhaler for their asthma which contains an alternative reliever medication to Salbutamol (such as Terbutaline) The Salbutamol inhaler should still be used by these children if their own inhaler is not accessible - it will still help to relieve their asthma.

The Emergency Kit

The emergency asthma inhaler kit:

- a Salbutamol metered dose inhaler
- plastic spacer compatible with the inhaler

The school has two emergency asthma kits on site, one kept in central store and one in first aid room) in a labelled box.

The school has a register of children with asthma, which is kept in the school office and first aid room. Parents have completed the asthma consent form. Training for staff will be given to support them in administering the emergency inhaler. Parents/carers are notified by telephone if their child has used the emergency inhaler. Office staff check the emergency kit is in date and arrange for a replacement when needed.

Parents/carers are required to complete an annual asthma form.



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ASTHMA CONSENT FORM USE OF EMERGENCY SALBUTAMOL INHALER

Child showing symptoms of asthma / having asthma attack

1. I confirm that my child has been diagnosed with asthma and has been prescribed an inhaler.

2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.

3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:	Date:
Name of Parent (print):	
Child's name:	Class:
Parent's address and contact details: _	
Telephone:	
E-mail:	