

Asthma Policy

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1. Aims

In keeping with the Quaker ethos and philosophy and its obligations as a responsible educational establishment, Sidcot School aims to foster an environment that supports the integration and wellbeing of all students with Asthma.

Children with Asthma are encouraged to reach their full potential in all aspects of Sidcot School life.

2. Objectives

- All staff and students are aware that Asthma is a common condition affecting many people.
- Sidcot School provides a safe and favourable environment for children with Asthma.
- · All children with Asthma have immediate access to their reliever inhaler and spacer
- All Students diagnosed with Asthma are listed in the school Asthma Healthcare Plan.
- All boarding students diagnosed with asthma are reviewed by their own GP. If a boarding student is
 diagnosed with Asthma whilst at Sidcot, and by the school GP, they will receive an annual asthma review
 at Sidcot by the GP
- Emergency arrangements are in place to support students with Asthma.

3. Scope

This policy applies to all children receiving education at Sidcot School including boarders, EYFS, Junior School and Senior School (including Sixth Form).

This policy applies wherever staff or volunteers are working with students, even where this is away from the school, for example on an educational visit.

The terms 'child', 'children', and 'student' may be used interchangeably to refer to all those in our care. This policy is available on the school website, a hard copy can be provided free of charge from Sidcot School.

The term "guardian" refers to educational guardian.

The term parent refers to all those with parental responsibility for the child.

4. Education

- All staff and students are aware of the Asthma Policy.
- The Health Centre provides up to date information on Asthma and its management.
- The Health Centre provides annual updates to all school staff on Asthma Awareness.
- Children have the opportunity to learn about Asthma in Key Stages 1 + 2 of the National Curriculum

Students with a diagnosis of Asthma are included within the school asthma healthcare plan which is available to relevant staff on SIMS, a full healthcare plan will be activated if specific care needs are identified as part of this condition (please refer to the Supporting students with medical conditions and disabilities policy).

5. Environment

- Sidcot School will do all it can to ensure that the environment is favourable to children with Asthma.
- The School is a non-smoking site.
- As far as possible the School avoids using chemicals in Science, Technology and Art lessons that are
 potential triggers for children with Asthma, however staff working within these faculties are aware of any
 students with Asthma and able to recommend the student avoids close contact where Asthma triggers
 have been identified.

6. Medication

- All children with Asthma have immediate access to their reliever inhaler and spacer. Older students must carry their reliever inhaler with them at all times.
- Children who attend the Sidcot Junior School may carry their own inhaler and spacer when parents/staff agree they are competent to do so. The reliever inhaler and spacer will otherwise be kept in the classroom and clearly labelled with the child's name on it.
- · All school staff will let children take their own medication when they need to.
- Children with Asthma in the Boarding Houses may require regular preventative inhaler medication. This will be kept by the student in the Boarding House.
- An emergency inhaler and spacer device is available in the Health Centre, Senior School staff room, the Junior School staff room, The Pavilion and 2 in the Sports Centre; allowing for 1 emergency Inhaler kit to be taken to sports field when games lessons are taking place at the field.

7. Record Keeping

 It is the responsibility of parents/guardians to inform the School about their child's Asthma on admission and on an ongoing basis if there are any changes to the condition or medication, and provide the School with sufficient information about their condition, treatment, Asthma triggers, and any support they may need.

• It is the responsibility of the parents/guardians to inform the Health Centre of any changes to medication or Asthma treatment plan.

8. Physical Education

- Children with Asthma are encouraged to participate fully in PE/games/swimming lessons. Students whose Asthma is triggered by exercise are encouraged to take their reliever inhaler before that lesson and warm up for 5 minutes beforehand.
- The child's reliever inhaler will be available should they need to use it during a lesson.

9. Asthma Attack

All staff who come into contact with children with Asthma have received annual training and know what to do in the event of an Asthma Attack.

- Sit the student down and loosen any tight clothing.
- Offer the reliever inhaler and give 1 puff every 30 to 60 seconds up to 10 puffs.
- If you have a spacer device available then use it.
- If there is no improvement after 10 puffs or there is any deterioration with the child then call 999 for an ambulance.
- Call 999 again if the ambulance doesn't arrive after 15 minutes.
- Continue to stay calm and reassure the child.

If the student's own reliever inhaler isn't available, faulty or empty, and there is a consent from parents/guardians, administer the reliever inhaler from the Emergency Asthma Kit found in the staff room, sports hall, junior school, The Pavilion and Health Centre.

Parents/guardians are able to consent to the use of the emergency salbutamol inhaler in school through the Annual Medical Consent. A list of students with consent can be found in the Emergency Asthma Kits.

If the emergency inhaler is used:

Parents/guardians must be informed via phone or email. Following use, the spacer device must be disposed of. Staff must inform the Health Centre who will update the patient's record.

The used kit will be thoroughly cleaned and returned to its location by the Health Centre staff as soon as possible. All staff need to be aware of where the other emergency inhaler kits are found if the Health Centre is closed.

The emergency inhaler kits will be checked half termly by the Health Centre staff.

If the emergency inhaler is used, the Health Centre staff must be informed as soon as possible so a replacement spacer device can be returned to the box.

10. After an 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 (day students) or boarding house staff (boarders) must be informed about the attack.

11. References

Guidance on the use of emergency salbutamol inhalers in schools, March 2015.

12. Supporting Policies and websites

- 2.1 Safeguarding and Child Protection Policy
- 4.1 Medical Policy
- 4.2 Supporting Students with medical conditions, disabilities

Asthma - NHS (www.nhs.uk)

13. Policy review

This policy will be reviewed annually by the Senior Nurse, in conjunction with the Deputy Head Pastoral or earlier if incident occurs, or if changes to medical advice on asthma are made.

14. Document Change History

Date of change	Detail significant changes and any new legislation / guidance taken into account
	Board adopts policy – minor grammatical changes made
3.12.2016	Paragraph 6 – clarification of availability of inhalers in the Sports Centre / Sports Field
07.10.2017	Board reviews and adopts policy
07.10.2018	Policy reviewed, no changes required.
12.09.2019	Reviewed, Appendix 1 and 3 removed – Parents now consent to use of the emergency salbutamol inhaler in school through Annual Medical Consent. Information re Appendix 3 in body of policy.
05.10.2019	Reviewed and adopted by Board at the Annual Safeguarding Review.
21.09.2020	Policy reviewed and addition of changes re COVID-19
05.11.2020	Reviewed and agreed by the Pastoral Group.
08.02.2023	Reviewed by Senior Nurse, formatting updates only, removed reference to Covid 19
08.11.2023	Reviewed by Senior Nurse, removed Appendix 1 out of date form. Added references to spacers alongside inhalers.
04.06.2024	Reviewed by senior Nurse. Added NHS link to asthma
June 2025	Reviewed by Senior Nurse, no changes required