

St Clement's C of E Academy

Asthma Policy

Our vision is to inspire happy, courageous, independent, curious and creative life- long learners. We aim for all to achieve their full potential, striving both academically and socially with humility and dignity.

We believe that being anchored in Jesus Christ will guide us all with hope, compassion and wisdom in becoming successful members of a global community.

Learning for Life, Anchored in Christ

Serving the local community in the name of Christ since 1859

This asthma policy has been written with guidance from:

- Medication Guidance for Birmingham Schools
- Guidance on the use of emergency salbutamol inhalers in schools
- Managing Medicines in School and Early Years Settings, DfES/DH
- www.education.gov.uk/Academypupilsupport/pastoralcare/b0013771managing-medicines-in-Academy
- School Policy Guidelines, Asthma UK
- DFE Supporting Pupils at Academy with Medical Conditions
- Guidance for living safely with Covid 19 and other respiratory conditions
- And is to be read in conjunction with the St Clements First Aid –Medical Administration Policy.

1. St Clement's C. of E. Academy Policy Statement

St Clement's Academy recognises that asthma is a recognised medical condition, welcomes students with asthma and recognises their needs.

The Academy strives to ensure that students with asthma can participate fully in all aspects of Academy life. This includes P.E. Academy visits, and outings and other out of hour activities.

The Academy recognises that students with asthma will need immediate access to reliever (blue) inhaler at all times.

The Academy ensures that the whole Academy environment, including the physical, social and educational environment is favourable to students with asthma.

The Academy ensures that all staff (including supply) and support staff know what to do if an asthmatic student has an asthma attack.

2. Academy Admission

All parents/carers are asked to complete a medical form giving full details of the child's asthma, current medication and treatment details, emergency contact number and family G.P. details.

It is the responsibility of all parents/carers of students on the Academy Roll to notify the Academy of any changes in their child's treatment details. This will be noted on the child's Medical form kept in the school office.

Every student with an asthma diagnosis should have access to their reliever inhaler at all times and consent from parents to use a 'school emergency' inhaler if needed. For children's whose Asthma may lead to a 'Medical Emergency' Individual Care Plans will be created between the School Nurse/Specialists, Parent and Pastoral Manager for children with Asthma symptoms that they suffer from all year round. A list of seasonal Asthma or mild Asthma sufferers will be displayed on the Medical Board. All children with Asthma will have a 'Asthma Alert Card' completed by parents. This will be stored in the classroom medication box.

3. In the event of an asthma attack

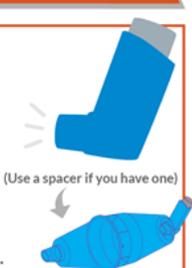
All staff must know how to deal with a student experiencing an asthma attack and undertake annual training delivered by the NHS School Nursing Team (refresher and 2 yearly full training).

The main symptoms of an asthma attack are continuous coughing, wheezing and increased shortness of breath.

In the event of an asthma attack the staff are to follow the procedure outlined in the asthma attack flow chart

What to do if a child is having an asthma attack

- 1 Help them sit up straight and keep calm.
- 2 Help them take one puff of their reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
- 3 Call 999 for an ambulance if:
 - their symptoms get worse while they're using their inhaler - this could be a cough, breathlessness, wheeze, tight chest or sometimes a child will say they have a 'tummy ache'
 - they don't feel better after 10 puffs
 - you're worried at any time.
- 4 You can repeat step 2 if the ambulance is taking longer than 15 minutes.



4. Safety and storage of asthma inhalers

All EYFS medication, including inhalers, are stored in a First Aid box located in the classroom, which is clearly labelled with the pupil's name. In KS1 And KS2 there is a medication box for each classroom. The medication is clearly labelled and is taken to P.E and Break/Lunch time.

It is the responsibility of parents/carers to ensure that their child's medication is in date and replenished as necessary.

Inhalers should not be stored where there is excessive heat or cold.

School stocks a spare inhaler in case of an emergency – this is located in the school office.

5. Exercise and activity

Students with asthma are encouraged to participate fully in all P.E lessons and sports activities, including swimming.

Some students with asthma may need to use their reliever inhaler before or after exercising.

Reliever inhalers must be readily available at all times during the academy day and including off site activities, e.g. swimming, trips.

6. Out of hours activities/residential activities

It is important that the Academy involves students with asthma as much as possible in after school activities.

Please refer to the Academy Educational Visits Policy.

7. Academy environment

The Academy does all that it can to ensure that the Academy environment is favourable to pupils with asthma.

There is also a no smoking policy in line with local authority and statutory policies and protocol.

8. Training

All staff should access asthma awareness training and receive regular updates so that they can recognise and know how to manage a student experiencing an asthma attack. They must know when and how to call a Paramedic ambulance and what to do whilst waiting for the ambulance to arrive. (Up to date training details: 18/09/24 NHS Nursing Team. Training will be renewed academic year 25/26).

9. Access and review of policy

St Clement's Academy Asthma Policy is accessible to all staff and the Academy community via the Academy's website and a hardcopy can be requested from the school office.

The board of governors will review this policy annually or sooner should guidance change.

Revised: D.Akers July 2025

Review Date: July 2026 (or sooner if guidance changes)