



Copnor Primary School

Asthma Policy

Governing Body approval gained in January 2026

Next review January 2027

Policy proposed for adoption by Matt Johnson, Headteacher

Headteacher's signature:

Chair of Committee signature:

This policy has been reviewed with advice from the Department for Education National Asthma Campaign, the Local Authority (Portsmouth City Council) and the National Health Service.

The school recognises that asthma is an important condition affecting many school children and positively welcomes all pupils with asthma.

The school encourages children with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, their employers (LA) and pupils. Supply teachers and new staff are also made aware of the policy. All other staff (support staff) working in school are made aware of the contents of the policy.

Medication

Immediate access to reliever inhalers is vital. The reliever inhalers are kept in individual named wallets in classrooms. All inhalers must be in their original dispensed packaging, complete with the child's name on it. The parent/carer will also need to complete the Parental Agreement for School to Supervise or Administer Medicine. (This document is available as Appendix 2 of the Illness and Medicine Policy.) Staff who administer medicine are insured by the Local Authority when acting in accordance with this policy. All school staff will let children take their own medication when they need to and are able to.

If a child has been diagnosed with asthma and does not have an asthma pump in school, the school reserves the right to refuse entry to that child. We will work with the parents/carers in order to ensure that an inhaler is in place for the child (and the school will use the school's emergency inhaler should this be required, provided the Consent Form use of emergency salbutamol inhaler Appendix 1 has been signed). If the child continues to present without an inhaler, the school reserve the right to refuse entry to the school for the child.

Record keeping

At the beginning of each school year, or when a child joins the school, parents/carers are asked if their child has asthma. A child with asthma will be recorded as being asthmatic in the school's management information system. All parents/carers of children with asthma are given a National Asthma Campaign School Asthma Card (Appendix 2) and letter (Appendix 2a) to give to their child's GP or asthma nurse to complete and return to the school. From this information, the school keeps its asthma register which is available for all school staff. If medication changes, parents/carers are asked to complete a new Parental Agreement for School to Supervise or Administer Medicine (Appendix 2 of the Illness and Medicine Policy).

In more serious cases, the Community Asthma Nurse may have written out a detailed plan and it is essential that parents supply the school with this.

However, it may be that the child's requirements have to change over the short-term (for instance if the child has a cold). If a temporary change is required, please complete a "Change of Asthma Treatment" form which is kept in reception (Appendix 3). The school will then act on these written instructions until they receive further notification from the parents. The parent/carer would simply be

required to complete another form to say that the child needs to return to the details on their normal asthma plan.

Within class, and where the emergency inhaler is stored, the Asthma Pump Administration Form (appendix 4) is also available and should be completed whenever the child has their inhaler in school. Teachers/support staff will monitor the use of inhalers and will seek advice from a first aider or the senior leadership team where they feel that the use of the inhaler is not managing their asthma. In such cases, parents/carers will be invited in to discuss with the teacher and advised to seek medical support.

The First Aider, with support from the office staff, is responsible for maintaining the asthma register.

PE

Taking part in PE and sports is an essential part of school life and should be the goal for all unless they are the most severely affected children with asthma or are having problems with the control of their asthma. All teachers are aware of which children have asthma in their class from the asthma register.

Teachers taking PE classes have an important role in supporting and encouraging pupils with asthma. They should:

- make sure that they know which children in their class have asthma
- be encouraging and supportive to pupils with asthma
- remind children whose asthma is triggered by exercise to take a dose of reliever medication a few minutes before they start the lesson
- encourage children with asthma to do a few short sprints over a five-minute period to warm up
- make sure those children have their reliever inhalers in the PE hall or the playground
- make sure that children who say they need their asthma medication take their reliever inhaler and rest until they feel better
- speak to the parents if they are concerned that a child has undiagnosed asthma
- make time to speak to parents/carers to allay their concerns or fears about children with asthma participating in PE

The school environment

The school does all that it can to ensure the school environment is favourable to children with asthma. The school does not keep furry and feathered pets and has a non-smoking policy. The school does not use chemicals in science and art lessons that are potential triggers for children with asthma. Children are encouraged to leave the room and sit in the office/ the shared area if particular fumes trigger their asthma.

Making the school asthma friendly

As the situation arises, other children in the class are made aware of the difficulties for children who have asthma and their need for regular medication. This would be reinforced through the science curriculum (the role of drugs as medicines). It can also be referred to in PE.

When a child is falling behind in lessons

If a child is missing a lot of 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 and inform the Headteacher. If appropriate the teacher will then talk to the school nurse and SENDCo about the situation. The school recognise that it is possible for children with asthma to have special educational 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.

1. Ensure that the reliever inhaler is taken immediately
2. Stay calm and reassure the child – hold their hand but do not put your arm round their shoulders as this restricts breathing
3. Help the child to breathe by ensuring tight clothing is loosened

4. The class teacher will always ensure that he/she takes the child's inhaler on a school trip with them in case an attack occurs

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/carers must be told about the attack and informed that the child has used their inhaler – a letter is sent each time the inhaler is given (Appendix 4a).

Emergency procedures

Call 999 if:

- The reliever has no effect after five to ten minutes
- The child is either distressed or unable to talk
- The child is getting exhausted
- You have any doubts at all about the child's condition

N.B. Each reliever inhaler is prescribed for an individual patient only and cannot be used by anyone else. Where a child does not have their asthma pump available, then the emergency inhaler should be used if Appendix 1 has been completed beforehand.

Use of Emergency Salbutamol Inhaler and using in place of Salamol

The Human Medicines (Amendment) (No 2) Regulations 2014 allows all primary schools to keep a salbutamol inhaler within school for use in emergencies (Appendix 1). Following advice from the School Nursing Team, where a child has been prescribed Salamol, the school is able to administer Salbutamol in the case of an emergency. It is the same medicine but is issued under a different name.

Whenever the emergency inhaler is used, the Notification to parents/carers of emergency salbutamol inhaler use letter (Appendix 1a) is sent home to inform the parents/carers of the reason for the use of the emergency inhaler.

Every month, the Emergency Inhaler Check (Appendix 1b) will be checked by the first aider, with support from the office. They will check whether the inhaler works (by releasing two 'puffs' from each of the pumps. They will check the general condition of the asthma pumps and their expiry dates).

Spacers

All spacers will be sent home at the end of each term so that parents/carer can wash them and return them to school.

At the end of each academic year all inhalers and spacers will be sent home so that parents/carers can check the inhalers contain sufficient medication and that they are still within the expiry date for the start of the next academic year.

Parents/carers should complete a new 'Parental agreement for school to supervise or administer medicine' form along with an asthma card and return it together with the inhaler and spacer to school on the first day of the start of the new academic year.

The school has a limited number of disposable spacers and their own spacers. These are available to be used when required (for example, where a child's spacer is at home or has been washed or waiting to be washed).

Spacers, after use, should be cleaned by washing through with water and then left to dry.

Infrequent asthma or asthma where the child does not require their asthma pump at school

Occasionally, some children only require their asthma pump at certain times of the year and/or they only require their asthma medication before or after school. In this circumstance, we ask the parent/carer to confirm this in writing using the Appendix 5.

Removal from the Asthma Register

Where a child is no longer considered to be asthmatic, then the parent/carer will be asked to complete Appendix 6. The child's records will show that they were once asthmatic but are no longer on the register.

Dissemination

All parents/carers of children with asthma will be given a copy of the policy. The policy will be sent to all new parents/carers of children with asthma. A copy of the Asthma policy can be found in the policies folder of our website.