

**ST PATRICK'S CATHOLIC PRIMARY SCHOOL, A
VOLUNTARY ACADEMY**



ASTHMA POLICY

**St Patrick's Catholic Primary School,
A Voluntary Academy**



**POLICIES & PROCEDURES
DOCUMENT CONTROL SYSTEM**

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St Patrick's Catholic Primary School, A Voluntary Academy

Mission Statement

'Belonging, caring and sharing, safe in the arms of God's love.'

We aim to promote the overall growth of the child.

To achieve this aim, we will:

- provide a safe, secure and caring environment
- allow children to experience the feeling of success
- develop the confidence to face new challenges
- establish a sense of belonging
- foster social, spiritual, academic and moral development
- strive towards the highest standards
- create an environment which develops each individual to his/her full potential

We aim to establish a working relationship in partnership with home, school, parish, diocese and the wider community.

To achieve this aim, the school will:

- provide a sense of direction
- establish and maintain a sense of trust
- promote co-operation between members
- develop a code of conduct
- be guided by the Bishop, under the principles of Our Lady of Lourdes Trust

ST PATRICK'S CATHOLIC PRIMARY SCHOOL, A VOLUNTARY ACADEMY

ASTHMA POLICY

AIMS:

To ensure the school creates a safe environment for children with Asthma.
To raise staff awareness about Asthma, its causes, symptoms and treatments.

EXPECTATIONS:

School will...

1. Hold a register of all children who suffer from Asthma. This will be updated annually and be provided for the relevant staff at the start of each year, or at a time when a child may be diagnosed during the school year, or joins St Patrick's from another school.
2. Ensure that children's inhalers are kept securely in the school office and are easily accessible at all times.
3. Make sure all inhalers are always taken on school trips/swimming etc.
4. Ensure that all staff are familiar with the protocol for use of inhalers.

This will include:-

- Signs and symptoms of Asthma.
- Instructions for treatment.
- Monitoring of response to treatment.
- When to seek help (emergency services).
- How to seek help (dial 999).
- Notification of attacks to parents.
- Record keeping.
- Inhalers to be labelled.

Parents will...

1. Inform the school office staff that their child has diagnosed asthma – on entrance to school or as soon as the condition is diagnosed if it occurs at other points during their school life.
2. It is the responsibility of parents to inform school immediately that any circumstances change regarding their child's asthma, whether they are to change to stronger medication or whether they officially no longer require an inhaler. This should be done in writing for school records.
3. Ensure that their child has charged and working inhalers, within date and arrange for the prompt renewal when empty.
4. Ensure that their child has two reliever inhalers, a spare one to be kept at school (in an identified known safe place) and one to use at home.
5. Ensure all inhalers are clearly marked with their child's name.
6. Encourage self-medication, except for very young children or children with 'Special Needs'.

PROCEDURES IN THE EVENT OF AN ASTHMA ATTACK

What is Asthma?

This is a distressing condition in which the muscles of the air passages go into spasm and constrict, making breathing (particularly breathing out) very difficult. Asthma attacks can be triggered by an allergy or nervous tension. The majority of these drugs act to dilate the air passages, easing breathing. Teachers need not worry that a child may overdose on his/her medication – reliever medication will not be harmful however much is used – you cannot overdose on an inhaler.

Signs and Symptoms

There may be one or several of the following:-

- Difficulty in breathing, with a markedly prolonged breathing-out phase.
- Tightness of chest.
- Wheezing as she/he breathes out.
- Distress and anxiety – she/he may only speak in whispers and with difficulty.
- Blueness of the skin.

TREATMENT

Your aim is:

To ease breathing. To seek medical aid if necessary.

1. Ensure reliever inhaler (usually blue) medication is taken (this should quickly open up narrowed air passages).
2. Reassure and calm the child.
 - DO NOT LIE THE CHILD ON HER/HIS BACK. Sit her/him down, leaning slightly forward and resting on a support.
 - DO NOT PUT YOUR ARM AROUND THE CHILD'S SHOULDER as this is very restrictive – but hold her/his hand for comfort.
3. Encourage the child to breathe slowly and deeply.
 - Loosen tight clothing around the neck and offer a warm drink.

After the attack

Minor attacks should not interrupt a child's involvement the curriculum. As soon as they feel better they can return to school activities.

CALL AN AMBULANCE IF:-

- The reliever has no effect after 5-10 minutes.
- The child is distressed or unable to talk.
- The child is getting exhausted.

FOR EMERGENCY USE ONLY: The school holds one inhaler kits for emergency use only, which are stored in the school's staff room. In the event of these being needed, parental permission should be sought beforehand. Should this not be possible, medical advice should be sought prior to use.