

Applecroft School



Asthma Policy

Person Responsible:	Finance & Business Manager
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Asthma Policy

Contents:

Introduction	3
Glossary of terms	3
Rationale	3
Asthma flow chart	6
Annual update letter	7
Asthma Questionnaire	8-9
Asthma Maintenance Plan	10
My Asthma Plan	11
How to Recognise An Asthma Attack	12
What to do in the event of an Asthma attack	13
Model letter inviting parents to contribute to individual HCP development	14
Individual healthcare plan	15-16
Parental agreement for setting to administer medicine	17-18
References and further reading	19

Introduction:

School Vision:

'To be a positive and inspiring community that nurtures each individual and empowers leaders for life'.

School Mission Statement:

'Nurturing Potential, Inspiring Minds, Changing Lives'

School Values:

- Ambition and Leadership
- Kindness and Supportiveness
- Respect and Honesty
- Determination and Resilience

Glossary of Terms:

Schools - this guidance uses the word schools to mean all state, free and academy schools in Hertfordshire that have chosen to use this guidance. This term also applies to nurseries and early years settings.

Public Health Nursing Staff - individuals employed by Hertfordshire Community NHS Trust working in Health Visiting and School Nursing Teams. Staff includes School Nurses, Health Visitors and Community Staff Nurses and Nursery Nurses.

Rationale:

The asthma guidance in this policy has been developed to provide information for the day to day care and management of pupils with asthma. This guidance will enable children with a diagnosis of asthma to participate fully through access to the whole curriculum, and through working in partnership with parents/carers and healthcare professionals.

This guidance is in line with the recommendations of the British Thoracic Society (2019) and Asthma UK (2014) for the management of children with Asthma in the school environment.

The Questionnaire is a tool completed by parents/carers to identify children who have **severe asthma** and who will require a healthcare plan to be set up.

It will also inform the school/nursery of the medication being used to control the child's asthma symptoms with instructions for use of the inhaler/s brought into school/nursery through the Asthma Maintenance Plan (Appendix 2).

An individual Healthcare Plan (HCP) for severe asthma will be set up for children/young people who have been identified through the questionnaire. A health professional may be invited to attend the care plan meeting and / or contribute information for those with **severe asthma**.

Guidance on the use of the schools "Emergency Salbutamol Inhalers" is detailed in the school "Administering Medicines policy" and complies with The Human Medicines (Amendment) (No 2) Regulations, 2014.

Persons operating under this guideline are as follows:

- Hertfordshire Community NHS Trust (HCT)
- Doctors
- Teachers
- School/nursery support staff
- Parents/carers
- Children /young people with asthma

The following roles and responsibilities have been identified:

Applecroft School will:

- Hold a register of pupils with asthma and encourage parents / carers to complete the asthma questionnaire.
- Ensure key school staff members are aware of pupils with asthma within the school.
- Inform the child's parent/carer if a pupil has an asthma attack or if they have concerns regarding their asthma management.
- Take the appropriate emergency measures for dealing with an asthma attack as outlined in 'WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK'.
- Hold a Salbutamol Inhaler for emergency use.
- Facilitate, and in partnership with the School Nurse/Health Visitor, complete a care plan for pupils with severe asthma.
- Ensure that where pupils do not carry their own inhalers, staff will ensure inhalers are kept in a safe but readily accessible place known to all staff, this includes the emergency inhalers.
- Ensure all key staff have been provided with the opportunity to partake in annual training concerning asthma.
- Display the 'WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK' in designated agreed areas within the school
- Take reasonable steps to reduce potential trigger factors influencing asthma within the school environment e.g. classroom plants and pets.
- Remind children with asthma partaking in PE or going off the school site for activities or school trips to take their inhalers with them and ensure the inhalers are taken on school trips (this responsibility would normally be shared with staff and children).
- Provide indemnity insurance for teachers and other school staff who volunteer to administer medication to pupils with asthma who need help.

Hertfordshire Community NHS Trust (HCT)

- Will work in partnership with parents, pupils, head teachers, school/nursery staff and other key healthcare professionals as required.

The Pupil with Asthma

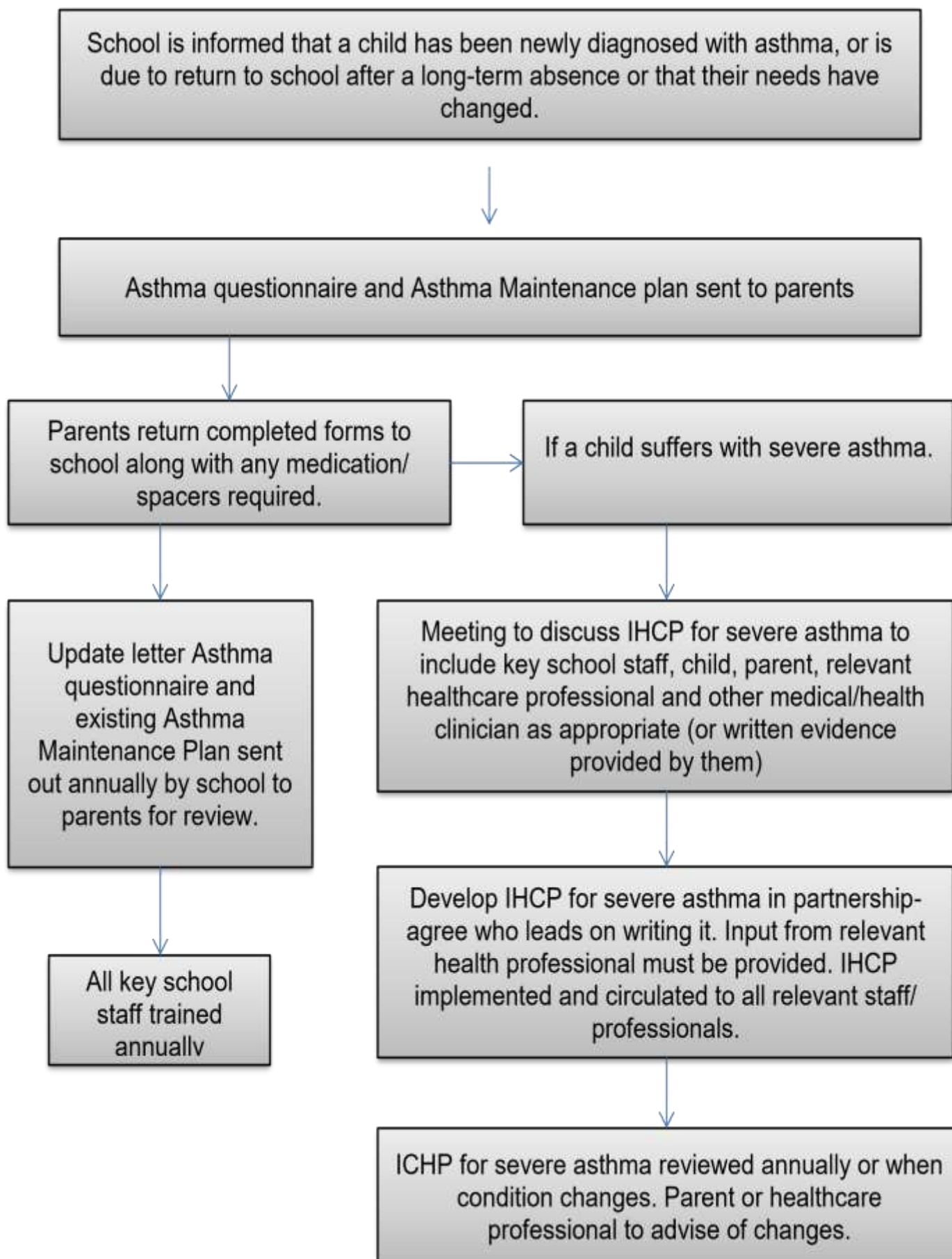
- Should be encouraged to take responsibility for their own asthma management.
- Should know how and when to take their reliever inhaler (normally blue) and spacer with support from an adult.
- Should inform a member of staff if he/she becomes unwell at school.
- Should care for their inhaler in a safe manner.
- Should remember to take their inhalers to PE lesson/off site activities.

The Parents/Carers of pupils with Asthma

- Must inform the school/nursery if their child has asthma.
- Should complete the asthma questionnaire and return it to the school/nursery office.
- Must inform the school/nursery of any relevant changes to their child's asthma status or changes to medication and update their child's Asthma Maintenance plan
- Should ensure at least one reliever inhaler (normally blue) and spacer - two maybe required in particular circumstances - has been supplied to the school/nursery, with the child's full details clearly labelled on the inhaler and spacer.
- Must ensure their child's inhaler/s in school/nursery are in date and replaced as and when necessary following communication from the school. Parents/carers should ensure the spacer is cleaned regularly.
- Must communicate any concern about their child's asthma care in school/nursery to the Headteacher/class teacher.

Asthma Flow Chart:

Adapted from '[Model process for developing individual healthcare plans, \(supporting pupils at school with medical conditions, 2015\)](#)'.



Annual update letter to understand the needs of the children with Asthma in School:

To enable the safe management of children with Asthma at Applecroft School, we need to have up to date information from the parent/carer. Below is the letter we send to parents/carers to assist us decide if a child needs a care plan for managing severe asthma or a maintenance plan.

Applecroft School



Dear Parent/Carer,

Re: Asthma Care in school

As a school we are committed to meeting the individual needs of all children as far as possible. With this in mind, and in order to comply with the requirements of the **Hertfordshire Schools Asthma Policy** we would be most grateful if you would kindly complete the enclosed questionnaire regarding your child's asthma and return the form to the school.

The information will be used by staff in school to provide appropriate care and support during school hours for your child.

Additionally we request that any **inhalers must be clearly labelled with your child's name and date of birth**, and remind you that it is the parents/carers responsibility to ensure that inhalers are in date and replaced as needed.

Thank you for your co-operation.

Yours sincerely,

Mrs Lisa Withe
Headteacher

Applecroft School



ASTHMA HISTORY QUESTIONNAIRE

About your child's asthma

Child's Name		Date of Birth		Male/Female
Address		Home Phone		
		Mobile Phone		
		Work Phone		
GP (Doctor) Name				
GP Address			GP Phone	

1	When was your child diagnosed with Asthma?			
2	What triggers your child's Asthma (if known)			
3	Is your child's Asthma? (please tick):	Mild (uses reliever blue inhaler)	Moderate	Severe (uses preventer, regular reliever and other)

		occasionally)	(uses preventer and occasional blue inhaler)	medication)
4	Does your child have disrupted sleep due to his/her Asthma? (please tick as appropriate):	Rarely	Occasionally	Frequently
5	How many times (if any) has your child attended the accident and emergency (A&E) department with an acute Asthma attack in the past year?	Not Attended	Once or more	Please state how many times
6	Who monitors your child's Asthma (if under the hospital please give name):			
7	How often is your child seen by the Hospital / GP/ Practice Nurse (please tick):	Only when he/she has an Asthma attack	3 - 6 monthly (or more frequent basis)	Annual check by GP
8	What inhalers / medications has your child been prescribed?	Reliever (Name)	Preventer (Name)	Other (Name)
9	Can the family GP be contacted for information where required?	Yes	No	
Parent/Carer Signature:..... Date:.....				



Asthma Maintenance Plan

Name:			
Class:			
Name of reliever inhaler:			
Frequency of use:			
Does your child need his/her reliever inhaler before PE/sport?	Yes	No	
If yes how many puffs required?			
Does your child need assistance taking his/her inhaler:	Yes	No	
Does your child have a clear understanding as to when he / she needs to use their Inhaler:	Yes	No	
Does your child know where his /her inhaler is kept in school:	Yes	No	
Does your child use a spacer when using their inhaler?	Yes	No	
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.	Yes	No	
Additional Instructions:			
Parents/Carer signature:			
Date:			
Review Due:			

My Asthma Plan

Photo

Name: _____

Class: _____

I am **unwell**
I am getting a **cold**
My **blue inhaler** is **working**
using a spacer

I need to take my **normal inhaler every 4 hours**.
I take _____ puffs.

I am **well**
I have no **cough** or **wheeze**
I am doing normal
activities

I need to take my **normal reliever medication** as needed
and before exercise.
I take _____ puffs.

I am very unwell
My blue inhaler is not lasting
4 hours and not working
within 15 minutes

I need to increase my inhaler
to _____ puffs given via the
spacer
CALL 999

**My parent / carer has given permission for you to use
an emergency inhaler if mine runs out**

Applecroft School



HOW TO RECOGNISE AN ASTHMA ATTACK

The signs of an asthma attack are:

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- 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
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)

**CALL AN AMBULANCE IMMEDIATELY AND COMMENCE
THE ASTHMA ATTACK PROCEDURE (see below)
WITHOUT DELAY IF THE CHILD**

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

Applecroft School



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
- 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 ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs as above.

Applecroft School



Dear Parent/Carer of

From the information you have given us in the Asthma Questionnaire, we would like to set up an Individual Healthcare Plan for Severe Asthma for your child.

The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx.

I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend.

The meeting will involve [the following people].

Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other information you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you to contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely,

Mrs Lisa Withe
Headteacher

Applecroft School



Individual Healthcare Plan for a Pupil with Medical Needs

Name:	
Date of birth:	
Condition:	
Class:	
Family Contact 1:	Family Contact 2:
Name:	Name:
Relationship to Child:	Relationship to Child:
Phone Number:	Phone Number:
Work:	Work:
Home:	Home:
Mobile:	Mobile:
Name of medication:	
Dose and method of administration:	
Administered by who:	
When to be taken:	
Side effects:	

Describe condition/medical needs: (give details of pupil's individual symptoms, triggers, signs, treatment, facilities, equipment or devices, environmental issues etc. and when first presented with medical need):

Daily care requirements (e.g. before sport/at lunchtime):

Describe what constitutes an emergency for the pupil, and the action to take if this occurs:

Follow up care:

Who is responsible in an Emergency (state if different on off-site activities):

Plan developed with:

Form copied to:

Date HCP written:

Review date:

Parent/Carer Signature:

Applecroft School



Parental agreement for setting to administer medicine/inhaler/AAI

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by				
Name of school/setting				
Name of child				
Date of birth				
Group/class/form				
Medical condition or illness				
Medicine				
Name/type of medicine <i>(as described on the container)</i>				
Expiry date				
Dosage and method				
Timing				
Special precautions/other instructions				
Are there any side effects that the school/setting needs to know about?				
Self-administration - y/n				
Procedures to take in an emergency				
NB: Medicines must be in the original container as dispensed by the pharmacy				

Contact Details

Name of Parent/Carer

Daytime telephone no. of parent/carer

Home Address

Name of GP and Practice

Phone number of GP

I understand that I must deliver the medicine personally to

[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Use of the school's emergency inhaler or adrenaline auto-injector:

The school holds, for emergency use only, a spare salbutamol inhaler and a spare Jext adrenaline auto-injector.

The spare salbutamol inhaler can only be administered to children who have either been diagnosed with asthma or prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

The school's spare AAI can only be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay.

For the school to administer either the spare inhaler or AAI to a child already in receipt of prescribed medication we require written parental consent.

I give consent for the school to use the spare salbutamol inhaler

YES

NO

<input type="checkbox"/>
<input type="checkbox"/>

<input type="checkbox"/>
<input type="checkbox"/>

I give consent for the school to use the spare Jext AAI

Signature(s) _____

Date _____

References and Further Reading:

Asthma UK www.asthma.org.uk/

Department of Education (2014) Guidance on supporting pupils with medical conditions. Available at: <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3> (Accessed: 16.12.2014).

Department of Education (2014) Guidance on the use of Emergency Salbutamol Inhalers in School. Available at <https://www.gov.uk/government/publications/emergency-asthma-inhalers-for-use-in-schools> (Accessed: 16.12.2014).

Includes arrangements for the supply, storage, care and disposal of the emergency Salbutamol inhaler

The Human Medicines (Amendment) (No 2) Regulations 2014:
<http://www.legislation.gov.uk/uksi/2014/1878/contents/made>