Wistow Parochial C of E Primary School

Head Teacher: Carla Cox

Asthma Policy

Document Status		
Date of Next Review	**July 2027**	**Responsibility – Full Governing Body**
Date of Policy Creation	**July 2026**	Responsible Governor Name
Date of Review and Ratification at FGB Meeting	**July 2026**	**Allen Blake**
Policy Publication/Communication ☒ Shared staff network drive ☒ Updates to staff in staff meetings		*Signed off by the above named Governor during the full governing body meeting held on the date stated as ratified.*

Introduction

This policy has been developed with guidance from the Department for Education, Asthma UK and local healthcare professionals to ensure the very best support for our children and young people.

At Wistow School, we understand that asthma is a common and sometimes serious condition, and we are committed to supporting all those affected. We recognise that each child's needs are unique, and that for some, asthma may be more complex due to underlying health conditions such as chronic lung disease. We are dedicated to working sensitively and thoughtfully to ensure every child's health needs are fully understood and carefully managed.

We know how important it is for children and young people with asthma to feel safe and confident in school. For this reason, we ensure that reliever inhalers are always accessible, and emergency salbutamol inhalers and spacers are available in each

main office. We also maintain an up-to-date record of all pupils with asthma so that support is always consistent and responsive.

Wistow School warmly welcomes and fully includes children and young people with asthma in every aspect of school life. We are committed to helping each child thrive and reach their full potential, supported by a clear and well-understood policy shared across our school community, including all temporary staff.

Asthma Medicines

Immediate access to reliever inhalers is essential. Inhalers are stored in labelled boxes in each classroom and travel with pupils throughout the school day and on visits (e.g. PE and trips). On residentials, pupils usually carry their own inhalers, though an adult may take responsibility where needed. Most pupils require adult support to recognise symptoms and use their inhaler, so trained staff with positive relationships are always available.

Each box contains the inhaler, spacer and a recording book to track usage. Records are reviewed termly by the nursing team to identify any concerns. Parents/carers must provide clearly labelled, in-date inhalers and dosages.

Trained staff administer medication where required, while encouraging pupils to self-manage where possible. Additional treatments (e.g. nebulisers) are securely stored, administered by trained staff and recorded on a MAR chart.

Inhalers must remain easily accessible at all times, including during activities outside the classroom. Staff are responsible for ensuring medicines are in date, equipment is maintained, and replacements are requested promptly. Spacers and masks are cleaned and cared for following hygiene and infection control guidance.

Record Keeping

Pupils with asthma are identified through new starter forms, reviewed by the office and nursing teams, and added to the asthma register. This register is maintained by the school nursing team, who monitor asthma alongside any other medical needs.

A designated admin team member ensures class teachers and GTAs are informed and that records are updated on the school system (ARBOR). Staff are reminded annually which pupils have asthma.

Parents/carers confirm asthma status annually and update the school of any changes to medication or dosage. Action plans, where in place, are stored with pupil records and a copy in the medication box. All inhalers must be clearly labelled, dated and include pharmacy instructions.

Exercise and Activity (PE and Games)

All staff are aware of pupils with asthma. Pupils are encouraged to take part fully in all activities, with support tailored to individual needs. Those with exercise-induced asthma are supported to use their inhaler before or during activity as needed.

Out-of-Hours Sport

The school promotes full participation in sport, recognising its health benefits for all pupils, including those with asthma. After-school activities are led by trained staff who know the pupils well and have access to medication and school procedures.

School Environment

At Wistow School, we recognise that many pupils have vulnerable chest health and may be affected by environmental triggers such as temperature extremes and air pollution. We take all reasonable steps to create a supportive environment, including a strict no-smoking policy and avoiding teaching resources that may trigger asthma.

When to Seek Further Advice

If a pupil frequently misses school or appears consistently tired due to asthma symptoms, the class teacher will discuss this with parents/carers and, where appropriate, seek advice from the school nurse.

Asthma Attacks

All staff working with pupils are trained to recognise and respond appropriately in the event of an asthma attack.

Emergency Salbutamol Inhalers

The school holds emergency salbutamol inhalers for use if a pupil's prescribed inhaler is unavailable (e.g. lost, empty or broken). These are only used with written parental consent for pupils diagnosed with asthma or prescribed a reliever inhaler. Salbutamol may be used even if a pupil usually uses an alternative reliever, as it can still be effective in an emergency.

Arrangements for the safe storage, use and disposal of emergency inhalers follow school policy.

Emergency Kit

Each emergency asthma kit includes:

- A salbutamol inhaler
- A spacer (reusable and washable)
- Clear instructions for use, cleaning and storage
- Manufacturer's information

- A checklist of emergency inhalers (with batch numbers and expiry dates)
- A record of administration

Recording Inhaler Use

All inhaler use must be recorded, including when, where, how much was given and by whom. Parents/carers should also be informed in writing via the home–school contact book.

Roles and Responsibilities

Employers must ensure the health and safety of staff and pupils, including off-site activities. They are responsible for maintaining, monitoring and reviewing the asthma policy, communicating its effectiveness, and providing indemnity for staff administering medication.

The Head Teacher is responsible for:

- Developing and implementing the asthma policy with relevant professionals
- Ensuring clear communication with staff, parents/carers and partners
- Identifying and meeting staff training needs
- Ensuring all staff, including temporary staff, understand the policy
- Monitoring its effectiveness
- Delegating staff to maintain the asthma register and check inhaler expiry dates

All School Staff must:

- Understand the asthma policy and know which pupils have asthma
- Recognise and respond to asthma attacks
- Ensure quick access to inhalers at all times
- Inform parents/carers of attacks or increased inhaler use
- Ensure inhalers are taken on trips and during activities
- Be aware of fatigue linked to asthma symptoms
- Liaise with parents/carers, the school nurse and leadership if concerns arise

School Nurses:

- Support the development and review of the policy
- Provide staff training
- Monitor pupils' asthma alongside the school
- Maintain and share the asthma register
- Provide individual care plans and protocols

Responding to Asthma Symptoms and Attacks

Emergency salbutamol inhalers must only be used by pupils diagnosed with asthma and prescribed a reliever inhaler, as other conditions (e.g. allergic reactions or choking) can present similar symptoms.

Common symptoms include coughing, wheezing, shortness of breath, or intermittent cough, usually relieved by rest and the pupil's inhaler and not requiring urgent care.

Signs of an asthma attack include:

- Persistent cough or wheeze at rest
- Shortness of breath, chest tightness
- Difficulty breathing, fast breathing or nasal flaring
- Inability to speak in full sentences
- Unusual quietness or exhaustion
- Blue/white tinge around lips or going blue

Emergency action: Call an ambulance immediately if the pupil is exhausted, turning blue, or collapses.

Otherwise:

- Stay calm, reassure the pupil, and help them sit upright
- Use their inhaler (or emergency inhaler if unavailable)
- Give 2 puffs via a spacer, repeating every 2 minutes (up to 10 puffs)
- Stay with the pupil at all times

If there is no improvement or concern at any point, seek help. If the ambulance has not arrived within 10 minutes, repeat up to 10 puffs. Inform parents/carers once an ambulance has been called. A staff member will accompany the pupil to hospital until a parent/carer arrives.

Training and Staff Development (Asthma Support)

All staff will be supported to develop their knowledge and understanding of asthma to effectively meet the needs of pupils. This will include the regular sharing of information during staff meetings, opportunities for personal reading and professional development, and access to additional training where required. Where a pupil has specific or complex needs, targeted training will be provided to ensure staff can offer appropriate and confident support. To maintain high standards of care, updates and relevant information about asthma will be communicated routinely so that all staff remain informed and equipped to support every child with asthma safely and effectively.

Related Policies

This policy should be read alongside:

- Asthma UK School Policy Guidance
- Supporting Children with Medical Conditions Policy

Monitoring and Review

This policy is adapted to meet the needs of Wistow School and is monitored by the Full Governing Body.

Action plans to support children in school will be completed by parents and held on file in the office and a copy in the medical box in the child's classroom, so that all staff working with the child are aware of their Asthma indicators and medicine required to support at various times.

ASTHMA ACTION PLAN

Asthma and Allergy Foundation of America
aafa.org

Name:	Date:
Doctor:	Medical Record #:
Doctor's Phone #: Day	Night/Weekend
Emergency Contact:	
Doctor's Signature:	

Personal Best Peak Flow: _____

The colors of a traffic light will help you use your asthma medicines.

GREEN means Go Zone!
Use preventive medicine.

YELLOW means Caution Zone!
Add quick-relief medicine.

RED means Danger Zone!
Get help from a doctor.

GO

You have *all* of these:
- Breathing is good
- No cough or wheeze
- Sleep through the night
- Can work & play

Peak flow:
from _____
to _____

Use these daily controller medicines:

MEDICINE	HOW MUCH	HOW OFTEN/WHEN
For asthma with exercise, take:		

CAUTION

You have *any* of these:
- First signs of a cold
- Exposure to known trigger
- Cough
- Mild wheeze
- Tight chest
- Coughing at night

Peak flow:
from _____
to _____

Continue with green zone medicine and add:

MEDICINE	HOW MUCH	HOW OFTEN/ WHEN
CALL YOUR ASTHMA CARE PROVIDER.		

DANGER

Your asthma is getting worse fast:
- Medicine is not helping
- Breathing is hard & fast
- Nose opens wide
- Trouble speaking
- Ribs show (in children)

Peak flow:
reading below _____

Take these medicines and call your doctor now.

MEDICINE	HOW MUCH	HOW OFTEN/WHEN

GET HELP FROM A DOCTOR NOW! Your doctor will want to see you right away. It's important!
If you cannot contact your doctor, go directly to the emergency room. DO NOT WAIT.
Make an appointment with your asthma care provider within two days of an ER visit or hospitalization.

Any medication taken in school will be recorded on the form below

Administration of Medication Record

Sheet number……. (in chronological order)

School	**Wistow Parochial CE Primary School**	
Name of CYP		**DOB:** **Class/form:**
Name of medication		**Formula** e.g. tablets, liquid
Quantity received from parent		
Quantity returned to parent		
Dosage and times		
Any special instructions		

Date & time of administration	Dose given	Any reactions and any action taken by staff	Name of person(s) administering / supervising *(please print)*	Signature of person(s) administering / supervising	Additional information e.g. • Repeat prescription supplied • Medication returned to parent • Medication returned to pharmacy (Pharmacist signature required) • Parents signature (Early Years Children only)

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