

# TENBURY C.E. PRIMARY ACADEMY

## ASTHMA POLICY



'Therefore encourage one another and build each other up.'

1 Thessalonians 5:11

**Adopted: January 2026**  
**Next review: January 2028**

### **The Principles of our school Asthma Policy:**

- The School recognises that asthma is an important condition affecting many school children and welcomes all pupils with asthma
- Ensures that children with asthma participate fully in all aspects of school life including PE
- Recognises that immediate access to reliever inhalers is vital
- Keeps records of children with asthma and the medication they take
- Ensures the school environment is favourable to children with asthma
- Ensures that other children understand asthma
- Ensures all staff who come into contact with children with asthma know what to do in the event of an asthma attack
- Will work in partnership with all interested parties including all school staff, parents, governors, doctors and nurses, and children to ensure the policy is implemented and maintained successfully

This policy has been written with advice from the Department for Education, National Asthma Campaign, Herefordshire and Worcestershire Asthma guidance June 2025, parents/carers, the governing body and pupils.

1. This school recognises that asthma is an important condition affecting many school children and positively welcomes all pupils with asthma.
2. This 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 (the local authority) and pupils. Supply teachers and new staff are also made aware of the policy. All teachers and support staff are provided with asthma training on a regular basis. Mrs Lesley Newall, Asthma Lead, is responsible for all aspects of implementing this Asthma Policy.

### **Medication**

We have one labelled emergency kit which is kept in the school office. It contains 2 salbutamol metered dose inhalers, at least two spacers compatible with the inhaler, instructions on using the inhaler and spacer and instruction on cleaning and storing the inhaler and manufacturers information. A list of children permitted to use the emergency inhaler (the Asthma Register) and a record of any administration is also kept in the kit. In addition, a letter template to send to the parent informing them that the emergency inhaler/spacer has been used, is also included.

All information pertaining to children with inhalers in school, including expiry dates, is kept in the school office. A physical list is supplied to teachers at the beginning of each year and updated as needed throughout the year. Any usage is

documented so that it can be monitored when the inhaler is running out. Staff have been trained to administer the emergency inhaler and there are pictorial and written instructions in the emergency kit and in the classrooms.

Immediate access to a reliever inhaler is vital. All inhalers are stored in the individual classrooms. Children should always tell their class teacher or first aider when they need to use their inhaler. Records are kept each time an inhaler is used and recorded on the asthma record sheets in each classroom. This applies to all children on the asthma register within the school.

All inhalers must be labelled with the child's name by the parent/carer. School staff are not required to administer medication to children except in an emergency, however many of our staff are happy to do this. School staff who agree to do this are insured by the local authority/Academy Trust when acting in accordance with this policy. **All school staff will let children take their own medication when needed.**

### Record Keeping

At the beginning of each school year, or when a child joins the school, parents/carers are asked to inform the school if their child is asthmatic. All parents of children with asthma are required to complete a School Asthma Card (Asthma UK) (Appendix 1) and return it to the school. An Individual Health Care Plan is also completed for each pupil. From this information the school keeps an Asthma Register. This Asthma register is also kept in the emergency inhaler kits. If any changes are made to a child's medication it is the responsibility of the parents or carer to inform the school.

Asthma inhalers for each child are recorded on an Asthma Medication list, which reminds us of expiration dates, but it is the responsibility of the parents or carer to inform the school if medication is reaching its expiration date and to supply new medication. Each child's inhaler is kept in their own classroom in a named wallet containing their individual medication and asthma card.

All staff members are responsible for acquainting themselves with the triggers of a possible attack (allergies, colds, cough, cold weather) for each individual child in their care. All this information is found in their medication wallet along with their medication.

### PE

Taking part in sports is an essential part of school life. Teachers are aware of which children have asthma from the medical/asthma register. Children with asthma are encouraged to participate fully in PE. Teachers will remind children whose asthma is triggered by exercise to take their reliever inhaler before the lesson. Each child's inhalers will be labelled and kept in a box at the site of the lesson. If a child needs to use their inhaler during the lesson, they will be

encouraged to do so. Records are kept every time a child uses their inhaler and parents/carers will be informed the same day if a child is using their inhaler more than usual in school/outside of their normal treatment plan.

### **School Trips and Outside Activities**

When a child is away from the school classroom on a school trip, club, swimming, outside sport or PE, their inhaler should accompany them and be made available to them at all times. This is also the case for after school clubs. On an off-site visit, it is essential that the group leader ensures the adults on the visit are aware of the children with asthma and who will be carrying the inhalers, being mindful of the fact that children on the asthma register must have immediate access to their inhaler at all times. Again, records are kept every time a child uses their inhaler and parents/carers will be informed the same day if a child is using their inhaler more than usual in school/outside of their normal treatment plan.

### **Breakfast and After School Clubs**

All staff leading Breakfast and After School Clubs have a copy of the Asthma register available to them, which details the classes the children are in and where their inhalers can be found. An emergency inhaler box is also located in the school office for use in an emergency situation.

### **The School Environment**

Tenbury CE Primary Academy does all that it can to ensure the school environment is favourable to pupils with asthma. The school does not keep feathered animals and has a definite No-smoking Policy.

### **Staff Training**

- All staff will receive regular asthma updates: This 'Preventable' video, is shared with ALL staff every two years: [Preventable. A short film about asthma - YouTube](#)
- Specific asthma training (Tier 1) will be undertaken every two years by our teachers and school First Aiders: [Asthma \(Children and young people\) - elearning for healthcare](#)

(Last undertaken January 2026)

The following resources are also available:

- Managing an asthma attack: [A pupil is having an asthma attack - Beat Asthma](#)
- Supporting children with asthma: [Practical Advice, sports days and school trips - Beat Asthma](#)

The school ensures that all children understand asthma. Asthma can be included in Key Stages One and Two in Science, PSHE and PE of the National Curriculum. All students and staff members are encouraged to learn about asthma; information for children and teens can be accessed from the following website [www.asthma.org.uk](http://www.asthma.org.uk).

### **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/carers. If appropriate, the teacher will then talk to the school nursing team and special educational needs coordinator about the pupil's needs.

### **Asthma Attacks**

Children diagnosed with asthma, which can present as:

- Wheezing
- Coughing
- Shortness of breath

should be given 2 to 6 puffs of their reliever (blue) inhaler. If better, no action is required. If 6 to 10 puffs are needed, parents/carers need to be called and a child collected and seen by a medical professional the same day.

If little or no improvement after 10 puffs, **dial 999** but at the same time continue to give 10 puffs of inhaler every 15 minutes until medical help arrives or symptoms improve.

In the event of an ambulance being called, the pupil's parents/carers will always be contacted.

In the event of a pupil being taken to hospital by ambulance, they would always be accompanied by a member of staff until a parent/carer is present.

### **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 will be informed about the attack immediately.

### **Informing Parents/Carers of Emergency Salbutamol Inhaler Use**

Parents/Carers will be sent a letter informing them when an emergency Salbutamol inhaler needed to be used. (See Appendix 2)

## Appendix 1

# School Asthma Card

### To be filled in by the parent/carer

Child's name

Date of birth  DD  MM  YY

Address

Parent / carer's name

Telephone - home

Telephone - mobile

Email

Doctor/nurse's name

Doctor/nurse's telephone

This card is for your child's school. **Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year.** Medicines and spacers should be clearly labelled with your child's name and kept in agreement with the school's policy.

### Reliever treatment when needed

For shortness of breath, sudden tightness in the chest, wheeze or cough, help or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.

Medicine	Parent/carer's signature
<input type="text"/>	<input type="text"/>

If the school holds a central reliever inhaler and spacer for use in emergencies, I give permission for my child to use this.

Parent/carer's signature  Date  DD  MM  YY

### Expiry dates of medicines

Medicine	Expiry	Date checked	Parent/carer's signature
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Parent/carer's signature  Date  DD  MM  YY

## ASTHMA QUESTIONS?

Ask our respiratory nurse specialists  
Call **0300 222 5800**  
WhatsApp **07378 606 728**  
(Monday-Friday, 9am-5pm)  
AsthmaAndLung.org.uk

### What signs can indicate that your child is having an asthma attack?

### Does your child tell you when they need medicine?

Yes  No

### Does your child need help taking their asthma medicines?

Yes  No

### What are your child's triggers (things that make their asthma worse)?

Pollen  Stress   
Exercise  Weather   
Cold/flu  Air pollution

### If other please list

### Does your child need to take any other asthma medicines while in the school's care?

Yes  No

### If yes please describe

Medicine	How much and when taken
<input type="text"/>	<input type="text"/>

### Dates card checked

Date	Name	Job title	Signature / Stamp
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

To be completed by the GP practice

### Actions to take if a child is having an asthma attack

1. Help them to sit up – don't let them lie down. Try to keep them calm.
2. Help them take one puff of their reliever inhaler (with their spacer, if they have it) every 30 to 60 seconds, up to a total of 10 puffs.
3. If they don't have their reliever inhaler, or it's not helping, or if you are worried at any time, **call 999 for an ambulance.**
4. If the ambulance has not arrived after 10 minutes and their symptoms are not improving, repeat step 2.
5. If their symptoms are no better after repeating step 2, and the ambulance has still not arrived, **contact 999 again immediately.**



## Appendix 2

Name \_\_\_\_\_

Class \_\_\_\_\_

Date \_\_\_\_\_

Dear Parent/Carer,

This is to inform you that \_\_\_\_\_ needed to use the school emergency salbutamol inhaler /spacer whilst at school today because.

His/her salbutamol inhaler was empty/did not work

He/she did not have their own salbutamol inhaler in school.

He/she did not have a spacer in school

Please ensure that a new salbutamol (blue) inhaler is sent into school as soon as possible.

The spacer will now be kept for your child to use at school. As this was the school's emergency spacer, please can you make arrangements to replace this, as agreed, as soon as possible. (Your GP can prescribe this)

Yours \_\_\_\_\_