

# GORDON'S SCHOOL

## ASTHMA POLICY

The core principle that guides everything we do is **Putting Students First**.

### 1. Introduction

Asthma is a long-term condition that affects a person's airways – the tubes that carry air in and out of the lungs. Asthma tends to run in families, especially when there's also a history of allergies and/or smoking. When a person with asthma comes into contact with something that irritates their sensitive airways even more (an asthma trigger), it causes their body to react in three ways:

- the muscles around the walls of the airways tighten so that the airways become narrower
- the lining of the airways becomes inflamed and starts to swell
- Sometimes, sticky mucus or phlegm builds up, which can narrow the airways even more.

These reactions cause the airways to become narrower and irritated – making it difficult to breathe and leading to asthma symptoms, such as chest tightness, wheezing, or coughing.

The triggers vary between individuals, but common ones include viral infections, cold air, grass pollen, animal fur and house dust mites. Exercise and stress can precipitate asthma attacks in susceptible people.

In the UK, around 5.4 million people are currently receiving treatment for asthma. That's one in every 12 adults and one in every 11 children.

### 2. Symptoms and signs

Asthma attacks are characterised by coughing, wheeziness and difficulty breathing, especially on breathing out. The affected person may be distressed and anxious and, in severe attacks the person's skin and lips may become blue.

### 3. Medication and Control

There are several medications used to treat asthma. Some are for long term prevention and are used every day and others relieve symptoms when they occur. Most students' medication comes in the form of an inhaler. More severe asthmatics may also need to take tablet or nebulised medication.

As a school we recognise that asthma is a widespread serious but controllable condition. The school welcomes all students with asthma and aims to support these students in participating fully in school life.

#### **4. Management in school – Day Boarders**

- It is the parents' or guardians' responsibility to notify the school if their child suffers from asthma. Full details are required including the severity of asthma and the name and dosage of medication prescribed.
- All students with asthma must always carry their named reliever inhaler with them.
- The School Nurses produce an Asthma Register from the information provided by parents, which is available to all school staff on the school intranet, in the medical folder in each Boarding House and in each emergency asthma recovery kit.
- Children with asthma are encouraged to participate fully in P.E. Those children whose attacks are triggered by exercise should take their reliever inhaler 5 minutes prior to the start of the lesson and ensure they take part in the warmup exercises. Their reliever inhaler should always be accessible during the lesson.
- Students are advised not to take part in physical activities without their inhaler.
- Parents or guardians are politely asked to inform the school if their child has been unwell with an exacerbation of their asthma, particularly if they have required hospitalisation.

#### **5. Additional Management in School for Residential Boarders**

As well as the above in point 4, Residential Boarders will have an annual Asthma Review with the Asthma Nurse at West End Surgery. This will also include the administration of the Flu Vaccine if consent from a parent or the child is given, and if it has not already been given by the School Vaccinations Team. The School Nurses will monitor the compliance, efficacy and supply of prescribed inhalers and refer any concerns or requests to the School GP.

#### **6. In the event of a child having an asthma attack staff should follow the procedure below:**

- **Assist the child to take 2 puffs of their reliever (blue) inhaler straight away. Use a Spacer device if possible.** Shake the inhaler prior to use.

- **If there is no improvement, the student can continue to take 1 puff of the inhaler every 30-60 seconds, up to a total of 10 puffs.**
- **Stay calm and reassure the child.**
- **Loosen tight clothing. Do not put your arm around the student as this may restrict breathing.**
- **Encourage the child to breathe slowly and deeply.**
- **The student should sit upright rather than lie down.**
- **Call the School Nurse or a First Aider**
- **If there is no improvement after 10 puffs (10 minutes), the condition becomes worse or you are worried call 999. If an ambulance has not arrived within 10 minutes continue taking two puffs of blue inhaler (one at a time).**
- **An asthma attack is potentially life threatening and needs nursing or medical attention.**

## **7. Emergency Asthma Inhaler Kits**

The School now holds spare Salbutamol inhalers to be used in an emergency. This can only be used by a child who has been diagnosed with asthma or who has previously been prescribed an inhaler. If the child is having an asthma attack and their own inhaler is not available, broken or empty, then the school Emergency Asthma Inhaler Kit can be used. The kits also contains a register of Students with Asthma and a Spacer device. Using a Spacer device to administer the Inhaler improves the efficacy of the medication.

There are Emergency Asthma Inhaler Kits in; the Staffroom, Main Reception and the Sports Hub. The School Nurses check them regularly.

[Emergency asthma inhalers for use in schools - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/emergency-asthma-inhalers-for-use-in-schools)

**Julie Unsworth  
Lead School Nurse**

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