Ashperton Primary Academy Trust

Asthma Policy

SG49

Last amended 5th September 2026

Policy lifespan: 3 years. Next full review 4th September 2029

Contents:

Policy Abbreviations and Acronyms

DfE	Department for Education
PE	Physical Education
SENDCO	Special Educational Needs Coordinator

NB. Where the term "parent" or "parents" is used this includes those who act as carers or have parental responsibility.
NB. Staff roles noted within this policy may also include those staff performing that role in an 'Acting' capacity

Statement of intent

Ashperton Primary Academy Trust (APA) recognises that asthma is a serious but controllable condition and welcomes all pupils with asthma to our school. This policy sets out how APA ensures that pupils with asthma can participate fully in all aspects of school life including physical exercise, school trips and other out-of-school activities. It also covers how APA enables pupils with asthma to manage their condition effectively in school, including ensuring immediate access to reliever inhalers where necessary.

1. Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Equality Act 2010
- DfE 'Supporting pupils at school with medical conditions'
- Asthma and Lung UK 'Asthma at school and nursery'
- DfE 'First aid in schools, early years and further education'

Where legislation has been passed or updated during the shelf life of this policy, we will always apply the latest version available irrespective of the version quoted here.

This policy operates in conjunction with the following policies:

- Complaint's Policy and Procedure (GN9)
- First Aid Policy (HS2)
- Supporting Pupils with Medical Conditions Policy (SG4)
- Administering Medication Policy (SG20)
- Behaviour and Restorative Practices Policy (SG48)

2. Roles and responsibilities

The Trust Board has a duty to:

- Ensure the health and safety of staff and pupils is protected on school premises and when taking part in school activities
- Ensure that this policy, as written, does not discriminate against any of the protected characteristics, in line with the Equality Act 2010
- Handle complaints regarding this policy as outlined in APA's Complaint's Policy and Procedure
- Evaluate the policy's effectiveness after any significant incident and share the findings with all groups involved in the school community as appropriate
- Provide indemnity for teachers and other members of school staff who volunteer to administer medicine to pupils with asthma in need of help

The Headteacher has a responsibility to:

- Arrange for all members of staff to receive training on supporting pupils with asthma
- Monitor the effectiveness of this policy, reporting back on that effectiveness to the Trust Board and making necessary adjustments:
- Implement this policy with the help of school staff, school nurses and local guidance
- Ensure this policy is effectively communicated to all members of the school community
- Ensure all supply teachers and new members of staff are made aware of this policy and provided with appropriate training

- Ensure that first aiders are appropriately trained regarding asthma, e.g. supporting pupils to take their own medication and caring for pupils who are having asthma attacks
- Delegate the responsibility to check the expiry date of spare reliever inhalers and maintain their school's asthma register to a designated member of their staff

All school staff have a responsibility to:

- Read and understand this policy
- Know which pupils they come into contact with have asthma
- Know what to do in the event of an asthma attack
- Allow pupils with asthma immediate access to their reliever inhaler
- Inform parents if their child has had an asthma attack
- Inform parents if their child is using their reliever inhaler more than usual
- Ensure pupils with asthma have their medication with them on school trips and during activities outside of the classroom
- Ensure pupils who are unwell due to asthma are allowed the time and resources to catch up on missed school work
- Be aware that pupils with asthma may experience tiredness during the school day due to their night-time symptoms
- Be aware that pupils with asthma may experience bullying due to their condition and understand how to manage these instances of bullying
- Make contact with parents, the school nurse and their SENDCO if a pupil is falling behind with their school work because of their asthma

PE staff have a responsibility to:

- Understand asthma and its impact on pupils – pupils with asthma should not be forced to take part in activities if they feel unwell
- Ensure pupils are not excluded from activities that they wish to take part in, provided their asthma is well-controlled
- Ensure pupils have their reliever inhaler with them during physical activity and that they are allowed to use it when needed
- Allow pupils to stop during activities if they experience symptoms of asthma
- Allow pupils to return to activities when they feel well enough to do so and their symptoms have subsided (APA recommends a 10-minute waiting period before allowing the pupil to return)
- Remind pupils with asthma whose symptoms are triggered by physical activity to use their reliever inhaler before warming up
- Ensure pupils with asthma always perform sufficient warm-ups and cool-downs

Pupils with asthma have a responsibility to:

- Tell their teacher or parent if they are feeling unwell due to their asthma
- Treat the school's and their own asthma medicines with respect by not misusing the medicines and/or inhalers
- Know how to gain access to their medication in an emergency (as age appropriate)
- Know how to take their asthma medicine (as age appropriate)

All other pupils have a responsibility to:

- Treat other pupils, with or without asthma, equally, in line with APA's Behaviour and Restorative Practice Policy
- Understand that asthmatic pupils will need to use a reliever inhaler when having an asthma attack and ensure a member of staff is called immediately (as age appropriate)

Parents have a responsibility to:

- Inform APA if their child has asthma (this is identified on the online enrolment forms)
- Ensure APA has a complete and up-to-date asthma plan for their child
- Inform APA of the medication their child requires during school hours
- Inform APA of any medication their child requires during school trips, team sports events and other out-of-school activities
- Inform APA of any changes to their child's medicinal requirements
- Inform APA of any changes to their child's asthmatic condition, e.g. if their child is currently experiencing sleep problems due to their condition
- Ensure their child's reliever inhaler (and spacer where relevant) is labelled with their child's name
- Ensure that their child's reliever inhaler are within their expiry dates
- Ensure their child catches up on any school work they have missed due to problems with asthma
- Ensure their child has regular asthma reviews with their doctors or asthma nurse (recommended every 6-12 months)
- Ensure their child has a written Personal Asthma Action Plan at school to help APA manage their child's condition

3. Asthma medicines

Pupils with asthma give their inhalers to the school to be looked after. Inhalers are kept in the school's charge in a designated storage area in the classroom and taken to the activity with the child.

Parents will be required to label their child's inhaler with the child's full name and year group. Parents will ensure that APA is provided with a labelled spare reliever inhaler, in case their child's inhaler runs out, or is lost or forgotten.

Members of staff are not required to administer medicines to pupils, except in emergencies for asthma sufferers who have parental permission in place. Staff members who have volunteered to administer asthma medicines will be insured by APA's appropriate level of insurance which includes liability cover relating to the administration of medication.

Staff will administer the asthma medicines in line with APA's Administering Medication Policy. For pupils who are old enough and/or have sufficient capabilities and independence to do so,

staff members' roles in administering asthma medication will be limited to supporting pupils to take the medication on their own.

This policy is predominantly for the use of reliever inhalers. The use of preventer inhalers is very rarely required at school. In the instance of a preventer inhaler being necessary, staff members may need to remind pupils to bring them in or remind the pupil to take the inhaler before coming to school.

4. Emergency inhaler

APA keeps a supply of salbutamol inhalers for use in emergencies when a pupil who is known to be an asthma sufferer's own inhaler is not available. These are kept in the school's emergency asthma kits.

Emergency asthma kits contain the following:

- A salbutamol metered dose inhaler
- Two plastic, compatible spacers
- Instructions on using the inhaler and spacer
- Instructions on cleaning and storing the inhaler
- Instructions for replacing inhalers and spacers
- The manufacturer's information
- A list of pupils with parental consent and individual healthcare plans permitting them to use the emergency inhaler
- A checklist, identifying inhalers by their batch number and expiry date is kept on Medical Tracker
- A record of administration showing when the inhaler has been used is kept on Medical Tracker

APA buys its supply of salbutamol inhalers. The emergency inhaler should only normally be used by pupils, for whom written parental consent has been received and who have been either diagnosed with asthma or prescribed an inhaler as reliever medication. An exception to this would be where a pupil not known to suffer from asthma is experiencing the symptoms of an asthma attack and the 999-call handler has advised the use of the spare emergency inhaler without delay. Parental consent for the use of an emergency inhaler should form part of any pupil with asthma's individual healthcare plan.

When not in use, emergency inhalers are stored appropriately in the temperate conditions specified in the manufacturer's instructions, out of reach and sight of pupils, but not locked away.

Expired or used-up emergency inhalers are returned to the parent or a local pharmacy to be recycled. Spacers must not be reused in school but may be given to the pupil for future home-use. Emergency inhalers may be reused, provided that they have been properly cleaned after use.

In line with APA's Supporting Pupils with Medical Conditions Policy and First Aid Policy, appropriate support and training will be provided for relevant staff, e.g. first aid staff, on the use of the emergency inhaler and administering the emergency inhaler.

Whenever the emergency inhaler is used, the incident must be recorded in the corresponding record of administration and APA's records. The records will indicate where the attack took place, how much medication was given, and by whom. The pupil's parents will be informed of the incident in writing.

A designated staff member, appointed by the Headteacher, is responsible for overseeing the protocol for the use of the emergency inhaler, monitoring its implementation, and maintaining an asthma register.

The designated staff member who oversees the supply of salbutamol inhalers is responsible for:

- Checking that inhalers and spacers are present and in working order, with a sufficient number of doses, every 6 weeks
- Ensuring replacement inhalers are obtained when expiry dates are approaching
- Ensuring replacement spacers are available following use
- Ensuring that plastic inhaler housing has been cleaned, dried and returned to storage following use, and that replacements are available where necessary

Where there is a clear indication of a serious asthma attack occurring, and the pupil is not known to be an asthma sufferer, staff should call 999 and follow the instructions of the call handler, which may include administering the spare inhaler. The emergency inhaler should not be used for a pupil who is not a known asthma sufferer unless such a direction is given by the emergency services. Staff will make the pupil as comfortable as possible and await the arrival of a paramedic.

5. Symptoms of an asthma attack

Members of staff will look for the following symptoms of asthma attacks in pupils:

- Persistent coughing (when at rest)
- Shortness of breath (breathing fast and with effort)
- Wheezing
- Nasal flaring
- Complaints of tightness in the chest
- Being unusually quiet
- Difficulty speaking in full sentences

Younger pupils may express feeling tightness in the chest as a 'tummy ache'.

6. Response to an asthma attack

In the event of an asthma attack, staff will follow the procedure outlined below:

- Keep calm and encourage pupils to do the same

- Encourage the pupil to sit up and slightly forwards – do not hug them or lie them down
- If necessary, call another member of staff to retrieve the emergency inhaler – do not leave the affected pupil unattended
- If necessary, summon the assistance of a member of suitably trained first aid staff to care for the pupil and help administer an emergency inhaler
- Ensure the pupil takes two puffs of their reliever inhaler (or the emergency inhaler subject to parental consent being in place) immediately, preferably through a spacer
- Where the pupil is not a known asthma sufferer or parental permission is not in place, call 999 and request an ambulance, following any subsequent instructions from the call handler
- Ensure tight clothing is loosened
- Reassure the pupil

Staff will not administer any medication where they have not been trained to do so.

For a known asthma sufferer, if there is no immediate improvement, staff will continue to ensure the pupil takes 2 puffs of their reliever inhaler every two minutes, until their systems improve, but only up to a **maximum of 10 puffs**. If there is no improvement before the pupil has reached 10 puffs:

- Call 999 for an ambulance
- If an ambulance does not arrive within 10 minutes, the pupil can administer another 10 puffs of the reliever inhaler as outlined above

Staff will call 999 immediately if:

- The pupil is too breathless or exhausted to talk
- The pupil is going blue
- The pupil's lips have a blue or white tinge
- The pupil has collapsed
- The pupil is not a known asthma sufferer
- The pupil is a known asthma sufferer but does not have access to their own inhaler and no parental permission is in place
- You are in any doubt

7. Emergency procedures

Staff will never leave a pupil having an asthma attack unattended. If the pupil does not have their inhaler to hand, staff will send another member of staff or pupil to retrieve the spare inhaler. In an emergency situation, members of APA staff are required to act like a 'prudent parent', i.e. making careful and sensible parental decisions intended to maintain the child's health, safety and best interests, which includes contacting the emergency services and following their instructions.

As reliever medicine is very safe, staff will be made aware that the risk of pupils overdosing on reliever medicine is minor. Staff will send another pupil to get another member of staff if an ambulance needs to be called. The pupil's parent will be contacted immediately after calling an ambulance.

A member of staff should always accompany a pupil who is taken to hospital by ambulance and stay with them until their parent arrives. Generally, staff will not take pupils to hospital in their own car unless in exceptional circumstances, e.g. where a pupil is in need of professional medical attention and an ambulance cannot be procured.

In these exceptional circumstances, the following procedure will be followed in line with APA's First Aid Policy:

- A staff member will call the pupil's parents as soon as is reasonably practical to inform them of what has happened, and the course of action being followed – parental consent is not required to acquire medical attention from the emergency services in the best interests of the child suffering or suspected of suffering an asthma attack
- The staff member will be accompanied by one other staff member, preferably a staff member with first aid training
- Both staff members will remain at the hospital with the pupil until their parent arrives

8. Record keeping

At the beginning of each school year, or when a child joins APA, parents are asked to inform the school if their child has any medical conditions, including asthma, on their enrolment form.

APA keeps a record of all pupils with asthma, complete with medication requirements, in its asthma register. Parents will be required to inform the school of any changes to their child's condition or medication during the school year.

All emergency situations will be recorded, and staff practice evaluated, in line with the First Aid Policy.

9. Exercise and physical activity

Games, activities and sports are an essential part of school life for pupils. All teachers will know which pupils in their class have asthma and will be aware of any safety requirements.

Outside suppliers of sports clubs and activities are provided with information about pupils with asthma taking part in the activity via APA's asthma register.

Pupils with asthma are encouraged to participate fully in PE lessons when they are able to do so. Pupils whose asthma is triggered by exercise will be allowed ample time to thoroughly warm up and cool down before and after the session.

During sports, activities and games, each pupil's labelled inhaler will be kept in a box at the site of the activity. Classroom teachers will follow the same guidelines as above during physical activities in the classroom.

APA believes sport to be of great importance and utilise out-of-hours sports clubs to benefit pupils and increase the number of pupils involved in sport and exercise. Pupils with asthma are encouraged to become involved in out-of-hours sport as much as possible and will never be excluded from participation. Members of school staff and contracted suppliers will be aware

of the needs of pupils with asthma during these activities and adhere to the guidelines outlined in this policy.

10. The school environment

APA will do all that it can to ensure the school environment is favourable to pupils with asthma by:

As far as possible, not using any chemicals in art or science lessons that are potential triggers for asthma. If chemicals that are known to be asthmatic triggers are to be used, asthmatic pupils will be taken outside of the classroom and provided with support and resources to continue learning.

Monitoring and review

Lifespan of Policy: 3 Years

At any point this policy is updated or fully reviewed, it will be updated on the APA website

Any changes made by the Headteacher will be passed to the Trust Board for ratification and made available to staff and volunteers.

The next scheduled full review date for this policy is 4th September 2029.

Date approved by the Board of Trustees: 17th September 2026.