

Heritage Park Primary School

Asthma and Inhaler Policy



Approved by:	Senior Leadership Team
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Last reviewed on:	September 2026
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Next review due by:	September 2028
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Heritage Park Primary School

Asthma and Inhaler Policy

Introduction

Heritage Park Primary School recognises that asthma is a widespread, serious but controllable condition and the school welcomes all children with asthma. We ensure that children with asthma can and do fully participate in all aspects of school life, including PE, visits, outings or field trips and other out-of-hours school activities.

This is achieved through:

- Ensuring that children have access to their inhalers as and when required.
- Keeping a record of all children with asthma and the medicines they take.
- Creating a whole school environment, including the physical, social, sporting and educational environment, that is favourable to children with asthma.
- Helping all children to understand asthma as a medical condition.
- Ensuring all staff receive annual asthma training so that they are able to effectively support a child who is experiencing asthma symptoms.

The School's Approach

Inhalers are kept in a box in each classroom and labelled clearly with the child's name. Children have access to their reliever inhalers when they are required and a record is made when the child has used his or her inhaler. Staff who have administered the medication will complete the relevant form (Appendix 4). In addition, an email will be sent, or telephone call made, advising parents/carers that their child has needed to use their inhaler and how much has been administered.

A designated staff member is responsible for overseeing asthma care, equipment, and policy execution. Reminders will be given to the parents/carers when the date on medication is due to expire/has expired but primarily it is the responsibility of the parents to ensure that all medication kept in school is in date.

When a class leaves its usual classroom to take part in activities elsewhere within the school, such as a PE lesson, the member of staff accompanying the children will ensure that they have access to their inhalers. Similarly, when a class leaves the school site, for example to attend a swimming lesson or go on a class trip, the group leader will ensure that children have access to their inhalers throughout the activity.

During a fire alarm, staff will ensure that children's inhalers are taken outside with them. Children must only use their own prescribed inhaler, unless the school's spare emergency inhaler is required and is administered in accordance with the school's asthma policy.

When a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their admission form. If their child has asthma, parents/carers will need to provide the school with an up-to-date asthma card (Appendix 1) for their child. This should be reviewed at least annually and parents should ensure school are informed if there are any changes to their child's medication, treatment, symptoms or asthma management (Appendix 2). The school will ensure that the most recent version is held in their child's personal file so it is accessible to relevant staff. Previous cards will be sent home to parents/carers.

The school maintains an asthma register, which is available to all school staff on the staff room wall.

Where a child has a spacer to support the administration of their inhaler, it will be stored in a container alongside their inhaler. Parents must ensure they wash the spacer before its first use and staff will clean after each use, following the manufacturer's instructions.

Emergency Inhaler – Use, Storage and Maintenance

The school keeps a stock of emergency salbutamol inhalers for use in accordance with national guidance and this policy. The emergency inhaler is only to be used for pupils who have a diagnosis of asthma and whose parent/carer has provided written consent for its use. The emergency inhaler is intended for use where a pupil's own prescribed reliever inhaler is not available, for example because it has been lost, is empty or is otherwise inaccessible.

The emergency inhaler, together with the appropriate spacer(s), will be kept in the staffroom and will be readily available in an emergency. Additional emergency inhalers are available to be used on outings outside of school as required.

The emergency inhaler will be checked regularly by the designated member of staff to ensure that:

- It is within its expiry date;
- It is in good condition and in working order;
- Sufficient doses remain available;
- The inhaler and spacer are stored appropriately; and
- Replacement supplies are obtained when required.

A record of these checks will be maintained on a monthly basis or after each use (Appendix 3).

Cleaning and hygiene

Following use, the inhaler mouthpiece should be cleaned in accordance with the manufacturer's instructions and the school's infection-control procedures. Spacers should be cleaned and maintained in accordance with the manufacturer's instructions. Where a spacer is designated for individual use, it must not be shared between pupils. If a single-use spacer is provided, it should be disposed of appropriately after use. Reusable spacers should be cleaned as directed, allowed to air-dry and stored ready for future use.

Staff supporting a pupil during an asthma attack must follow the school's emergency asthma procedures. Staff must remain with the pupil, monitor their condition and seek emergency medical assistance where symptoms are severe, do not improve following treatment, or there is any concern about the pupil's breathing or safety.

After any use of the school's emergency inhaler, the staff member must inform a member of the Senior Leadership Team.

Common day to day symptoms of asthma

Common asthma symptoms include:

- **Wheezing** — a whistling sound, especially when breathing out
- **Coughing**, often worse at night or early in the morning
- **Shortness of breath** or feeling unable to get enough air
- **Chest tightness** or pressure
- Symptoms that **come and go**, sometimes triggered by exercise, cold air, allergies, smoke, or respiratory infections

These symptoms are usually responsive to use of their own inhaler and rest (e.g. stopping exercise). After treatment, and as soon as the child feels better, they can return to normal activity.

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)

However, a child may not display all of these signs and symptoms at once; e.g a child may only display one of these symptoms such as a persistent cough.

If the child:

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

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE BELOW WITHOUT DELAY:

What to do in the event of an asthma attack

- Use the walkie talkie 'code -green' to ask for medical assistance
- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler (or school's central reliever inhaler if consent has been given and own inhaler is not immediately accessible)
- Remain with the child while the inhaler (and spacer if they have one) are brought to them
- Immediately help the child to take two separate puffs of Salbutamol (or equivalent) (via the spacer if provided)
- 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 in the same way

The child's parents/carers should be contacted after the ambulance has been called. In the event that the ambulance arrives before the parent, a staff member will accompany the child to hospital and stay with them until a parent or carer arrives.

Inform the Senior Leadership Team after any asthma incident that has required emergency action.

Conclusion

Through an understanding of the causes and symptoms of asthma and through following this policy, we at Heritage Park Primary School aim to ensure that children with asthma are able to participate fully in all school activities.

Appendix 1 – School Asthma Card

School Asthma Card

To be filled in by the parent/carer

Child's name

Date of birth

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

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

Expiry dates of medicines

Medicine	Expiry	Date checked	Parent/carer's signature

Parent/carer's signature Date

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

Does your child tell you when he/she needs medicine?

☐ Yes ☐ No

Does your child need help taking his/her 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

Dates card checked

Date	Name	Job title	Signature / Stamp

To be completed by the GP practice

What to do if a child is having an asthma attack

- Help them sit up straight and keep calm.
- Help them take one puff of their reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
- Call 999 for an ambulance if:
 - their symptoms get worse while they're using their inhaler – this could be a cough, breathlessness, wheeze, tight chest or sometimes a child will say they have a 'tummy ache'
 - they don't feel better after 10 puffs
 - you're worried at any time.
- You can repeat step 2 if the ambulance is taking longer than 15 minutes.



Any asthma questions?
Call our friendly helpline nurses

0300 222 5800
(Monday-Friday, 9am-5pm)

www.asthma.org.uk

Appendix 2 – Annual update letter to parents

Dear Parent/Carer,

We are writing to ask you to complete and return the updated School Asthma Card for your child. Even if there have been no recent changes to your child's asthma needs, it is important that we receive a completed form each year so that our records remain accurate and up to date.

This form includes a section asking for your consent for staff to administer the school's central reliever inhaler in the event of an emergency, when your child's own inhaler is not immediately available. This ensures that we can act quickly and safely should your child experience asthma symptoms during the school day.

Please take a few minutes to complete the form and return it to school as soon as possible. If you have any questions or would like support completing the form, please contact the school office.

Thank you for your cooperation in helping us keep your child safe and well.

Kind regards,

[Name]

[Role]

Appendix 3: Emergency Inhaler Stock and Equipment Check

Date	Expiry Date	Spacer Available	Condition OK	Storage Accessible	Action Required	Checked by

Appendix 4: Inhaler Use Record

Date and Time	Pupil	No. of puffs	Spacer used?	999 called?	Parent/ Carer informed	Own inhaler/ school's emergency	Staff member