

Huntington

Community Primary School

Asthma Policy

2025

Signed by:

A handwritten signature in black ink, appearing to read "Rose".

Headteacher

Date: 11.06.25

A handwritten signature in black ink, appearing to read "Adrian".

Chair of Governors

Date: 11.06.25

Next review Summer 2028

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Statement of intent

Huntington Community Primary School recognises that asthma is a serious but controllable condition and welcomes all pupils with asthma. This policy sets out how the school ensures that pupils with asthma can participate fully in all aspects of school life including physical exercise, educational visits and other out-of-school activities,

It also covers how the school 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 (2015) 'Supporting pupils at school with medical conditions'
- Asthma UK (2020) 'Asthma at school and nursery'
- DfE (2022) 'First aid in schools, early years and further education'

This policy operates in conjunction with the following school policies:

- Complaints Policy
- Supporting Pupils with Medical Conditions Policy
- First Aid Policy

2. Roles and responsibilities

The Governing Board has a responsibility to:

- Ensure the health and safety of staff and pupils is protected on the 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 the school's Complaints Policy.
- Ensure this policy is effectively monitored and updated.
- Report any successes and failures of this policy to the headteacher, members of school staff, local health authorities, parents and pupils.
- 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:

- Create and implement the Asthma Policy with the help of school staff, the First Aid Lead, LA guidance and the governing board.
- Ensure this policy is effectively implemented and communicated to all members of the school community.
- Arrange for all members of staff to receive training on supporting pupils with asthma.
- Ensure all aspects of this policy are effectively carried out.
- Ensure all supply teachers and new members of staff are made aware of the Asthma Policy and provided with appropriate training.
- Monitor the effectiveness of the Asthma Policy.
- 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 the school's asthma register to the First Aid Lead (office staff will request new inhalers from parents when required).

- Report incidents and other relevant information to the governing board and LA as necessary.

All school staff have a responsibility to:

- Read and understand the Asthma Policy.
- Know which pupils they come into contact with have asthma.
- Know what to do in the event of an asthma attack (as outlined in sections [6](#) and [7](#)).
- 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 First Aid Lead and the 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, if this is felt necessary/requested by parents, and that they are allowed to use it when needed.
- For off-site activities, such as sporting events, the spare inhaler from the PE event bag should be taken, in addition to pupils' own inhalers.
- 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 (the school recommends a five-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.

The First Aid Lead has a responsibility to:

- Support in the creation and implementation of this policy.
- Provide information about where the school can procure specialist asthma training.
- Be on hand if a pupil with asthma is experiencing symptoms that require additional medical supervision.

- Ensure that documentation regarding pupils' asthma is stored to enable ready access (e.g. annually updated asthma cards are kept in the blue medical file, with a copy in the green file).

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.
- Know how to take their asthma medicine.

All other pupils have a responsibility to:

- Treat other pupils, with or without asthma, equally, in line with the school's Behaviour 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.

Parents/carers have a responsibility to:

- Inform the school if their child has asthma.
- Ensure the school has a complete and up-to-date asthma card for their child (download [HERE](#)).
- Inform the school of the medication their child requires during school hours.
- Inform the school of any medication their child requires during school trips, team sports events and other out-of-school activities.
- Inform the school of any changes to their child's medicinal requirements.
- Inform the school 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 and spare inhaler are within their expiry dates.
- Ensure their child catches up on any school work they have missed due to problems with asthma.
- Endeavour to obtain regular asthma reviews with their doctor or asthma nurse (recommended every 6-12 months).
- Ensure their child has a written personal Asthma Action Plan at school to help the school manage their child's condition (see guidance [HERE](#)).

3. Asthma medicines

Inhalers are given to the school to be looked after, and held in the pupil's classroom in the First Aid box (unless specifically requested by parents that their child retains their inhaler, due to the severity of their condition, allied with their own maturity).

Parents must label their child's inhaler with the child's full name and year group. Parents must ensure that the school is provided with a new reliever inhaler when requested to do so by the school.

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

Staff will administer the asthma medicines in line with the school's *Policy for the Administration of Medicines*. 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 (e.g. holding the spacer, counting or breathing with them).

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 inhalers

The school keeps 3 salbutamol inhalers for use in emergencies when a pupil's own inhaler is not available. These are kept in the school's **emergency asthma kits**, which are located as follows:

- MI Room for playground or PE lesson access
- Reception Oak classroom for EYFS playground and PE lesson access.
- MI Room for educational visits and off-site PE (in a labelled First Aid bag).

Emergency asthma kits contain the following:

- A salbutamol metered dose inhaler
- At least 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 checklist of inhalers, identifying by their batch number and expiry date, with monthly checks recorded
- A list of pupils with parental consent and/or individual healthcare plans permitting them to use the emergency inhaler
- A record of administration showing when the inhaler has been used

The school buys its supply of salbutamol inhalers from a local pharmacy.

An emergency inhaler should only 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.

(The symptoms of other serious conditions/illnesses, including allergic reaction, hyperventilation and choking from an inhaled foreign body, can be mistaken for those of asthma, and the use of the emergency inhaler in such cases could lead to a delay in the child getting the treatment they need)

A list of pupils with parental consent to use the emergency inhaler will be kept. 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 in the MI Room and in the Reception (Oak) classroom store, in the temperature 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 a local pharmacy to be recycled.

Emergency inhalers may be reused, if used with a spacer, provided that they have been properly cleaned after use (remove the inhaler canister, then wash the plastic inhaler housing and cap in warm running water, leaving them to dry in a clean, safe place). If the inhaler has been used without a spacer, creating a risk of contamination with blood, it should not be re-used but disposed of.

The plastic spacer should not be reused, to avoid possible risk of cross-infection. It can be given to the child to take home for future personal use.

In line with the school's *Supporting Pupils with Medical Conditions Policy* and *First Aid Policy*, appropriate support and training will be provided for relevant staff (e.g. First Aiders) 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 the school'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 by telephone and in writing (using the letter in [Appendix 1](#)).

The First Aid Lead is responsible for overseeing the protocol for the use of the emergency inhalers, monitoring its implementation, and maintaining an asthma register.

The First Aid Lead, 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, on a monthly basis.
- 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.

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 (e.g. breathing fast and with effort)
- Wheezing coming from the chest (when at rest)
- Nasal flaring
- Complaints of tightness in the chest (younger pupils may call this tummy ache)
- Being unusually quiet
- Difficulty speaking in full sentences

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 First Aider to help administer an emergency inhaler.
- Ensure the pupil takes two puffs of their reliever inhaler (or the emergency inhaler) immediately, preferably through a spacer.
- Ensure tight clothing is loosened.
- Reassure the pupil.

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

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.
- They 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 their spare inhaler, or the school's emergency inhaler. In an emergency situation, members of school 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).

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/carer 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/carer 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 the 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 in the best interests of the child.
- 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

When a child joins the school, parents/carers are asked to inform the school if their child has any medical conditions, including asthma, on their enrolment form.

The school keeps a record of all pupils with asthma, complete with medication requirements, in its asthma register. Parents must inform the school of any changes to their child's condition or medication during the school year via an [Asthma Policy Information Slip](#) (Appendix 2).

A list of pupils with parental consent and/or individual healthcare plans permitting them to use the school's emergency inhalers is maintained.

The school records the administration of asthma medication in child-specific records, and also in the records for the school's emergency inhalers (for each individual inhaler).

A checklist of inhalers is maintained, identified by their batch number and expiry date, with monthly checks recorded.

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 know which pupils in their class have asthma and are aware of their health needs.

External suppliers of sports clubs and activities are provided with information about pupils with asthma taking part in the activity.

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 brought from the classroom to the site of the activity if felt necessary. Classroom teachers will follow the same guidelines as above during physical activities in the classroom.

The school believes sport to be of great importance and utilises 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 made aware of the needs of pupils with asthma during these activities and adhere to the guidelines outlined in this policy.

10. The school environment

The school does all that it can to ensure the school environment is favourable to pupils with asthma. The school does not keep any furry or feathered animals, and will carry out a risk assessment if such animals are brought into the school for a learning activity. The school also has a definitive no-smoking policy throughout school grounds.

As far as possible, the school does not use any chemicals in 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.

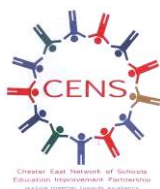
11. Monitoring and review

The effectiveness of this policy will be monitored continually by the headteacher. Any necessary amendments may be made immediately. The Premises & Health and Safety Committee and governing board will review this policy every three years.

Any changes made to this policy will be communicated to staff, pupils, parents/carers and other relevant stakeholders.

Appendix 1

Administration of asthma medicine: letter to parents



Huntington Community Primary School,
Aldford Road,
Huntington,
Chester,
CH3 6EA.

Telephone: 01244 506450
admin@huntington.cheshire.sch.uk
head@huntington.cheshire.sch.uk
www.huntington.cheshire.sch.uk

Date:

Dear Parent/Carer

Your child,, has had problems with their breathing today.

This happened when

.....

Action taken		Tick box
A member of staff helped them to use their asthma inhaler		
A member of staff helped them to use the school's emergency asthma inhaler containing salbutamol – they were given puffs.		
This was because:		Tick box
They did not have their own inhaler with them		
Their own inhaler was not working		
Their own inhaler was out of date		

Although they soon felt better, we would strongly advise that you have your child seen by your own doctor or asthma nurse as soon as possible.



Appendix 2

Asthma Policy Information Slip

(including permission to use the emergency inhaler)

Huntington School keeps a record of pupils with asthma in order to ensure the best possible care for your child. In order for us to maintain effective records on our asthmatic children, please enter information as requested below:

Child's name: _____

Date of birth: _____

Class: _____

Doctor: _____

Type of inhaler: _____

Dosage required: _____
(how many puffs)

I would also ask that you give us your permission to administer emergency treatment as indicated below by signing the section at the bottom of the letter.

At Huntington School we keep Ventolin Inhalers (Salbutamol) which are available in emergency situations. We are able to provide these to children who have forgotten their inhaler or are undergoing a severe attack.

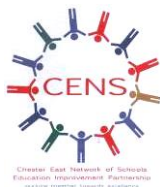
I hereby allow Huntington Community Primary School to administer emergency treatment as indicated above:

Signature of parent/carer:

Date:

Appendix 3

Annual letter to parents of children diagnosed with asthma



Huntington Community Primary School,
Aldford Road,
Huntington,
Chester,
CH3 6EA.

Telephone: 01244 506450
admin@huntington.cheshire.sch.uk
head@huntington.cheshire.sch.uk
www.huntington.cheshire.sch.uk

Date

Dear Parent/Carer,

Please find attached an ***Asthma Policy Information Slip (including permission to use the emergency inhaler)*** and a **School Asthma Card**, which you are asked to return, with an in-date inhaler clearly labelled with the name of your child, at the beginning of the new school year in September.

If your child brings an inhaler into school to be kept in class for use, by them, when required, the school office need to be informed so that this can be recorded, even if they are able to self-administer using their own inhaler.

Thank you for your assistance.

Yours sincerely,

Mr Duncan Rose

Headteacher

Appendix 4

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
<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

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

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 below

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

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

(9am – 5pm; Mon – Fri)

www.asthma.org.uk