



The
Rise
Partnership
Trust

Love • Learn • Laugh

Asthma Policy

Approved	March 2026
Review date	March 2028

School name	The Avenue School Manor School, RPT (sites include: MSEYC, Manor Primary) Wembley Manor School
Head Teacher	Penny Doswell – The Avenue Steven Thompson - Manor Andrew Chaplin – Wembley Manor
Asthma Champions	Aneta Sobczuk - Avenue School Ane Castro - Avenue School Joanne Bircham - Manor School Tessa Foley - Manor School Asha Varsani - Wembley Manor
School nursing team contact number	Specialist School Nursing Team : 02032352079 Donna Deehan SpSNT – donna.deehan@nhs.net Angie Serna SpSNT – angie.serna@nhs.net

As a trust, we recognise that asthma is a serious, but controllable condition. RPT schools welcome all children/ young people with asthma and aims to support these children in participating fully in

everyday school life. Schools will take on a whole school approach to Asthma to support the children/ young people. We aim to actively involve parent/ carers/ children/ young people in the management of asthma within our schools.

This policy has been developed within the North-West London Health and Care Partnership following National guidelines for the management of children/ young people (CYP) with asthma.

Indemnity statement

School staff should be willing to assist with inhaler administration when it has been recommended by an appropriate healthcare professional.

The importance of Asthma

- Asthma is the most common chronic condition, affecting one in eleven children.
- On average, there are two children with asthma in every classroom in the UK
- There are over 25,000 emergency hospital admissions for asthma amongst children a year in the UK.
- Children with persistent, uncontrolled, or severe asthma are more likely to miss school, compared to children with mild asthma.
- Every September, more children are rushed to hospital due to their asthma than at any other time of the year.
- Research studies suggest that asthma is responsible for up to 18% of school absences, with evidence improved asthma control improves school attendance and performance

What is Asthma?

Asthma is a condition that affects small tubes (airways) that carry air in and out of the lungs. When a child with asthma is exposed to something that irritates their airways (an asthma trigger), the muscles around the walls of the airways tighten so that the airways become narrow and inflamed. Sticky mucus or phlegm also builds up, which can further narrow the airways. These reactions make it difficult to breathe, leading to symptoms of asthma. The most common day-to-day symptoms of asthma are:

- Dry cough
- Wheeze (a 'whistle' heard on breathing out) often when exercising
- Shortness of breath when exposed to a trigger or exercising
- Tight chest
- Tummy ache in younger children

Medication and inhalers

There are many forms of treatment for asthma. All children with asthma will have some form of inhaled treatment.

Preventer and reliever inhalers:

The 'preventer inhalers' take time to build up in the system. They help stop asthma symptoms developing by protecting the airways. They can also reduce the risk of a potential life-threatening asthma attack. They are taken every day and usually at home.

The 'reliever inhalers' help symptoms to go away once they have started. These are the inhalers used during an asthma attack. It is important that in school the reliever inhaler is administered in the correct way if needed.

There is also a type of inhaler with both preventer and reliever combined. This is known as MART (maintenance and reliever therapy). This inhaler can be used according to the PAAP (Personalised Asthma Action Plan).

Parents should be encouraged to report to school if their CYP has any changes in the treatment plan (PAAP)

HOW TO RECOGNISE AN ASTHMA ATTACK

It is important to recognize the signs and symptoms of an asthma attack in a Child/Young person (CYP). The onset of an asthma attack can gradually appear over days. Early recognition can reduce the risk of a hospital admission.

A CYP may have one or more of these symptoms during an asthma attack:



BREATHING HARD AND FAST

You may notice faster breathing or pulling in of muscles in between the ribs or underneath the ribs. (recession)

WHEEZING

This is typically a high-pitched whistling noise heard on breathing in and out, a sound produced by inflamed and narrowed airways that occur in asthma.



COUGHING

A cough may become worse, particularly at night preventing your child from having restful sleep and making them seem more tired in class.



BREATHLESSNESS

A child may become less active and reluctant to join in activities. Lack of interest in food or restlessness can be a sign that the child is too breathless to exercise or eat.

TUMMY OR CHEST ACHE

Be aware that younger children often complain of tummy ache when it is actually their chest that is causing them discomfort.



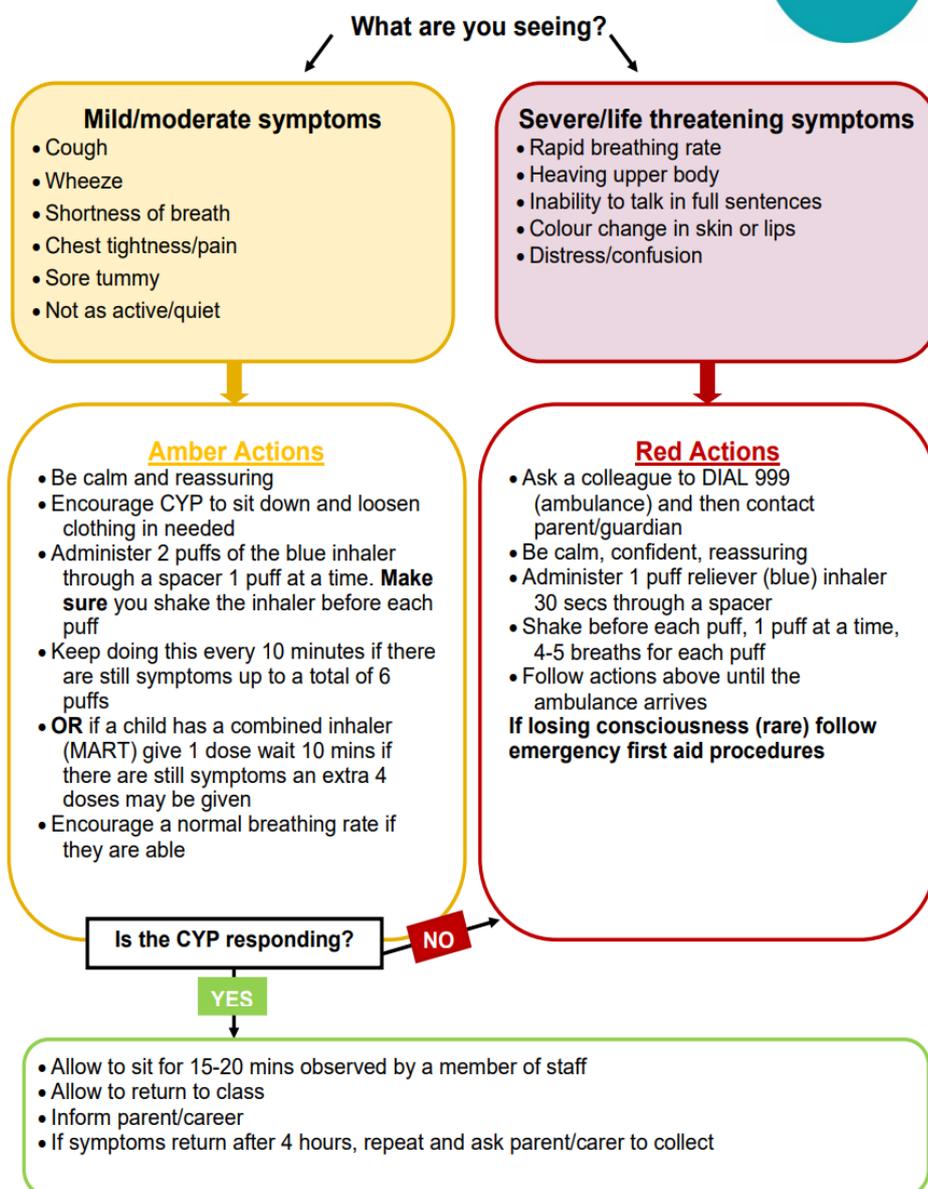
INCREASED USE OF THE RELIEVER INHALER

If the CYP is old enough, he/she may ask for the reliever inhaler more frequently during an attack. It is important that you follow the asthma action plan and recognize that if the reliever inhaler is not helping that it is time to seek medical help.

www.beatasthma.co.uk



How do I Manage a Child/Young Person Having an Asthma Attack?



www.beatasthma.co.uk

Supporting CYP with Asthma: Legal requirements Checklist

School Asthma Actions	<ul style="list-style-type: none"> ● Provision of asthma awareness training ● <i>Supporting Pupils in school with Asthma</i> (Department for Education 2015*) available for all staff to read and to use by way of guidance ● Guidance on the use of Emergency Salbutamol Inhalers in Schools (Department of Health, Sept 2015) ● All staff to be made aware of the policy and where to access it ● Information available on inhaler devices and how to use them is provided in Asthma training yearly to all staff. ● System in place to identify pupils who have frequent absences from school due to asthma
Asthma Register	<ul style="list-style-type: none"> ● Have a named individual responsible for asthma (Joanne Bircham) ● Ensure school asthma register (as part of schools class medical registers) in place and updated regularly. ● Asthma information available to all staff: <i>G:\Shared drives\Manor - Cloud Shared\MEDICAL & 1st AID\Asthma information and care plans</i> and list in Medical room ● Ensure every CYP with Asthma has an individual healthcare plan (IHCP) completed. School asthma care detailed on the IHCP and supported with actions to relieve asthma symptoms
Medications	<ul style="list-style-type: none"> ● Asthma medication is provided by the parent for school use with instructions of when and how to use, in keeping with their IHCP. ● A system is in place to check the expiry dates of any medication and a system to replace when expired or almost empty ● School staff and where appropriate CYP know where their inhaler and spacer are kept – must be with the child in green bags and accessible at all times. ● If using a metered dose inhaler (“puffer” type), a spacer device must also be provided by the parent. ● Medication must be clearly labelled with a pharmacy label displaying name/dose/instructions ● Usage of reliever medication must be recorded on template and stored in green bags. Parents must be informed. Medical coordinator or lead first aider should be informed if an inhaler has been administered. informed

<p>Pupils that self-manage (particular relevance for pupils at Wembley Manor)</p>	<ul style="list-style-type: none"> • If a CYP carries their own inhaler as part of their IHCP, a spacer if provided will be available for them to use in school • Parents should be informed if a CYP who self manages is using their inhaler more than usual • Every CYP will carry a copy of their asthma plan in their green bag
<p>Staff Training</p>	<ul style="list-style-type: none"> • Recommended that all class staff attend an asthma awareness session – provided by SPSNT yearly as part of our Medical CPD in Autumn Term • Recommended that all school staff (not just first aiders) update their asthma knowledge https://www.e-lfh.org.uk/programmes/children-and-young-peoples-asthma/ • Staff administrating inhalers should be knowledgeable of the correct technique
<p>Emergency Inhaler kits – To use if pupils own not available</p>	<ul style="list-style-type: none"> • Where possible emergency inhaler kits will be available and kept in school as part of our school asthma policy, these would be conveniently located in key areas • If a CYP attends a school trip and does not have their inhaler in school an emergency kit must be taken. • These can only be used for CYP who have a diagnosis of asthma or have been prescribed a salbutamol inhaler with the exception where parents have submitted the opt out consent. • An emergency kit should be taken out of school for offsite activities/residential trips • Each kit should consist of: <ul style="list-style-type: none"> ☐ A large volume spacer device ☐ 1 salbutamol 100mcgs per puff inhaler ☐ Information leaflet on how to administer ☐ Record of inhaler administered ☐ Letter template to send to the parent informing them that the emergency inhaler/spacer has been used. ☐ Every inhaler following use should be cleaned for re-use. ☐ Each spacer used for a single child only could be retained and labelled for that child / given to the parent for home use /returned to pharmacy for safe disposal.