

St. Peter's CEP Asthma Policy



Key Contact Personnel

Nominated Member of Leadership Staff Responsible for the policy: (Ali Tuckett, SENCO)

Date written: (September 2025)

Date agreed and ratified by Governing Body: (23rd September 2025)

Date of next review: (July 2026)

This policy will be reviewed annually, and following any concerns and/or updates to national/local guidance or procedures

[Vision Statement](#)

'Faith, Family, Future'

Jesus built his church upon the strength of St Peter – who was his rock. At St Peter's, we provide a solid foundation on which our community thrives through our rich, aspirational curriculum. As a family, we nurture and unlock individual potential through mutual love and respect; enabling all to flourish now and in the future.

'Each of you should use whatever gift you have received to serve others'

1 Peter 4 v10

St Peter's CEP Asthma Policy

INTRODUCTION

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 and over 25,000 emergency hospital admissions a year.

THE SCHOOL

Our school recognises that asthma is a widespread, serious but controllable condition and we welcome all pupils with asthma.

At the beginning of each school year or when a child joins the school, parents and carers will be asked if their child has any medical conditions. If a child or young person has asthma this will be documented on the asthma register.

Every asthmatic child should have a reliever inhaler and spacer in school stored with their individual school action plan. This action plan will include parental consent for staff to administer medicine.

The school will ensure they have received the child's individual action plan from the GP practice or parent.

The school recognises that pupils always need immediate access to reliever inhalers including all out of school activities. The inhalers are kept in open shelves in the office for most students. They are carried with the lead adult on school trips.

Children with asthma are encouraged to take control of their condition and feel confident in the support they receive from school. In case of an emergency where a child is unable to self-administer their inhaler all staff should feel confident in managing this situation. All staff must understand their duty of care to children in an event of an emergency.

EXERCISE

Taking part in sports, games and activities is an essential part of school life for all pupils. The health benefits of exercise are well documented, and this is also true for children and young people with Asthma. Consequently, it is vital that pupils with asthma are encouraged to participate fully in all physical education lessons. Teachers should remind pupils whose asthma is triggered by exercise, to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after exercise.

The school ensures the whole environment which includes physical, social, sporting, and educational activities is inclusive and favourable to children with asthma.

STAFF TRAINING/AWARENESS

We ensure all school staff (teachers, teaching assistants, kitchen staff, out of school club staff, supply teachers) are aware of the potential triggers and ways to minimise these signs and symptoms of a pupil's asthma and what to do in the event of an attack.

The school ensures that all staff including supply teachers and support staff who come into contact with pupils with asthma know what to do in an event of an attack. This includes awareness sessions for all staff delivered at least once a year. All staff understand that pupils with asthma should not be forced to take part in an activity if they feel unwell

THE CURRICULUM

The school ensures all pupils understand asthma by incorporating it in the national curriculum key stages one and two (science, design, technology, geography, history PSHE or PE)

The school are aware there may be additional medication, equipment, or factors to consider in planning residential visits.

ADMINISTRATION

School has clear guidance on the administration of medicine in school – please see Medicine Policy

If the children are well controlled, they should not be using their salbutamol and spacer much if at all in school. If it is a rare occurrence, then they should wash them after every use.

If the child is using their salbutamol and spacer regularly (which is a sign that their asthma is poorly controlled and they should be advised to get a review from their GP) then it should be washed once a week..

The Department of Health guidance on the use of emergency salbutamol inhalers in school (DH, 2015) recommends school keep an emergency salbutamol inhaler – The inhaler should only be used for children who have a diagnosis of asthma and are prescribed a reliever inhaler. In this instance there should be a separate parental consent form (See [Asthma Consent Form](#)). This inhaler can only be used if the pupil's own inhaler is not available to them. To avoid possible risk of cross infection the school have disposable one use spacers. These must be disposed of after use.

<https://www.gov.uk/government/publications/emergency-asthma-inhalers-for-use-in-schools>

EMERGENCY RESPONSE

If a pupil needs to be taken to Hospital a member of staff will always accompany them until a parent/carer arrives.

Children's asthma medical packs should include:

Reliever inhaler and spacer.
Individual Asthma Action plan.
Emergency parental consent form (Annex A).

The school's emergency medical packs are located:

In the asthma cubby holes in the school office.

Staff Responsibilities

The designated asthma staff member is responsible for:

- Supporting staff in an emergency
- Ensuring that inhalers are checked monthly to guarantee that replacement inhalers are obtained before the expiry date
- Ensuring that used or out of date inhalers are returned to the local pharmacy for disposal
- Ensuring that the asthma register is accurate and up to date

All staff responsibilities:

- The school emergency inhaler logbook should be completed if emergency inhaler has been used.
- Staff must inform designated asthma staff member if a school emergency inhaler has been used so that a new spacer can be ordered/replaced.
- If pupils require their inhaler, then staff need to record the amount of usage and inform parents
- All staff should be aware of which children have asthma, be familiar with the content of their individual action plan and have read the schools Asthma policy.
- All staff must ensure children have immediate access to their emergency medicines.
- Maintain effective communication with parents including informing them if their child has been unwell at school
- Ensure children have their medicines with them when they go on a school trip or out of the classroom
- Be aware of children with asthma who may need extra support
- Liaise with parents, the child's healthcare professionals, SENCO and welfare officers if a child is falling behind with their work because of their condition
- Ensure all children with asthma are not excluded from activities they wish to take part in
- Parents to be informed if child/young person has used their inhaler due to asthma symptoms

Safe storage

- Emergency medicines are readily available to children who require them at all times during the school day
- Most children at this school carry their emergency medicines on them at all times and keep them securely
- Children whose health care professionals /parents advise the school that their child is not yet able or old enough to self-manage their condition, know exactly where to access their emergency medicines

Washing of a spacer

- *Pull spacer apart*
- *Warm soapy water and give the spacer parts a swoosh in the water*
- *Leave bubbles in the spacer and let it air dry (helps preserve the protective film in the spacer and prevents the medication from sticking)*
- *Rinse the mouthpiece and let air dry*

DO NOT

- *Do not use a bottle brush or harsh chemicals on the spacer*
- *Do not put it through the dishwasher, washing machine or tumble dryer*
- *Do not towel dry or use tissue paper. Particles will get stuck to the spacer.*

References

1. Asthma UK
<https://www.asthma.org.uk/about?qclid=CJqmpbWsrM0CFYdAGwod4KQEnQ&qclid=CJqmpbWsrM0CFYdAGwod4KQEnQ>
2. Department of Health (2015), Guidance on the use of emergency salbutamol inhalers in schools
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/416468/emergency_inhalers_in_schools.pdf