



# Whitworth Community High School

## Asthma Policy

<b>Date effective from:</b>	January 2026
<b>Prepared by:</b>	Clare Jones
<b>Date of next review:</b>	January 2027

This document is intended for use as guidance only. The purpose is to provide example elements, structures and information commonly found in such policies. Schools and academies must ensure that any policies derived from the guidance in this model policy reflect their own specific requirements, such as setting, pupil ages, and percentages of pupils with special educational needs.



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## Statement of intent

### Whitworth Community High School:

- Recognises that asthma is a serious but controllable condition and welcomes all pupils with asthma.
- Ensures that pupils with asthma can and do participate fully in all aspects of school life including physical exercise, visits, field trips and other out-of-school activities.
- Recognises that pupils with asthma need immediate access to reliever inhalers at all times.
- Keeps a record of all pupils with asthma and their medicinal requirements.
- Ensures that the school environment is conducive to the education of pupils with asthma.
- Ensures that all members of school staff (including supply teachers and support staff) who come into contact with pupils with asthma know what to do in the event of an asthma attack.
- Understands that pupils with asthma may experience bullying and has procedures in place to prevent this occurring.
- Works in partnership with interested parties, such as the governing body, members of school staff, parents, pupils and outside agencies, to ensure the best educational outcomes possible for pupils with asthma.



## 1. Background

- 1.1. This policy has been created with regard to the following DfE guidance:
  - 'Supporting pupils at school with medical conditions' December 2015.
  - 'Guidance on the use of emergency salbutamol inhalers in schools' March 2015.
- 1.2. This policy has also been created in consultation with parents/carers, the governing body, school nurses and pupils, and with regard to additional guidance from Asthma UK and healthcare professionals.
- 1.3. This policy enables pupils with asthma to manage their condition effectively in school and provides clear procedures to help ensure their safety and wellbeing.
- 1.4. This policy also encourages and assists pupils with asthma in achieving their full potential in all aspects of school life.

## 2. Key roles and responsibilities

- 2.1. The governing body has a responsibility to:
  - Ensure the health and safety of staff and pupils on the school premises and when taking part in school activities.
  - Ensure that the Asthma Policy, as written, does not discriminate on any grounds, including, but not limited to: age, ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
  - Handle complaints regarding this policy as outlined in the school's Complaints Policy.
  - Ensure the Asthma 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.
  - Ensure the correct insurance is in place for teachers and other members of school staff who volunteer to administer medicine to pupils with asthma in need of help.
- 2.2. The headteacher has a responsibility to:
  - Create and implement the Asthma Policy with the help of school staff, school nurses, LA guidance and the governing body.



- Ensure this policy is effectively implemented and communicated to all members of the school community.
- Ensure all aspects of this policy are effectively carried out.
- Arrange for all members of staff to receive training on: how to recognise the symptoms of an asthma attack; how to distinguish asthma attacks from other conditions with similar symptoms; how to deal with an asthma attack; how to check if a child is on the Asthma Register; how to access the emergency inhalers; who the designated members of staff are and how to achieve their help.
- 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.
- Delegate the responsibility to check the expiry date of spare reliever inhalers and maintain the school's Asthma Register to a designated member of staff.
- Report to the governing body and LA as necessary.

2.3. Members of 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/carers if their child has had an asthma attack.
- Inform parents/carers 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.



- Make contact with parents/carers, the school nurse and special educational needs coordinators (SENCOs) if a child is falling behind with their school work because of their asthma.

2.4. Members of staff leading PE lessons 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.
- 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 warm downs.

2.5. The school nurse has a responsibility to:

- Assist in the creation of the Asthma Policy.
- Provide regular training for members of school staff in managing asthma.
- Where the school nurse doesn't have the correct qualification, they will provide information about where the school can procure specialist asthma training.
- Appropriate forms can be found in appendix 3 of this policy.

2.6. Pupils with asthma have a responsibility to:

- Tell their teacher or parent/carer if they are feeling unwell.
- Treat asthma medicines with respect.
- Keep their reliever inhaler with them at all times when in school.
- Take their reliever inhaler with them on any school trips.
- Know how to gain access to their medication in an emergency.



- Know how to take their asthma medicine.
- 2.7. All other pupils have a responsibility to:
- Treat other pupils, with or without asthma, equally.
  - Let any pupil having an asthma attack take their reliever inhaler (usually blue) and ensure a member of staff is called immediately.
- 2.8. 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 form for their child.
  - 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. For example, 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.
  - Ensure their child has regular asthma reviews with their doctors or asthma nurse (every six to twelve months).
  - Provided written consent to use the school's emergency inhaler if needed.
  - Appropriate forms can be found in appendix 1, 2 & 10 of this policy.

### **3. Asthma medicines**



- 3.1. Pupils with asthma are encouraged to carry their reliever inhaler as soon as their parent/carer and the school nurse agree they are mature enough.
- 3.2. Spare reliever inhalers are kept in the school's medical cabinet located in the medical room.
- 3.3. Parents/carers must label their child's inhaler.
- 3.4. Parents/carers must ensure that the school is provided with a labelled spare reliever inhaler, in case their child's inhaler runs out, is lost or forgotten.
- 3.5. Members of school staff are not required to administer medicines to pupils (except in emergencies).
- 3.6. Staff members who have agreed to administer asthma medicines are insured by Lancashire County Council when acting in agreement with this policy.
- 3.7. Staff members will let pupils take their own medicines when they need to.
- 3.8. This policy is predominantly for the use of reliever inhalers. Preventer inhalers are very rarely required at school. However, if they are needed, staff members may need to remind pupils to bring them in if they consistently forget.

#### **4. Emergency inhaler**

- 4.1. Whitworth Community High School keeps a supply of salbutamol inhalers for use in emergencies when a pupil's own inhaler is not available. These are located in the medical room.
- 4.2. The 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.
- 4.3. Parental consent for the use of an emergency inhaler should form part of any pupil with asthma's individual healthcare plan.
- 4.4. When not in use, emergency inhalers are stored in the school's medical cabinet which is located in the medical room, in the temperate conditions specified in the manufacturer's instructions, out of reach and sight of pupils, but not locked away.
- 4.5. Expired or used-up emergency inhalers are returned to local pharmacies in the area to be recycled.
- 4.6. Spacers must not be reused and may be given to the pupil for future home-use.
- 4.7. Emergency inhalers may be reused, provided that they have been properly cleaned after use.



- 4.8. In line with the school's **Supporting Pupils with Medical Conditions Policy**, appropriate support and training will be provided for relevant staff on the use of the emergency inhaler and administering the emergency inhaler.
- 4.9. Whenever the emergency inhaler is used, the incident must be recorded in the corresponding record of administration.
- 4.10. Whenever the emergency inhaler is used, the incident must also be recorded on the school's records, indicating where the attack took place, how much medication was given, and by whom, and the pupil's parents will be informed by telephone.
- 4.11. Mrs Nadia Uddin is responsible for overseeing the protocol for the use of the emergency inhaler, monitoring its implementation, and maintaining the Asthma Register.
- 4.12. Mrs Nadia Uddin, Mr Dan Crook and Miss Louise Rawstron are 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.
  - Appropriate forms can be found in appendix 9 of this policy.

## **5. Symptoms of an asthma attack**

- 5.1. Members of school 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
- 5.2. Younger pupils may express feeling tight in the chest as a 'tummy ache'.
- 5.3. Appropriate forms can be found in appendix 6 of this policy.



## 6. What to do when a child has an asthma attack

6.1. 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 child 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 designated member of staff, to help administer an emergency inhaler.
- Ensure the child takes two puffs of their reliever inhaler (or the emergency inhaler) immediately, preferably through a spacer.
- Ensure tight clothing is loosened, in a safe environment.
- Reassure the child.
- Appropriate forms can be found in appendix 5 and 6 of this policy.

6.2. If there is no immediate improvement:

- Continue to ensure the child takes two puffs of their reliever inhaler every two minutes, until their systems improve, but only up to a **maximum of 10 puffs.**

6.3. If there is no improvement before you have reached 10 puffs:

- Call 999 for an ambulance.
- If an ambulance does not arrive in 10 minutes, administer another 10 puffs of the reliever inhaler as outlined in 6.2.
- Appropriate forms can be found in appendix 5 and 6 of this policy.

6.4. Call 999 immediately if:

- The child is too breathless or exhausted to talk.
- The child is going blue.
- The child's lips have a blue/white tinge.
- The child has collapsed.
- You are in any doubt.
- Appropriate forms can be found in appendix 5 and 6 of this policy.

## 7. Important points to remember

7.1. Never leave a pupil having an asthma attack unattended.

7.2. If the pupil does not have their inhaler, send another teacher or pupil to retrieve their spare inhaler.



- 7.3. In an emergency situation, members of school staff are required to act like a 'prudent parent' – known as having a 'duty of care'.
- 7.4. Reliever medicine is very safe. Do not be overly concerned a pupil may overdose.
- 7.5. Send another pupil to get a teacher/adult if an ambulance needs to be called.
- 7.6. Contact the pupil's parents/carers immediately after calling an ambulance.
- 7.7. A member of staff should always accompany a pupil taken to hospital by ambulance and stay with them until their parent/carer arrives.
- 7.8. Generally, staff will not take pupils to hospital in their own car. However, in some extreme situations Whitworth Community High School understands that it may be the best course of action.
- 7.9. If a situation warrants a staff member taking a pupil to hospital in their car, another adult must accompany them.
- 7.10. Appropriate forms can be found in appendix 5 and 6 of this policy.

## **8. Record keeping**

- 8.1. At the beginning of each school year, or when a child joins Whitworth Community High School, parents/carers are asked to inform the school if their child has any medical conditions, including asthma, on their enrolment form.
- 8.2. The school keeps a record of all pupils with asthma, complete with medication requirements, in its Asthma Register.
- 8.3. Parents must inform the school of any changes to their child's condition or medication during the school year via telephone.
- 8.4. Appropriate forms can be found in appendix 1, 2, 7 and 8 of this policy.

## **9. Exercise and physical activity**

- 9.1. Games, activities and sports are an essential part of school life for our pupils. All teachers know which children in their class have asthma and are aware of any safety requirements.
- 9.2. Outside suppliers of sports clubs and activities are provided with information about pupils with asthma taking part in the activity via the school's Asthma Register.
- 9.3. 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.

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

## **10. Out-of-hours sport**

- 10.1. Whitworth Community High 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.
- 10.2. Pupils with asthma are encouraged to become involved in out-of-hours sport as much as possible and will never be excluded from participation.
- 10.3. Members of school staff or contracted suppliers will be aware of the needs of pupils with asthma during these activities and adhere to the guidelines outlined in this policy.

## **11. The school environment**

- 11.1. Whitworth Community High 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 has a definitive no-smoking policy throughout school grounds.
- 11.2. As far as possible, the school does not use any chemicals in art or science lessons that are potential triggers for asthma.
- 11.3. 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.

## **12. Pupils falling behind**

- 12.1. If a pupil is falling behind in lessons because of their asthma, the class teacher will talk to the parents/carers to discuss how to prevent the child falling further behind and possible ways for the child to catch-up.
- 12.2. If appropriate, the teacher will then talk to the school nurse and SENCO about the pupil's needs and possible interventions.
- 12.3. The school recognises that it is possible for pupils with asthma to have special educational needs due to their asthma.



### **13. Monitoring and review**

- 13.1. The effectiveness of this policy will be monitored continually by the headteacher. Any necessary amendments may be made immediately.
- 13.2. The governing body will review this policy annually.

## Appendix 1 - Year 7/new students IHCP assessment form

Could you please complete and return to school with any medical evidence (letters from hospital, doctors, etc).

If you have any concerns then please contact me on 01706 343218, leave a message and I will get back to you as soon as I can, or you can email me at [n.uddin@whitworth.lancs.sch.uk](mailto:n.uddin@whitworth.lancs.sch.uk)

Name of Student	
Year Group	

Medical Need	
Medication and Dosage	
Medication to be kept and used in school (if needed)	
Care and Physical Needs	

GP Contact Details	
Emergency Contact 1	
Emergency Contact 2	
<p>How do you think we can help your child with their medical condition whilst they are at school? <b>This could be a toilet pass if they have bladder/bowel problems</b></p>	
<p>Any other information you think school need to be aware about?</p>	

Please sign, date and return to school

Signed \_\_\_\_\_

Date \_\_\_\_\_

**Appendix 2 - Asthma Medical Information**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Date Created: \_\_\_\_\_ Review Date: \_\_\_\_\_

Updated on: \_\_\_\_\_

**Medications taken at home (please provide name and dosage)**

Name of Medication	Dosage	Time taken

**Medications taken in school (please provide name and dosage)**

Name of Medication	Dosage	Time taken
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**Warning signs of an asthma attack: (please circle)**

<b>Awakening at night</b>	<b>Difficulty breathing</b>	<b>Coughing, especially at night</b>
<b>Chest tightness</b>	<b>Feeling very tired</b>	<b>Itchy, watery or glassy eyes</b>
<b>Itchy nose</b>	<b>Itchy or sore throat</b>	<b>Need to use more of your rescue medication</b>
<b>Wheezing</b>	<b>Hot/flustered</b>	<b>Feeling that you can't catch your breath</b>
<b>Other</b> (please state in the space provided)		

**What a student should do if they are having an asthma attack in school:**

- Use your blue inhaler (salbutamol) as directed by your GP/Asthma Nurse.
- Let your teacher know (if possible) or let the person know who you are sitting next so they can do this.
- Continue to use your Blue inhaler as and when you need it.
- Your class teacher will do a medical support call.

- Your Parents/Carers will be notified.

**Parent/Guardian signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Appendix 3 - Staff Training Record**

<b>Name of School</b>	Whitworth Community High School
<b>Staff Name</b>	
<b>Type of training received</b>	
<b>Date training was completed</b>	
<b>Training provided by</b>	
<b>Profession and title</b>	

I confirm that ..... has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated every year.

**Trainer's signature** .....

**Date** .....

**I CONFIRM THAT I HAVE RECEIVED THE TRAINING DETAILED ABOVE.**

**Staff signature** .....

**Print name** .....

**Date** .....

Suggested review date .....

**Appendix 4- Medication Returns**

Students Name .....

**Medicine details**

<b>Name of medicine</b>	
<b>Quantity to be returned</b>	
<b>Reason for the return of medication</b>	

**Return details**

<b>Staff Name (WCHS)</b>	
<b>Signature</b>	
<b>Date</b>	

Complete the box below if handing medication to a parent/carer.

<b>Parent/Carers name</b>	
<b>Signature</b>	
<b>Date</b>	

Complete the box below if medication is being returned to a pharmacy.

<b>Pharmacy name and address</b>	
<b>Staff name</b>	

<b>Signature</b>	
<b>Date</b>	

#### Appendix 5 - Contacting Emergency Services

### **To be stored by phones in the school**

**Request an ambulance – dial 999, ask for an ambulance and be ready with the information below.**

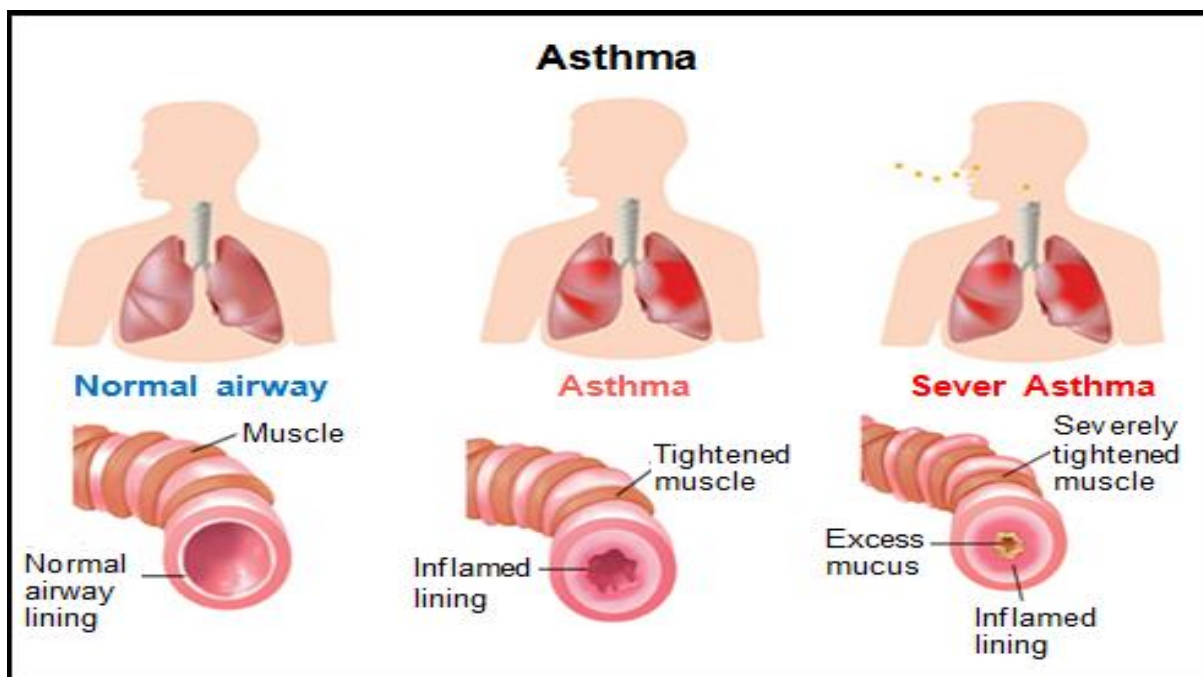
**Speak clearly and slowly and be ready to repeat information if asked.**

- The telephone number: **01706 343218**
- Your name.
- Your location as follows: **Whitworth Community High School, Hallfold, Whitworth, Rochdale, Lancashire, OL12 8TS**
- The satnav postcode: **OL12 8TS**
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and where the crew will be met and taken to the patient.

## Appendix 6 - Management of asthma

### What is asthma ?

Asthma is a long term condition that affects the airways, and varies in severity.



### How to treat a student who is having an asthma attack

First initial symptoms could include:

- Coughing more than usual
- More breathless than usual
- Chest feeling tight
- Slight wheeze - may or may not be heard
- No difficulty speaking]Not distressed

**SEVERE/LIFE threatening symptoms could include:**

- Persistent cough

- Breathing very quickly or struggling for breath
- Difficulty talking
- Quiet/pre-occupied behaviour
- Restless/agitated
- Sleepy
- Pale and sweaty
- Blue/grey around the lips
- Wheeze may or may not be heard

An adult **MUST** stay with the student and support/direct them to:

- Breathe slowly
- Sit upright and lean slightly forward - this is so that the chin is not tucked into the chest.
- Take **2 initial puffs** of their reliever inhaler (**BLUE**), preferably through a spacer (if available), one at a time.
- Stay with the student and encourage them to relax and rest for a few minutes.

### Are the symptoms improving?

Yes	No
<ul style="list-style-type: none"> <li>● If the students symptoms improve following their attack, then they can return to lessons. Ensure that all other staff in contact with the student are aware of the incident and that they continue to monitor/support them.</li> <li>● Parents/carers to be informed.</li> <li>● Incident recorded on CPOMS.</li> </ul>	<ul style="list-style-type: none"> <li>● Give 1 puff per minute of their reliever inhaler (BLUE), up to 10 puffs preferably through a spacer.</li> <li>● If no improvement then DIAL 999 FOR AN AMBULANCE and follow the instructions given by the emergency operator (use the contact emergency services sheet which is located by the phones in school).</li> <li>● Continue to reassure the student whilst you wait for the ambulance.</li> <li>● Contact parent/carers.</li> </ul>

**Asthma can kill - do not hesitate to call for medical help at any point.**

## **Appendix 7 - Asthma letter Year 7**

Date

Dear Parent/Carer,

Firstly, I would like to take this opportunity to welcome your child to Whitworth Community High School.

As a school we record all medical information via Medical Tracker as well as an Individual Health Care Plan; this is in line with the school's medical policy.

To ensure that our records are fully up to date, please could you please take time to read over your child's Asthma Plan, I would appreciate it if you could complete the following sections:

- Medicine, Dosage and Time taken
- Medication used in school
- Warning signs of an asthma attack
- Please feel free to add any other information you think is necessary or make any changes.

I would appreciate it if you could send this back to school as soon as possible to ensure that your child's Asthma Plan can be updated.

If you require any additional information or there are any other changes that you think are necessary for us to make, please don't hesitate to contact either myself or Mrs Uddin on 01706 343218 or [send@whitworth.lancs.sch.uk](mailto:send@whitworth.lancs.sch.uk) or [n.uddin@whitworth.lancs.sch.uk](mailto:n.uddin@whitworth.lancs.sch.uk)

## **Appendix 8 - Asthma letter Review**

Date

Dear Parent/Carer,

As you are aware your child currently has an Asthma Plan. All of their medical information is also recorded via a secure online programme known as Medical Tracker; this is as per the school's medical policy.

To ensure that our records are fully up to date, please could you take time to read over your child's Asthma Plan and make any amendments that may be needed. If possible, could you also provide any new medical information for their ongoing medical condition.

I would appreciate it if you could hand this in at the end of parents evening or send this back to school as soon as possible to ensure that your child's medical information can be updated.

In the new school year, I will be making changes to the review process of all student Individual Health Care Plans. From September Asthma forms will be reviewed at your child's parents evening, you will be handed their plan when signing in. This will give you time to look over it in between seeing your child's teachers, you will be able to make any amendments needed before handing it back in before leaving school at the end of the evening.

If you require any additional information or have any other changes that you think are necessary for us to make, please do not hesitate to contact myself or Mrs Uddin on 01706 343218 or [send@whitworth.lancs.sch.uk](mailto:send@whitworth.lancs.sch.uk) or [n.uddin@whitworth.lancs.sch.uk](mailto:n.uddin@whitworth.lancs.sch.uk)



**Appendix 10 - Parent/carer consent to administer emergency Asthma Inhaler (salbutamol)**

I understand that the school may purchase spare Asthma Inhalers (salbutamol) to be used in the event of an emergency asthma attack. I also understand that, if my child doesn't have their asthma inhaler (salbutamol) or if it has run out, it may be necessary for the school to administer a spare asthma inhaler (salbutamol), but this is only possible with medical authorisation and my written consent.

In light of the above, I provide consent for the school to administer a spare asthma inhaler (salbutamol) to my child.

Name of child: .....

Date of Birth: .....

<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>
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<b>Name of parent:</b>	
<b>Relationship to child:</b>	
<b>Contact details of parent:</b>	
<b>Parental signature:</b>	



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