



Asthma Policy

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Ratified by:	Chair of Governors
Signed:	<i>J Goodman</i>
Position on the board	Chair of Governors
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Statement of intent

Gospel Oak School recognises that asthma is a serious but controllable condition and welcomes all students with asthma. This policy sets out how the school ensures that students with asthma can participate fully in all aspects of school life, including physical exercise, school trips and other out-of-school activities. It also covers how the school enables students with asthma to manage their condition effectively, including ensuring immediate access to reliever inhalers when necessary.

Legal framework

This policy has due regard to all relevant legislation and statutory guidance, including, but not limited to, the following:

- Equality Act 2010
- students at school with medical conditions'
- Asthma UK' Asthma at school and nursery'
- DfE' First aid in schools, early years and further education'

This policy operates in conjunction with the following school policies:

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

Roles and responsibilities

The local academy governing board has a responsibility to:

- Ensure the health and safety of staff and students is protected on the school premises and during school activities.
- Ensure that this policy, as written, does not discriminate against any protected characteristic, 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, parent/carers and students.
- Provide indemnity for teachers and other school staff who volunteer to administer medicine to students with asthma who need assistance.

The Executive Principal has a responsibility to:

- Create and implement this policy with the help of school staff, school nurses, local guidance and the local academy governing board.
- Ensure this policy is effectively implemented and communicated to all members of the school community.
- Arrange training for all staff on supporting students with asthma. Ensure all supply teachers and new members of staff are made aware of this policy and provided with appropriate training.
- Monitor the effectiveness of this policy.
- Ensure that first aiders are appropriately trained regarding asthma, e.g. supporting students to take their own medication and caring for students 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 a designated member of staff.
- Report incidents and other relevant information to the local academy governing board and LA as necessary.

All school staff have a responsibility to:

- Read and understand this policy.
- Know which students they come into contact with have asthma.
- Know what to do in the event of an asthma attack.
- Allow students with asthma immediate access to their reliever inhaler.
- Inform parent/carers if their child has had an asthma attack.
- Inform parent/carers if their child is using their reliever inhaler more than usual.
- Ensure students with asthma have their medication with them on school trips and during activities outside of the classroom.
- Ensure students who are unwell due to asthma are allowed the time and resources to catch up on missed schoolwork.
- Be aware that students with asthma may feel tired during the school day due to their nighttime symptoms.
- Be aware that students with asthma may experience bullying due to their condition and understand how to manage these instances of bullying.
- Contact the parent/carers, the school nurse, and the SENCO if a pupil is falling behind with their schoolwork due to their asthma.

PE staff have a responsibility to:

- Understand asthma and its impact on students – students with asthma should not be forced to take part in activities if they feel unwell.
- Ensure students are not excluded from activities they wish to take part in, provided their asthma is well controlled.
- Ensure students have their reliever inhaler with them during physical activity and that they are allowed to use it when needed.
- Allow students to stop activities if they experience asthma symptoms.
- Allow students to return to activities when they feel well enough and their symptoms have subsided (the school recommends a 5-minute waiting period before allowing the pupil to return).
- Remind students with asthma whose symptoms are triggered by physical activity to use their reliever inhaler before warming up.
- Ensure students with asthma always perform sufficient warm-ups and cool-downs.

The Lead First Aider has a responsibility to:

- Support in the creation and implementation of this policy.
- Arrange regular training for members of the school staff in managing asthma through the NHS provision.
- Be on hand if a student with asthma is experiencing symptoms that require additional medical supervision.

Students with asthma have a responsibility to:

- Tell their teacher or parent/carer if they are feeling unwell due to their asthma.
- Treat the school's and their own asthma medicines with respect by not misusing them or their inhalers.
- Know how to gain access to their medication in an emergency.
- Know how to take their asthma medicine.

All other students have a responsibility to:

- Treat other students, with or without asthma, equally, in line with the school's Behaviour Policy.
- Understand that asthmatic students will need to use a reliever inhaler when having an asthma attack and ensure a member of staff is called immediately.

Parent/Carers have a responsibility to:

- Inform the school if their son/daughter has asthma.
- Inform the school of the medication their son/daughter requires during school hours.
- Inform the school of any medication their son/daughter requires during school trips, team sports events and other out-of-school activities.
- Inform the school of any changes to their son/daughter's medical requirements.
- Inform the school of any changes to their son/daughter's asthma, e.g., if their son/daughter's is currently experiencing sleep problems due to their condition.
- Ensure their son/daughter's reliever inhaler (and spacer where relevant) is labelled with their son/daughter's name.
- Ensure that their son/daughter's reliever inhaler and spare inhaler are within their expiry dates.
- Ensure their son/daughter catches up on any schoolwork they have missed due to asthma-related issues.
- Ensure their son/daughter has regular asthma reviews with their doctors or asthma nurse (recommended every 6-12 months).
- Ensure their son/daughter has a written Personal Asthma Action Plan at school to help the school manage their child's condition.

Asthma medicines

Students with asthma are encouraged to carry their reliever inhaler as soon as their parent/carers and the school nurse / Lead First Aider agree that they are old enough and/or have sufficient capabilities and independence. If not, inhalers are given to the school to be looked after. Reliever inhalers kept in the school's charge are held in the first aid room.

Parent/carers will be required to label their son/daughter's inhaler with their full name and year group. Parent/carers will ensure that the school is provided with a labelled spare reliever inhaler in case their son/daughter's inhaler runs out, is lost, or is forgotten.

Staff members are not required to administer medicines to students, except in emergencies. Staff members who have volunteered to administer asthma medicines will be insured under the school's appropriate level of insurance, which includes liability coverage for medication administration.

Staff will administer the asthma medicines in line with the school's Administering Medication Policy. For students 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 students to take the medication on their own.

This policy primarily concerns the use of reliever inhalers. The use of preventer inhalers is very rarely required at school. If a preventer inhaler is necessary, staff may need to remind students to bring it in or take it before coming to school.

Emergency inhaler

The school keeps a supply of salbutamol inhalers for use in emergencies when a student's own inhaler is not available. These are kept in the school's emergency asthma kits.

Emergency asthma kits contain the following:

- A salbutamol metered dose inhaler
- 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, identifying inhalers by their batch number and expiry date
- A list of students 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. The emergency inhaler should only be used by students who have received written parental consent and who have been diagnosed with asthma or prescribed an inhaler as reliever medication. Parental consent for the use of an emergency inhaler should be included in the individual healthcare plan for any student with asthma.

When not in use, emergency inhalers are stored in the first aid room in the temperate conditions specified in the manufacturer's instructions, out of reach and sight of students, but not locked away.

Expired or empty emergency inhalers are returned to a local pharmacy for recycling. Spacers must not be reused in school but may be given to the student for future home use. Emergency inhalers may be reused provided they are properly cleaned after use.

In line with the school's Supporting Students with Medical Conditions Policy and First Aid Policy, appropriate support and training will be provided to relevant staff, e.g., first aid staff, on the use and administration of 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 documents will indicate where the attack took place, how much medication was given, and by whom. The student's parent/carers will be informed of the incident in writing.

The Lead First Aider, Deborah Harper, is responsible for overseeing the protocol for the emergency inhaler, monitoring its implementation, and maintaining an asthma register.

The Lead First Aider, Deborah Harper, oversees the supply of salbutamol inhalers and is responsible for:

- Checking that inhalers and spacers are present and in working order, with enough doses, monthly.
- 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.

Symptoms of an asthma attack

Members of staff will look for the following symptoms of asthma attacks in students:

- 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

Younger students may express feeling tightness in the chest as a 'tummy ache'.

Response to an asthma attack

In the event of an asthma attack, staff will follow the procedure outlined below:

- Keep calm and encourage students to do the same.
- Encourage the student to sit up and slightly forward – 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 student unattended.
- If necessary, summon a suitably trained member of the first aid staff to care for the student and assist with administering an emergency inhaler.
- Ensure the student takes two puffs of their reliever inhaler (or the emergency inhaler) immediately, preferably through a spacer.
- Ensure tight clothing is loosened.
- Reassure the student.

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 student 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 student has reached 10 puffs:

- Call 999 for an ambulance.
- If an ambulance does not arrive within 10 minutes, the student can administer another 10 puffs of the reliever inhaler as outlined above.

Staff will call 999 immediately if:

- The student is too breathless or exhausted to talk.
- The student is going blue.
- The student's lips have a blue or white tinge.
- The student has collapsed.
- You are in any doubt.

Emergency procedures

Staff will never leave a student having an asthma attack unattended. If the student does not have their inhaler to hand, staff will send another member of staff or student to retrieve their spare inhaler. In an emergency, members of school staff are required to act like a 'prudent parent', i.e. making careful and sensible parental decisions intended to maintain the student's health, safety and best interests.

As reliever medicine is very safe, staff will be made aware that the risk of students overdosing on reliever medicine is minor. Staff will send another student to get another member of staff if an

ambulance needs to be called. The student's parent will be contacted immediately after the ambulance is called.

A member of staff should always accompany a student who is taken to the hospital by ambulance and stay with them until their parent/carer arrives. Generally, staff will not take students to the hospital in their own car unless in exceptional circumstances, e.g. where a student needs 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 student's parent/carers 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 obtain medical attention in the student's best interests.
- The staff member will be accompanied by one other staff member, preferably one with first-aid training.
- Both staff members will remain at the hospital with the student until their parent arrives.

Record keeping

At the beginning of each school year, or when a student joins the school, parent/carers are asked to inform the school if their son/daughter has any medical conditions, including asthma, on their enrolment form.

The school keeps a register of all students with asthma, including medication requirements. Parent/carers will be required to inform the school of any changes to their son/daughter's condition or medication during the school year.

All emergencies will be recorded, and staff practice evaluated, in line with the First Aid Policy.

Exercise and physical activity

Games, activities and sports are an essential part of school life for students. All teachers will know which students in their class have asthma and will be aware of any safety requirements.

Outside suppliers of sports clubs and activities are provided with information about students with asthma taking part in the activity via the school's asthma register.

Students with asthma are encouraged to participate fully in PE lessons when they are able. Students 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 student's labelled inhaler will be kept in a box at the activity site. Classroom teachers will follow the same guidelines as above during classroom physical activities.

The school believes sport to be of great importance and utilises out-of-hours sports clubs to benefit students and increase the number of students involved in sport and exercise. Students 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 aware of the needs of students with asthma during these activities and adhere to the guidelines outlined in this policy.

The school environment

The school does all it can to ensure the school environment is favourable to students with asthma, and to the extent possible, that any chemicals used in art or science lessons are not potential asthma triggers. If chemicals known to be asthma triggers are used, asthmatic students will be taken outside the classroom and provided with support and resources to continue learning.

Monitoring and review

The effectiveness of this policy will be monitored continually by the Executive Principal. Any necessary amendments may be made immediately. The local academy governing board will review this policy annually.

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