

Bolton-le-Sands C of E Primary School



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C.E. Primary School

Asthma Policy

Policy owner	Mr Ian Gittins, Headteacher
Named senior leader for asthma safety	Mr Ian Gittins
Approved by	Governing Body
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1. Policy Statement

Bolton-le-Sands Church of England Primary School recognises that asthma is a common long-term medical condition which can affect a child's health, wellbeing, attendance, participation and ability to learn.

The school is committed to supporting pupils with asthma so that they can participate fully and safely in school life, including lessons, physical education, play, school trips, residential visits and extracurricular activities.

We will work in partnership with parents/carers, pupils, healthcare professionals and other relevant agencies to ensure that pupils with asthma receive appropriate support and that staff know how to recognise and respond to asthma symptoms and asthma attacks.

This policy forms part of the school's wider arrangements for supporting pupils with medical conditions.

The policy has been developed with reference to:

- Department for Education statutory guidance **Supporting pupils with medical conditions at school**;
- Department of Health and Social Care guidance **Emergency asthma inhalers for use in schools**;
- Lancashire County Council's current **Medicine Safety** guidance;
- advice from **Asthma + Lung UK**;
- relevant NHS guidance and individual healthcare advice.

Lancashire County Council advises schools to follow the appropriate national statutory guidance, which supersedes its previous local guidance on medicine safety.

The Department for Education confirmed in July 2026 that the existing statutory guidance on supporting pupils with medical conditions remains in force while revised guidance is being developed.

2. Aims

The aims of this policy are to:

1. Ensure pupils with asthma are supported safely and consistently.
2. Ensure pupils have **immediate access to their prescribed reliever inhaler** when required.
3. Ensure staff know how to recognise asthma symptoms and respond appropriately to an asthma attack.
4. Ensure parents/carers and, where appropriate, pupils are involved in decisions about managing asthma in school.
5. Maintain accurate and accessible asthma records.
6. Ensure appropriate consent is obtained for the use of medication and emergency inhalers.
7. Ensure asthma medication is stored securely but remains readily accessible.
8. Ensure asthma medication is available during PE, sports, playtimes, educational visits and other activities away from the classroom.
9. Ensure staff receive appropriate information and training.
10. Support pupils to develop confidence and independence in managing their asthma as appropriate to their age and level of understanding.
11. Minimise disruption to learning and enable pupils with asthma to participate fully in school life.

3. What is Asthma?

Asthma is a common condition affecting the airways. Symptoms can include:

- coughing;
- wheezing;
- shortness of breath;
- difficulty breathing;
- chest tightness.

Asthma symptoms and triggers vary between individuals.

Common triggers may include exercise, cold air, viral infections, pollen, dust, animals, smoke, pollution, stress and other individual triggers.

Every pupil's asthma should therefore be considered individually and staff should follow the child's asthma action plan or individual healthcare plan where one is available.

4. Identification and Registration of Pupils with Asthma

The school will maintain a **whole-school Asthma Register**.

A pupil should be added to the register when the school is informed that they:

- have a diagnosis of asthma; or
- have been prescribed a reliever inhaler for asthma or suspected asthma.

The Asthma Register will be maintained by the school's **Designated Medical Conditions Lead** and will be accessible to appropriate staff on a need-to-know basis.

The register will contain, as appropriate:

- pupil's name;
- class;
- diagnosis/status;
- prescribed reliever inhaler;
- whether a spacer is required;
- known triggers;
- relevant allergies;
- emergency contact details;
- whether an asthma action plan/IHP is held;
- parental consent for the use of the child's medication;
- parental consent for use of the school's emergency inhaler, where applicable;
- location of the child's inhaler;
- date of last review/update.

The register will be reviewed regularly and updated whenever the school is informed of a change.

5. Individual Asthma Record Card

Every pupil identified as having asthma will have an **individual Asthma Record Card**.

A copy will be held:

- in the pupil's classroom records;
- within the school office/medical records system;
- alongside relevant medication arrangements where appropriate.

The Asthma Record Card will provide staff with clear, concise information about the pupil's asthma and what action should be taken.

The card should include:

- pupil's name and class;
- photograph where appropriate;
- asthma diagnosis;
- usual symptoms;
- known triggers;
- prescribed inhaler and dosage/instructions;
- spacer requirements;
- emergency contact information;
- details of the child's asthma action plan/IHP where applicable;
- parental consent information;
- emergency inhaler consent where applicable;
- date reviewed;
- any additional relevant instructions.

Information will be treated confidentially and shared only with staff who need the information to support the pupil safely.

6. Parent/Carer Information and Consent

When the school is informed that a child has asthma, the school will provide parents/carers with an **Asthma Parent Information and Consent Slip**.

Parents/carers will be asked to provide:

- confirmation of the child's asthma;
- details of the prescribed reliever inhaler;
- dosage/instructions;
- information about the child's usual symptoms and triggers;
- information about any spacer;
- an up-to-date asthma action plan where available;
- emergency contact details;
- consent for school staff to support the child with their inhaler;
- consent for the child to use the school's emergency inhaler, where the school holds one.

Parents/carers should inform the school immediately of any changes to their child's asthma, medication or treatment.

The school will request updated information whenever there is a significant change in the child's condition or treatment and as part of its regular review process.

7. Individual Healthcare Plans

Where appropriate, an **Individual Healthcare Plan (IHP)** will be developed for a pupil with asthma.

An IHP may be particularly appropriate where:

- the pupil has severe or poorly controlled asthma;
- the pupil has experienced significant asthma attacks;
- asthma has a substantial impact on school life;
- the pupil requires additional support;
- emergency medication arrangements require specific instructions;

- staff need detailed information about the child's individual needs.

The IHP will be developed in partnership with the pupil, parent/carer and relevant healthcare professionals where appropriate.

The plan will explain:

- the child's medical condition;
- individual symptoms and triggers;
- medication and dosage;
- what support the child requires;
- what to do during an asthma attack;
- emergency arrangements;
- arrangements for PE, trips and other activities;
- review arrangements.

The DfE statutory guidance encourages schools to use individual healthcare plans to ensure that the needs of pupils with medical conditions are clearly understood and appropriately supported.

8. Asthma Inhalers and Storage

Each pupil's prescribed reliever inhaler will be stored in an identified **Asthma Storage Box** in the classroom or other agreed accessible location.

The storage boxes will be:

- clearly labelled **ASTHMA INHALERS**;
- clearly identified for the relevant class/year group;
- readily accessible to staff;
- accessible quickly in an emergency;
- away from direct heat and inappropriate environmental conditions;
- organised so that each pupil's medication is clearly identifiable.

Medication must **not be stored in a location where access is unnecessarily delayed during an asthma attack**.

The school will ensure that inhalers are readily accessible whenever the pupil is on school premises.

Asthma + Lung UK advises that reliever inhalers should be close to children and not kept somewhere difficult to access, such as a locked cupboard.

Where a pupil is sufficiently mature and capable of managing their own inhaler, the school may support them to carry it with them in accordance with their individual healthcare needs and school arrangements.

For younger pupils, or pupils who cannot safely take responsibility for their own medication, the school will ensure that their inhaler is kept in a safe but immediately accessible location.

9. Medication Requirements

All prescribed inhalers provided to school should:

- be in the original packaging where applicable;
- clearly display the pupil's name;
- have the pharmacy label attached;
- be within the expiry date;
- be in usable condition;
- be accompanied by a spacer where prescribed/required.

Parents/carers are responsible for ensuring that medication supplied to school is in date a