



THE  
**NEW GUILD**  
TRUST

Asthma Policy

**POLICY**

This policy has been adopted on behalf of all academy schools in The New Guild Trust:

**Moorpark Junior School  
Jackfield Infant School  
Alexandra Junior School  
Alexandra Infants' School**

**Approval and Review**

Committee to Approve Policy	Trustee Board
Date of Trustee Board / Academy Committee Approval	March 2025
Chair of Trustee Board / Academy Committee	Mrs L Eagle
Signature	<i>L. Eagle</i>
Accounting Officer	Mrs K Peters
Signature	<i>K. Peters</i>
Policy Review Period	12 months
Date of Policy Review	February 2026

<b>Version Control</b>			
<b>Version</b>	<b>Date Approved</b>	<b>Changes</b>	<b>Reason for Alterations</b>
Initial	Feb 2023	New policy	
	Feb 2024	No changes	
	Feb 2025	No changes	

## **CONTENTS**

1. Introduction
2. Purpose
3. Aim
4. Role of the New Guild Trust
5. Organisation
6. Procedure
7. Storage
8. Flow chart – Signs of an attack

## 1. INTRODUCTION

The New Guild Trust recognises that asthma is an important condition and all staff have received training in how to deal with a child who may suffer an attack. The Trust welcomes students with asthma.

## 2. PURPOSE

The purpose of the policy is to ensure that all staff, parents and governors within each individual school are aware of the contents of the policy and recognise the importance of the policy. This policy has been written with advice from Asthma UK and the Department for Children, Schools and Families in addition to advice from healthcare and education professionals.

## 3. AIM

- To encourage children with asthma to participate fully in school life.
- To recognise the need for immediate access to inhalers.
- To attempt to provide a school environment as favourable as possible to asthmatic children.
- To provide training for staff from specialist nursing teams (at least every 2 years) to promote a good understanding of asthma and what to do in the event of an attack and give, if necessary, emergency treatment.
- To inform parents of attacks and any treatment given.
- To work with parents, governors, staff and the School Health Service to ensure the successful implementation of the New Guild Trust's Asthma Policy.

## 4. ROLE OF THE NEW GUILD TRUST

The New Guild Trust will not assume responsibility for the routine treatment of asthma which remains the prerogative of the parent, in conjunction with the child's G.P.

## 5. ORGANISATION

It is the responsibility of parents/carers to inform the individual school that their child is asthmatic.

It is the responsibility of the individual school to provide parents/carers with an Asthma Care Plan.

It is the responsibility of the parents/carers to return the signed Asthma Care Plan and to leave an inhaler, with a prescription label identifying the child, in school. All children who are diagnosed as asthmatic **must have their own inhaler in the individual school at all times**. It is the responsibility of parents/carers to check medication expiry dates.

On receipt of the signed Asthma Care Plan and inhaler, with a prescription label identifying the child, it is the responsibility of the individual school to add the child to the Asthma Register and to follow the procedure below as appropriate.

Once informed by parents/carers, class teachers are responsible for ensuring that children are added to/taken off the Asthma Register as appropriate.

Parents/carers will sign a notification slip if their child no longer has asthma and does not require an inhaler or asthma medication at each individual school.

## 6. PROCEDURE

A child who is known to be displaying asthmatic symptoms will be accompanied by an adult at all times.

If a child displays asthmatic symptoms they will be handed their inhaler and supported in administering their medication as appropriate.

If symptoms persist, parents/carers will be notified to come to the school immediately. A second dose will be administered.

In the case of an emergency, the school will call the emergency services and parents/carers immediately.

A record will be kept in each classroom of any medication given including the date, time, supporting adult and medication administered.

Parents will be notified verbally on the same day about medication that has been administered. Staff will sign to say that parents have been informed.

### **Physical Education**

The Trust recognises that taking part in sports is an essential part of school life and important for the health and well-being and children with asthmas are encouraged to participate fully. Symptoms of asthma are often brought on by exercise and therefore, each student's labelled inhaler will be available at the site of the lesson.

### **School Trips/Residential Visits**

The Trust will ensure that no pupil will be denied the opportunity to take part in Trust trips residential visits because of asthma, unless so advised by their GP or consultant. The pupil's inhaler will be readily available to them throughout the trip, being carried by the class teacher/group leader to whom the child is assigned.

For residential visits, staff will be trained in the use of regular controller treatments, as well as emergency management. It is the responsibility of the parent/carer to provide written information about all asthma medication required by their child for the duration of the trip. Additionally, parents/carers must be responsible for ensuring an adequate supply of medication is provided. Group Leaders will have appropriate contact numbers with them.

## **7. STORAGE**

The Trust will follow these good practice guidelines for the storage of inhalers:

- Inhalers will never be locked away or kept in the school office
- All students with asthma will have rapid access to their inhalers as soon as they need them.
- Inhalers will always be taken with the child when moving out of the classroom for lessons, trips or activities.

**Emergency Inhaler** - if the child's inhaler is not available or is unusable, the child will receive appropriate medication from an inhaler held by the individual school for such emergencies. Consent for the use of this inhaler will be part of the child's individual Asthma Care Plan. It is the responsibility of the individual school to monitor the expiry date of any emergency inhaler.

This policy will be reviewed annually.

# Signs of Asthma Attack

Signs of Asthma Attack

Administer 2 puffs of **blue reliever** medication  
**STAY CALM**

After 2-3 minutes

Improved

Return to normal activities.

Document episode in the child's medical record.

Dose may be repeated if symptoms return.

Inform parent/carer at end of day.

If at any stage, the symptoms appear to be worsening i.e. more breathless, difficulty in speaking, more distressed, change of skin colour dial 999 for an ambulance immediately. Continue to use the **blue inhaler** whilst waiting for help.

No Improvement

Administer up to a further 8 puffs of **blue reliever** medication (through spacer device if available) 1 puff every minute.

Improved

Contact Parent/Carer

No Improvement/Difficulty Talking/Obvious Distress/Pale Skin/Dusky/Collapse  
**DIAL 999 IMMEDIATELY**

Remain with child reassure and keep calm. Administer up to a further 10 puffs **blue reliever** medication whilst waiting for help.

## Signs & Symptoms

Cough  
Wheezing  
Tight Chest  
Shortness of Breath  
Tummy ache  
(younger child)

**NB Not all symptoms need to be present for a child to be having an asthma attack**