

**Managing Asthma at Warden Park Secondary Academy**

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## Managing Asthma at Warden Park Secondary Academy

### Contents

1. Introduction	
2. Parent/Carer Responsibilities	
3. Student Responsibilities	
4. Dissemination of Information	
5. Medical Welfare Officer (MWO) Responsibilities	
6. Individual Staff Responsibilities	
7. Management of Mild to Moderate Asthma Symptoms	
8. Management of Severe Asthma Attack	
9. Instructions for using a Spacer (aero-chamber) Device	
10. Offsite trips	
11. Further information	
12. Linked policies	
13. Version control	
14. Appendix Management of Mild to Moderate Asthma Symptoms	

### 1. Introduction

- 1.1. The Local Governing Body and staff of Warden Park Secondary Academy wish to ensure that students with medically diagnosed needs/conditions receive appropriate care and support at the academy, thereby also supporting their attendance.
- 1.2. **Asthma** is a common lung condition that causes occasional breathing difficulties. It affects people of all ages and often starts in childhood. There's currently no cure but there are simple treatments that can help keep the symptoms under control. The main symptoms are wheezing, breathlessness, a tight chest and coughing. Symptoms may be triggered by exercise or allergies. An **asthma attack** is a worsening of symptoms which can occur over a few days or suddenly.

This document outlines specific procedures for Warden Park Secondary Academy to provide an effective management system to support individual students with asthma who may require access to medication and first aid support during the academy day in accordance with advice and guidance contained within the publication 'Supporting Students at School with Medical Conditions', DfE,2014.(updated 2017)

<https://www.gov.uk/government/publications/supporting-students-at-school-with-medical-conditions--3>

- 1.3. The purpose of this policy is to ensure all governors, staff and parents/carers are aware of the procedures and responsibilities in ensuring the safety and welfare of students with asthma in the academy.

## **2. Parent / Carer Responsibilities**

- 2.1. Parents/carer of all students enrolling at the academy must complete an admissions booklet which includes a Student Medical Information form on which they must indicate that their child is asthmatic and what medications they use.
- 2.2. Parents/carer are responsible for making sure their child carries their reliever inhaler on them at all times.
- 2.3. Parents/carer are responsible for making sure their child knows how to use their inhaler / spacer device correctly.
- 2.4. Parents/carer may lodge a spare inhaler in the medical room. This must be in date and in its original packaging with child's name, expiry date and dose/dispensing instructions.
- 2.5. Parents/carer are responsible for ensuring they inform the Academy of any changes in their contact details.
- 2.6. Parents/carer are responsible for informing the Medical Welfare Officer (MWO) of any new information with regard to their child and their asthma management.

## **3. Pupil Responsibilities**

- 3.1. Students must carry their reliever inhaler on them at all times, including to all PE lessons – indoor and outdoor.
- 3.2. Students must be competent in the use of their inhaler. If they require an aero-chamber (spacer) device to assist them they must carry this also.
- 3.3. Students must let a member of staff know if they are struggling with their asthma so medical help can be sought.

## **4. Dissemination of Information**

- 4.1. Information from Student Medical Information forms will be entered by Year 7 administrator or Data department into academy MIS (SIMS – section 7 Medical
  - 4.1.1. Medical Conditions – Asthma
  - 4.1.2. Medical Notes – any additional information given by parent/guardian.
- 4.2. The Data department will transfer this information into Go4Schools so it appears in Class Passport for staff awareness.
- 4.3. Where a parent/guardian has contacted the medical room to inform them of any specific information with regard to their child and their asthma management, this information will be disseminated to all relevant staff by the MWO.

4.4. The MWO will maintain a folder in Google Team Drive – Medical – Asthma which will contain this policy, a shortened document for procedure during an asthma attack (**Section 7 & 8**) and any Individual Care Plans held for students with asthma.

## 5. Medical Welfare Officer (MWO) Responsibilities

5.1. Once the Student Medical Information forms have been received by the Medical Room a letter will be sent to the Parent/guardian informing them of the school's policy that their child must carry their reliever inhaler on them at all times and that they may lodge a spare in the medical room if they wish to do so.

5.2. MWO will update records as new information is given by parent/guardian.

5.3. Any spare inhalers for named students will be held in the inhaler section of the first aid tray in the medical room, which is never locked.

5.4. The MWO will also purchase a spare emergency reliever inhaler of Ventolin. This may be used by any student who has been identified by their parent/guardian as asthmatic and who uses Ventolin but who has misplaced / lost / forgotten their inhaler and is assessed by the MWO as needing to use a reliever inhaler.

5.5. The MWO will purchase a spare aero-chamber device (spacer) for use in an emergency.

5.6. Spare named inhalers will be sent on school trips by the MWO.

## 6. Individual Staff Responsibilities

6.1. Staff will be aware, by using the Class Passport, of any students who suffer from asthma.

6.2. Staff will be aware of any specific information relevant to individual students by reading the e-mails sent by MWO and referring to Google Team Drive.

6.3. Staff will be aware of how to deal with the symptoms of mild, moderate and severe asthma by referring to the information on Google Team Drive.

## 7. Management of Mild to Moderate Asthma Symptoms

### Symptoms

- Wheeze
- Breathlessness (but still able to speak in sentences)
- Breathing rate increasing
- Tight chest
- Coughing

## Treatment

- Pupil to sit down quietly
- Loosen tie / shirt collar
- Use reliever inhaler, with spacer device if they use one, as prescribed by their GP / Asthma Nurse specialist – usually between 1-4 puffs
- Pupil should be able to make a good seal on the mouthpiece and hold their breath for 5 - 10 seconds after each inhalation
- If student fully recovered they can continue activity
- If not fully recovered accompany to medical room where MWO will assess to check symptoms not progressing to a severe attack.

## 8. Management of a Severe Asthma Attack

*If at all possible, assist student to the Medical Room **before** symptoms progress to this level. However, if symptoms appear very severe and/or are progressing quickly then call MWO / First Aider and treat in situ.*

### Symptoms

- Symptoms of cough, breathlessness, wheezing, tight chest getting worse
- Not responding to reliever inhaler
- Breathing getting faster
- Difficulty talking in full sentences
- Difficulty walking / lethargy
- Pale or blue tinge to lips / around mouth
- Appears distressed or exhausted

### Treatment

- Pupil to sit down quietly, upright (don't lie down) and try to take slow, steady breaths
- Encourage to remain calm, panicking will make things worse
- Take 1 puff of reliever inhaler every 30 to 60 seconds, up to a maximum of 10 puffs
- Pupil should be able to make a good seal on the mouthpiece and hold their breath for 5 - 10 seconds after each inhalation
- A spacer device may be used if the student is unable to obtain a good technique
- Call parent
- **CALL 999 for an ambulance if**
  - Symptoms no better after 10 puffs reliever inhaler
  - Symptoms worsening and Staff worried, even if 10 puffs not yet given
  - If the ambulance hasn't arrived within 15 minutes, repeat 1 puff ever 30-60 seconds up to 10 puffs
- Stay with the student, observe and reassure
- Assist student, who is conscious and breathing, in a sitting position
- If the student is not breathing normally, be prepared to start BLS routine

- Parent to accompany child to hospital or if they have not arrived a member of the staff leadership team will decide which member of staff can accompany
- **Post episode** - following any severe asthma attack episode, all staff involved will meet and discuss what occurred, offer support to each other, and discuss any need for improvement to any systems used.

## 9. Instructions for using a spacer device

- Students may use a spacer device.
- The medical room also keeps one with a face mask attached for emergency use in the Inhaler box directly beneath the AAI cupboard.
- A spacer device is useful when the student is unable to coordinate inhalation with releasing the medication due to breathlessness and/or cannot make a good seal on the mouthpiece.
- Shake the inhaler and insert it into the spacer. Face mask should be placed over the nose and held firmly to create a good seal.
- Release one puff of reliever into the chamber. The medication is held in the chamber until the student releases it through breathing in and out of the mouthpiece. If a good seal is in place the valve near the mouthpiece will click.
- Ensure the valve clicks 6 times to administer the medication from the chamber.
- Repeat to administer each additional puff.

## 10. Offsite Trips

10.1. Staff taking students offsite must inform the MWO in advance of a trip. A trip list will then be generated and sent to the teacher, informing them of any medical needs of the students going offsite.

10.2. All necessary medications, including spare inhalers, will be collected by the trip leader from the Medical Room and remain in the safe care of the trip leader and/or a nominated member of staff.

10.3. The MWO will also inform the trip leader of any Individual Care Plans in place, this can be accessed on WPSA Google Team Drive – Medical - Asthma

## 11. Further Information

11.1. Contact the Medical Welfare Officer on 01444 457881 ext. 265.

11.2. [Supporting Students at Schools with Medical Conditions](#), DFE 2015

## 12. Linked Policies

12.1 Managing Medicines WPSA –

## Appendix: Management of Mild to Moderate Asthma Symptoms

### Symptoms

- Wheeze
- Breathlessness (but still able to speak in sentences)
- Breathing rate increasing
- Tight chest
- Coughing

### Treatment

- Pupil to sit down quietly
- Loosen tie / shirt collar
- Use reliever inhaler, as prescribed, usually between 1-4 puffs. May also use a “spacer”.
- Pupil should be able to make a good seal on the mouthpiece and hold their breath for 5 - 10 seconds after each inhalation
- If student fully recovered they can continue activity
- If not fully recovered accompany to medical room where MWO will assess to check symptoms not progressing to a severe attack.



### Instructions for using a spacer (aero-chamber) device

- Some students may use a spacer device with their inhaler.
- The medical room also keeps one with a face mask attached for emergency use in the Inhaler box directly beneath the AAI cupboard.
- A spacer device is useful when the student is unable to coordinate inhalation with releasing the medication due to breathlessness and/or cannot make a good seal on the mouthpiece.
- Shake the inhaler and insert it into the spacer. Face mask should be placed over the nose and held firmly to create a good seal.
- Release one puff of reliever into the chamber. The medication is held in the chamber until the student releases it through breathing in and out of the mouthpiece. If a good seal is in place the valve near the mouthpiece will click.
- Ensure the valve clicks 6 times to administer the medication from the chamber.
- Repeat to administer each additional puff.

Volumatic spacer



Aero-chamber  
Spacer



Spacer with face mask



### **Management of a Severe Asthma Attack**

*If at all possible assist student to the Medical Room **before** symptoms progress to this level. However, if symptoms appear very severe and/or are progressing quickly then call MWO and treat in situ.*

#### **Symptoms**

- Symptoms of cough, breathlessness, wheezing, tight chest getting worse
- Not responding to reliever inhaler
- Breathing getting faster
- Difficulty talking in full sentences
- Difficulty walking / lethargy
- Pale or blue tinge to lips / around mouth
- Appears distressed or exhausted

#### **Treatment**

- Pupil to sit down quietly, upright (don't lie down) and try to take slow, steady breaths
- Encourage to remain calm, panicking will make things worse
- Take **1 puff of reliever inhaler every 30 to 60 seconds, up to a maximum of 10 puffs**
- Pupil should be able to make a good seal on the mouthpiece and hold their breath for 5 - 10 seconds after each inhalation
- A spacer device may be used if the student is unable to obtain a good technique
- Call parent
- **CALL 999 for an ambulance if**
  - Symptoms no better after 10 puffs reliever inhaler
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- Parent to accompany child to hospital or if they have not arrived a member of the staff leadership team will decide which member of staff can accompany
- **Post episode** - following any severe asthma attack episode, all staff involved will meet and discuss what occurred, offer support to each other, and discuss any need for improvement to any systems used.

## Document Version Control

Date	Version	Comment	Ratified by	Reviewer
8.1.19	1	Clarification of existing practice	WPSA LGB (30.1.19)	C. Granlund