

Bunscoil an Iúir

Ní neart go cur le chéile.



Polasaí Plúchta

Asthma Policy

Reviewed: November 2016

Ratified: 22/02/17

Bunscoil an Iúir:

- Welcomes pupils with asthma.
- Recognises asthma as an important condition.
- Encourages and helps children with asthma to participate fully in school life.
- Recognises the need for immediate access to reliever inhalers at all times.
- Attempts to provide a school environment as favourable as possible to asthmatic children.
- Ensures all staff are aware of asthma and know what to do in the event of an attack and will if necessary give emergency treatment.
- Will inform parents of attacks and any treatment given.
- Does not assume responsibility for the routine treatment of asthma (preventative therapy) which remains the prerogative of the parent in conjunction with their General Practitioner.

RECORD KEEPING

- On school entry, all children must have a data collection form completed therefore identifying children with asthma.
- The asthma consent form provided should be completed.
- An asthma care plan should be commenced.
- A list of children with asthma will be kept in the school office.
- A list of children with asthma will be kept in or near the teacher's desk, particularly when supply teachers are employed.
- A record of use of the child's inhaler must be kept on the log sheet provided, with all details completed.
- A copy of the notification letter should be kept on the child's record.
- If the same child has to use the inhaler more than once a term they should be brought to the attention of the school nurse. This may indicate a child inadequately treated and therefore at risk.

The School is advised to:

1. Commence a care plan for each child who has an inhaler (as highlighted by the return of the asthma proforma).

2. A copy of the care plan should be:

i) Sent to parents/carers

ii) Kept in an accessible Asthma Folder

3. A list of pupils with care plans should be kept and reviewed annually.

EMERGENCY PROCEDURE

Common Signs of an Asthma Attack

- Coughing, shortness of breath, wheezing, tightness in the chest, being unusually quiet, difficulty speaking in full sentences.

DO

- Keep calm - do not panic
- Encourage the pupil to sit up and forward - do not lie them down
- make sure the pupil takes two puffs of their reliever inhaler (usually blue)
- Ensure tight clothing is loosened
- Reassure the pupil.

If no immediate improvement - continue to make sure they take one puff of the reliever every minute for five minutes, or until their symptoms improve.

Call 999 or a doctor urgently if:

- The pupils symptoms do not improve in 5-10 minutes, they are too breathless to talk, their lips are blue, or if you are in any doubt.
- If symptoms do not improve, continue to give 1 puff of the reliever every minute until help arrives.
- Any pupil who has had an asthma attack will need a review by their GP/ Asthma Nurse as soon as possible.
- A child should never be left to sleep off an asthma attack because the symptoms appear to have disappeared. The child may have gone into 'silent asthma' a state of collapse.
- If you are in any doubt **ALWAYS** call for an ambulance.

HOW TO USE A SPACER DEVICE

1. Remove the cap from the spray and shake gently five or six times.
2. Put the inhaler into the hole at the end of the spacer.
3. Put the mouthpiece into the child's mouth keeping their lips behind the ring. Make sure the child's lips are sealed around the mouthpiece.
4. Encourage the child to breathe in and out slowly and gently (i.e. normally). You may hear a clicking noise which is the valve opening and closing- this is normal. If the child cannot move the valve, tilt the inhaler end of the spacer to keep the valve open.
5. Continue with this breathing pattern and press the medication canister down once (one puff). Leave the spacer in the mouth while five more breaths are taken.
6. Repeat as above if more puffs are required.
7. Shake the inhaler after every 2 puffs.
8. Remove the spacer from the child's mouth.

School Spacer

After use, the spacer should be washed in warm soapy water, not rinsed, and then left to dry naturally. You should not dry it with paper or tea towels.

In addition the spacer should be washed at the end of each term and inspected for signs of wears, cracks etc.

Asthma Care Plan and Medication: Consent

Dear Parent/Guardian,

If your child has been diagnosed with asthma and has been prescribed reliever therapy (Blue inhaler) please complete the first part of this form which gives your consent for school staff to give this if required.

I hereby give my consent for school staff to give my child reliever therapy for the treatment of an asthma attack/prior to PE if required. I understand that I will be informed when treatment has been given other than for routine treatment by my request.

Name of child:

Date of birth:

School:

Name of Inhaler:

Number of Puffs:

Signed Parent/Guardian: _____

Date: _____

If your child has an asthma attack, the schools emergency procedure will be followed.

A copy of your child's school asthma care plan will be sent to you.

Please ensure that your child has a SPARE reliever inhaler and spacer kept in school and that your child's inhaler is within its expiry date.

Bunscoil an Iúir School Asthma Care Plan

Name: _____ D.O.B: _____

<u>Identified Need</u>	<u>Action Plan</u>	<u>Step 1</u>	<u>Date:</u>
To promote optimum health by maintaining good control of Asthma symptoms.	School staff are able to identify when reliever inhaler is needed. Consent for medication in school. Easy access to inhalers whilst in school. To monitor and record inhaler use.	Staff Training completed.	
		<u>Step 2</u> To ensure appropriate consent forms are signed.	Consent form sent to parents.
		<u>Step 3</u> Parents to supply inhaler and spacer.	
		<u>Step 4</u> Parents to check expiry dates and change accordingly.	Inhaler expiry date:
		<u>Step 5</u> School staff should complete audit form and inform parent when reliever inhaler used during school day.	

Triggers (if known).....

Signatures: _____

(Parent/carer)

(School staff)

Review annually.

Notification to parent

School: _____ Date: _____

Dear parent/guardian of :

Your child has had problems with his/her breathing today which has required the use of their own inhaler.

Since this may indicate your child's asthma is not well controlled at this time you are strongly advised to see your own doctor or practice nurse as soon as possible.

Time inhaler given:

Yours sincerely,

Appendix 4

Date _____

Dear Parent of: _____

Name: _____ D.O.B.: _____

We are currently reviewing your child's School Asthma Care Plan.

Would you kindly return the updated form.

1. My child still requires a reliever inhaler in school.

2. My child no longer requires a reliever inhaler or care plan in school.

Please tick the appropriate box and return to school.

Parent / Carer Signature

Date -----

If you have any queries about your child's asthma care plan, please contact the school.

Please ensure that your child has a spare reliever inhaler and spacer in school and it is within its expiry date.

Yours sincerely,

Appendix 5

Dear Parent/Carer

I am informing you that your child's school asthma reliever inhaler has expired or is due to expire.

Would you kindly bring a new reliever inhaler into school as soon as possible?

Yours sincerely,

