

Executive Headteacher: Paula Warding

Head of School: Gemma Lavelle

Lark Hill Community Primary School,

Liverpool Street, Salford M5 4BJ

Tel: 0161 921 1390

Email: admin@larkhillprimary.uk

www.larkhillprimary.co.uk



Date	September 2025
Review Date	September 2027
Signed by Designated Governor	

Head Teacher	Executive Headteacher – Paula Warding Head of school – Gemma Lavelle
Asthma Lead Name & Job Role	Rachel Berry Assistant Headteacher and SENDCo
SENDCo Name	Rachel Berry
Asthma Champion Name & Job Role	Office Managers - Rebecca Davies
School Nurse / Link Nurse	Named School Nurse - Becky Cooper-Tongue
Contact Number	Named Link Staff Nurse - Amy Heywood 0161 2066081 (0-19 central team)
Date	Sept 2025
Policy Review Date	Sept 2027
Storage Location (if located in classrooms list individually)	
Individual pupils' inhalers are stored in their classroom	
Emergency Asthma Inhaler Storage Location (if applicable)	
Emergency asthma inhaler kits will be stored in; <ul style="list-style-type: none">• Early Years• On the corridor between Year 1 and Year 2• The PE cupboard• Outside the main office	



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- The new UKS2 building.

Asthma Register Storage Location

On SIMS

On Medical Tracker – school's medical management software



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1. Introduction

Asthma is the most common long-term medical condition in children. It is a chronic inflammatory condition affecting the airways that can be effectively managed to support a child's health, safety, and quality of life.

Asthma can impact a child's learning and daily life at school. Younger children, newly diagnosed pupils, or those with additional needs may require support from school staff to manage their condition safely. All children experiencing an asthma attack, regardless of age, will need immediate assistance from a responsible adult.

Under the Children, Schools and Families Act 2010 and 2014, schools have a legal duty to support children with medical conditions, including asthma. Staff awareness and understanding of asthma are essential to ensure pupils' safety, wellbeing, and full participation in school life.

This policy reflects DfE guidance and legislation, including:

- *Supporting pupils at school with medical conditions* (DfE, 2015)
- *Guidance on the use of emergency salbutamol inhalers in schools* (DfE, 2015)

The policy sets out how Lark Hill School will:

- Maintain an Asthma Register on SIMS and Medical Tracker and ensure each child has an asthma action plan (Appendix 1), updated annually by parents/carers.
- Provide appropriate supervision and ensure immediate access to inhalers, ideally in the classroom.
- Record inhaler use and notify parents if a child uses their reliever more than usual.
- Maintain an emergency asthma inhaler kit on site.
- Ensure staff receive training and updates, including e-LfH: Asthma in children and young people.
- Enable all children to fully participate in school life, including physical education and extracurricular activities.

By following this policy, the school provides a safe and supportive environment for all children with asthma while meeting its legal and safeguarding responsibilities.

2. Parental Responsibility and Record Keeping

Parents/carers must:

- Notify the school upon admission if their child has asthma.
- Inform the school of any changes to their child's condition, medication, or care needs.



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- Ensure accurate and up-to-date medical records, including annual completion of the asthma letter (Appendix 2).
- Provide an Individual Healthcare Plan (IHP) from a GP or qualified healthcare professional; if unavailable, complete the Asthma UK template. Review annually.
- Provide medicines in original pharmacy packaging, labelled with child's name, DOB, dosage, and expiry date.
- Collect expired or unused medication from school.

The school will:

- Maintain accurate records of inhaler use on Medical Tracker. Parents are notified automatically if their child uses their inhaler. Refusals are also recorded.
- Maintain an Asthma Register (SIMS and Medical Tracker), monitored by the Asthma Champion.
- Send a blank Asthma Plan and/or IHP to parents annually to ensure up-to-date information.
- Use the school emergency inhaler only with prior parental consent (Appendix 1) and notify parents afterward. Consent is reviewed annually.

3. Roles and Responsibilities

3.1 School Asthma Lead and Champion

The Asthma Lead and Champion will:

- Audit this policy annually with the Executive Headteacher or Head of School.
- Update all staff, including sports coaches, termly with the current asthma register.
- Ensure the asthma policy is read and understood by all staff.
- Share the policy with parents/carers and make it available on the school website.
- Check emergency inhaler kits regularly and replenish after use.
- Maintain accurate records of pupils' asthma on SIMS, including annual consent letters and IHPs.
- Monitor inhaler use and expiry dates; inform parents of impending expiries.
- Appropriately dispose of expired or spent inhalers in line with manufacturer guidance and legal requirements.



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- Keep their own training up to date and be confident to support in an emergency.
- Arrange regular asthma training for staff.

3.2 All Staff

All staff will:

- Be aware they are insured to administer medication under the school/LA public liability insurance.
- Know which pupils have asthma and their IHPs.
- Discreetly identify pupils with asthma in classrooms (first names only), including for supply staff.
- Ensure pupils have immediate access to inhalers, including during PE, breaks, fire drills, trips, and clubs.
- Integrate pupils fully into school activities unless advised otherwise by a healthcare professional.
- Log inhaler use on Medical Tracker and inform parents/carers.
- Supervise pupils to ensure safe inhaler administration.
- Know the location of emergency inhalers and notify the Asthma Lead if used.
- Bring inhalers, spacers, and IHPs on trips/clubs and return them afterward.
- Ensure inhalers pass to the next class each academic year; both sending and receiving teachers share responsibility.

3.3 Parents/Carers

Parents/carers are responsible for:

- Informing the school if their child has asthma or any changes.
- Providing an up-to-date IHP or completing the Asthma UK template (Appendix 1) annually.
- Maintaining accurate medical records via annual asthma letter (Appendix 2).
- Informing the school of all medicines needed during school hours, trips, clubs, or residential visits.
- Ensuring medicines are correctly labelled, in original packaging, and within expiry dates; obtaining replacements when notified.



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- Notifying the CFO if absence exceeds 15 days due to asthma, triggering application of the Supporting Pupils with Medical Conditions Policy.

4. Safe Storage of Medication

- Reliever inhalers and spacers must be stored in a location allowing unrestricted access, clearly labelled with pupil's name, DOB, medicine name, dosage, and expiry date.
- Keep inhalers within reach of pupils and accompany them for PE, breaks, fire drills, clubs, trips, and other off-site activities.
- Medicines must follow manufacturer storage instructions; do not store at school over summer holidays.
- Emergency inhalers must be readily available; secondary pupils self-managing must carry their inhalers.
- The Asthma Lead/Champion is responsible for:
 - Checking inhaler/spacer expiry dates at least half-termly.
 - Replacing inhalers before expiry.
 - Monitoring inhaler use and alerting parents/school nurse if frequent usage is observed.
- Appropriately dispose of expired or spent inhalers per manufacturer guidance and legal requirements.
- All inhaler use must be logged on Medical Tracker, including emergency inhalers; parents must be informed.

5. Physical Education and Activities

- All activities, including PE, trips, clubs, and residential visits, are inclusive for pupils with asthma.
- Staff monitor pupils struggling in PE for uncontrolled asthma and inform parents for medical review.
- Pupils must not be forced to participate if unwell.
- Ensure inhalers are available during activities:



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- Primary pupils: school-held inhalers
- Secondary pupils: carry own inhalers
- Staff are trained to recognise triggers during activities and minimise exposure.
- Risk assessments for trips include storage/access to medication, additional equipment, and emergency procedures.
- In emergencies, staff must act under duty of care, including administering medication.

6. School Environment

- Keep the environment safe for pupils with asthma.
- No pets (dogs, rabbits, guinea pigs) on school premises.
- Smoking strictly prohibited.
- Minimise common triggers: dust, mould, damp, viruses, air pollution, and idling vehicles.
- Staff consider triggers when planning activities to reduce exposure.

7. Students Who Miss School Due to Asthma

- Monitor attendance and identify pupils frequently absent or tired due to asthma.
- Contact parents/carers to discuss support strategies.
- Liaise with school nurse or healthcare professionals to ensure optimal asthma control.
- Asthma should not prevent pupils accessing education; reasonable adjustments will be made.
- Absence of 15+ days triggers the Supporting Pupils with Medical Conditions Policy and involvement of the CFO.

8. Asthma Attacks

- All staff trained to recognise and respond to asthma attacks.
- During an attack:
 - Stay with the pupil at all times.
 - Bring the inhaler (or school emergency inhaler if consented).



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- Never send the pupil to fetch the inhaler.
- Call **999** if symptoms do not improve after the recommended inhaler use.
- Notify parents/carers immediately.
- Post-attack: school nurse informed for follow-up and communication with healthcare providers.



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Appendix 1 – child Asthma action plan

Appendix 2 – Annual Parent/Carer Consent Form for Use of Emergency School Inhaler

November 2025

Dear Parent/Carer,

As part of our commitment to supporting children with asthma, Lark Hill Primary keeps an emergency salbutamol inhaler and spacer on site for use in the event that a child's own reliever inhaler is unavailable, broken, or empty.

This inhaler can only be used with the written consent of parents/carers, and only for pupils who have been diagnosed with asthma or prescribed a reliever inhaler (usually a blue inhaler).

Please complete and return the form below to confirm whether you give consent for your child to be administered the school's emergency salbutamol inhaler if required.

Kind regards,

Child's name			
Date of birth		Class	

My child has been diagnosed with asthma.

My child has been prescribed a reliever inhaler (blue inhaler).

Type of reliever inhaler prescribed: _____

I have provided school with a completed Asthma Action Plan.

I give consent for my child to be administered the school's emergency salbutamol inhaler and spacer, if their prescribed inhaler is not available, empty, or broken.

I do not give consent for my child to be administered the school's emergency salbutamol inhaler.

I understand that I will be informed if my child has used the emergency inhaler.

Parent/Carer name: _____

Signature: _____

Date: _____

Emergency contact number: _____

Appendix 3 – legal duties, definitions, and guidance

Legal duties:



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- Children and Families Act 2014
- Education Act 2002
- Children Act 1989 & 2004
- NHS Act 2006
- Equality Act 2010

Definitions:

- Asthma Lead
- Asthma Champion
- School Nurse
- Asthma Clinical Nurse Specialist (CNS)
- School Support Staff

Guidance:

Spacer Device Guides

- Asthma UK: inhaler/spacer videos
- RightBreathe resources
- IPCRG gallery for professional images

Posters

- How to recognise an asthma attack: [Beat Asthma](#)
- How to manage an asthma attack: [Beat Asthma](#)

Useful Resources

- [DfE Emergency Asthma Inhalers PDF](#)
- [DfE Supporting Pupils at School with Medical Conditions](#)
- [Asthma UK Schools Advice](#)
- [Elearning for Healthcare – Asthma](#)
- Additional videos and guides listed in original policy.

