

Prevention

Early intervention

Targeted support

Whole School Approach

- Health & Wellbeing Review has been completed with the Public Health 5-19 Service and a Health & Wellbeing Plan has been developed.
- Spiralling curriculum in place across all year groups which is clearly planned and includes teaching about looking after your health, importance of health professionals and how they can help, common health conditions, medicine safety and looking after others
- [Asthma policy](#) in place which includes clear expectations for staff, pupil and parents and includes emergency action plan.
- Designated staff and governor lead for asthma management.
- Engagement with parents, carers and relevant professionals in policy development.
- Effective procedures to develop [Individual Health Care Plan \(IHCP\)](#) or [Asthma plan - www.asthma.org](#)
- School has an [emergency inhaler kit](#)
- All medication are stored and administered in line with [policy](#)
- Staffs are trained and know what to do in the event of an [asthma attack](#).
- Children known to have a diagnosis of asthma are identifiable on the school database or school medical register and have their Asthma Plan or IHCP attached
- Asthma Plans are reviewed with parent annually or when poor asthma control is identified.
E.g. asthma attack in school or asthma is affecting attendance and attainment.

Signs of poor asthma control or undiagnosed asthma

- Breathless especially during any physical activity
- Coughing or wheezing
- Complaining of a tight or painful chest
- Lethargic and tired, reports not sleeping or coughing at night
- Off school at least once a month with asthma
- Taking their reliever inhaler (usually blue) more than 3 times per week.
- New diagnosis of asthma or wheeze and inhalers prescribed and brought into school
- Emergency inhaler has been used for the first time

- All concerns, incidents and actions recorded on school database and in School Asthma Record.

- If emergency inhaler has been used:
 - Record use in School Asthma Record
 - Give parent/carer letter [\(LT1\)](#) and advise them to take child to GP within 2 days
 - Send spacer home with parent and ask them to replace at GP appointment
 - Wipe emergency blue inhaler clean with alcohol wipe
 - If spare inhaler is not replaced by parent re-order from pharmacy.

- Ask parent/carer for copy of child's asthma plan from GP along with a reliever (blue) inhaler and spacer.
- Meet with parent to discuss support and Asthma Plan. Things to consider:
 - What are the asthma symptoms like at home?
 - Is a preventer inhaler prescribed and is it being used correctly at home
 - When was the last review appointment with asthma nurse, GP or Specialist?
 - Are there any difficulties complying with medication or attending health appointments which school could support with?

- Review Asthma Plan at least annually or when changes in support are identified by parent or school.

- Discuss with [Early Help Officer](#) if there are additional needs to be considered

Continuous or increased concerns of poor asthma control

- Emergency inhaler used for second time in a 4 weeks
- Reliever inhaler (usually blue) being used every day
- Parents not sharing supportive information or engaging with school support or the Asthma Plan
- Parents not taken child for GP or specialist appointment despite requests from school
- Attendance at school is decreasing. <80%
- Struggling to engage and achieve at school due to tiredness, lethargy, coughing, wheeze, breathlessness

ASTHMA ATTACK

- Reliever inhaler not helping
- Unable to talk or walk easily
- Skin colour pale
- Distressed
- Coughing & wheezing a lot
- Breathing hard and fast, upper body heaving

REFER TO CHILDS ASTHMA PLAN OR ASTHMA ATTACK EMERGENCY PLAN
(Assess and address any safeguarding concerns)

- Advice parent to request an emergency GP appointment
- Give letter [\(LT2\)](#) to parent/carer
- Send standard GP letter
- Meet with parents to review Asthma Plan and ensure copy is updated after GP visit
- Discuss with [Early Help Officer](#) or [the HUB](#)

- **Early Help Assessment**
With consent from parent and /or child if appropriate complete an [EHA](#)
- Invite GP or relevant health professional to the initial TAC meeting

- **Early Help Panel**
With consent take to EH panel to discuss if progress is slow or stuck.

- **External support & links**
[Asthma UK | Homepage](#)
[Asthma - NHS Choices](#)
[allergyuk.org](#)
[CCC - Early Help](#)
[Cumbria Local Safeguarding Children Board \(LSCB\)](#)
Chilids GP

Provide advice and support
Information and website addresses to be given to parent

Public Health 5-19 Service - Contact to arrange a Health & Wellbeing Review and plan
Public Health Nurses are able to provide support to address the health needs of children aged 5-19 years and signpost to appropriate services and resources.
www.cumbria.gov.uk/ph5to19/

IF CHILD IS ASSESSED TO BE AT IMMEDIATE OR SIGNIFICANT RISK OF HARM REFER TO SAFEGUARDING POLICY OR CONTACT SAFEGUARDING HUB TELEPHONE: 0333 240 1727

This pathway is to guide your response to a child aged 5–19 years who is presenting with health or wellbeing concerns. Please note this is NOT a diagnostic tool and age appropriate behaviour and safeguarding should always be considered