

Caban Y Faenol CYF

Asthma Policy

Asthma is the most common chronic childhood condition, and rates of asthma in Wales are amongst the highest in the world – affecting one in every nine children.

It is vitally important that Caban Y Faenol staff know how to care for children who suffer from asthma. Asthma is a long-term condition which affects the small tubes in the lungs known as airways. These carry air in and out of the body. If a child has asthma these airways have a tendency to swell and redden. When asthmatic children come into contact with an asthma trigger, such as pet hair, pollen, a virus etc., this can cause their airways to narrow, making it difficult to breathe. The condition can vary from an occasional cough to serious and life threatening symptoms.

Children's Rights

Ensuring health, safety and welfare is one of the ways that Caban Y Faenol demonstrates its respect for children's rights, as outlined by the United Nations Convention on the Rights of the Child, specifically:

- Article 3: All organisations concerned with children should work towards what is best for each child.
- Article 6: All children have the right of life. Governments should ensure that children survive and develop healthily.
- Article 15: Children have the right to meet together and to join groups and organisations, as long as this does not stop other people from enjoying their rights.
- Article 24: Children have the right to good quality health care and to clean water, nutritious food and a clean environment so that they will stay healthy.
- Article 29: Education should develop each child's personality and talents to the full. It should encourage children to respect their parents, and their own and other cultures.

Causes of Asthma

Everybody's asthma is different, and Caban Y Faenol will ensure that it knows the specific causes of asthma in the children who are under its care where possible. Among the likely causes are:

- Cold or Virus
- Physical Activity
- Sudden change in temperature or weather

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- Emotions
- Allergies (e.g. pollen, animals, dust, mould)
- Irritants (e.g. tobacco smoke, chemical pollution)

Asthma Treatment

There are two main types of asthma inhalers – preventers and relievers. Usually reliever inhalers are blue and it is taken by the child when symptoms present themselves. They relax the muscles that surround the narrow airways to make breathing easier.

(According to Asthma UK if a child needs to use an asthma reliever inhaler more than 3 times a week this asthma is poorly controlled and should be clinically re-assessed).

Preventer inhalers can be brown, sometimes other colours, and they must be taken every day, even if the child feels well, as this lessens the swelling of the airways. This means that the child is less likely to have a negative reaction when they come into contact with an asthma trigger. There are other ways some children control their asthma such as tablets / granules (montelukast) and anti-histamines. Preventer inhalers will not improve breathing in the case of a sudden asthma attack.

Most children under five will need to use a spacer device to help them use their inhaler effectively. This large plastic device is shaped like a plastic bottle. At one end is an opening for the mouth, and at the other is a hole to fit the inhaler. The spacer facilitates the use of inhalers and ensures that the child gets the correct amount of medication in their lungs. If the child is under three, perhaps they will use a face mask.

In 2014 legal changes made it possible for settings such as day care, afterschool clubs, cylchoedd meithrin, nurseries and schools to purchase salbutamol inhalers without prescription, for use in emergency situations.

Caban Y Faenol will:

- provide an opportunity for every child with asthma to take full part in the activities.
 - ensure that our environment, including the physical environment, social, and educational activities are suitable for children with asthma, e.g. especially when dealing with pets.
 - ask parents/carers/guardians for their children's asthma symptoms, how they can identify symptoms as they appear or worsen and what is likely to cause an asthma attack. Parents should also be asked how to administer reliever medication, e.g. whether the child uses separators (spacers). All staff should be made aware of the information given by the parents / carers / guardians. There is a template of an asthma plan that could be useful when discussing with parents on the website of Asthma UK.
1. Keeping a specific record of which children have asthma, and the medicines they take, together with a record of the guidance given by parents. The record should be updated on a regular basis.

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2. Ensuring that reliever medicines are within their use-by-date.
3. Ensuring that all staff members have received appropriate training on the right method of administering the medicines. Staff should use this website (<https://www.asthma.org.uk/advice/inhalers-medicines-treatments/using-inhalers/>) approved by medical experts. Staff can also ask parents/carers/guardians , or, if necessary, a doctor or other competent person. This should be certified on the MI form and it should be ensured that the training is updated once a year.
4. Understanding that all children with asthma need immediate help to use reliever inhalers. As such, the reliever inhalers should not be locked up, and all staff should know where they are kept. Ensure that access to the inhaler is available at all times e.g. on visits outside of the setting.
5. Ensuring that Caban Y Faenol has medication, a reliever inhaler and spare spacer for each child who requires them. Ensuring that parents/carers/guardians have labelled each medication, inhaler and spacer with the child's name.
6. Ensuring that a robust process is in place so that parents/carers/guardians are notified each time the child has shown symptoms of asthma or has had to use medication to alleviate the condition whilst in Caban Y Faenol. Parents/carers/guardians should notify if the child is unwell or has used reliever inhalers outside of Caban Y Faenol.
7. Working in partnership with all of the staff, parents/carers, doctors and nurses, to ensure that the policy is implemented and maintained successfully.
8. Keeping an Asthma Register with the children's inhalers, so that details are on hand of which children in the setting suffer from asthma, and which medications are needed and when.

Asthma Attacks

Caban Y Faenol staff will know how to recognise an asthma attack, and they will respond quickly as an asthma attack can deteriorate quickly.

Early signs of an asthma attack can include:

- Constant coughing (while resting)
- Shortage of breath or difficulty breathing (child may be breathing quickly and with effort)
- Wide nostrils (the nostrils move when breathing)
- Unable to speak or complete sentences
- They may be trying to tell you that their ' chest feel tight' (younger children may express this as stomach pain)
- Being unusually quiet
- Lips turning blue

If a child suffers a sudden attack of asthma Caban Y Faenol staff will:

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- 1 Help the child sit up straight and calm
- 2 Help the child take a puff of the inhaler (usually blue) for 30-60 seconds, up to 10 times. (Use a spacer if available)
- 3 Call 999 for an ambulance if:
 - They don't feel better after 10 puffs
 - Their symptoms get worse – e.g. cough, breathlessness, wheeze, tight chest or 'tummy / chest ache'
 - You're worried any time
- 4 Repeat step 2 if the ambulance takes longer than 15 minutes

Always call 999 immediately if you don't have a reliever inhaler with you.

If you go to A&E, remember to take your child's written asthma plan with you – even if it's a photo on your phone

Informing Parents

At least one parent or person with parental responsibility must be notified straight away. They should also be given written notice following an asthma attack so that the parent can transfer this information to the child's doctor. A copy of that letter should be kept in the child's health record.

Recording the event:

It will be necessary to record:

- 1 Date/time/location of incident and when medication was used
- 2 How many puffs of the inhaler was given and was a separator used? (Was the child given the separator to keep? Caban Y Faenol should not re-use it)
- 3 Details of the asthma attack; what happened, did the child go home / receive medical attention / were parents informed ... etc.

A copy of that letter should be kept in the child's health record.

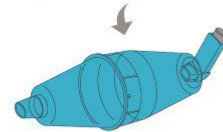
The event should be recorded in the incident book and Care Inspectorate Wales (CIW) should be informed.

If a child under 12 has an asthma attack

- 1** Help them sit up straight and keep calm.
- 2** Help them take one puff of their reliever inhaler (usually blue) every 30-60 seconds up to 10 puffs.
- 3** Call 999 for an ambulance if:
 - they don't feel better after 10 puffs
 - their symptoms get worse – e.g. cough, breathlessness, wheeze, tight chest or 'tummy/chest ache'
 - you're worried at any time.
- 4** Repeat step 2 if the ambulance takes longer than 15 minutes.



(Use a spacer if you have one)



www.asthma.org.uk

