

Asthma Policy

Blackwell Montessori Nursery Ltd is committed to care for all children regardless of their medical needs as long as we have a member of staff trained to attend to the medical needs in question. We are aware that the number of children with asthma has increased significantly over the past few years and there are likely to be several children with this condition in our setting.

The aim of this policy is to outline everybody's rights and responsibilities to make sure proper treatment and support is provided for children with asthma.

Children with asthma are welcome to join our setting and will be encouraged to participate fully in all activities. We have a non – smoking policy in our setting. All our staff members attend a Paediatric First Aid training on a regular basis to make sure there is always a trained First Aider on the premises. In addition to this some of our staff members are also trained to administer inhalers.

We need to be informed if your child has asthma or develops this condition after joining our setting. If your child has been prescribed medication (e.g. inhaler) we need to be provided with their medication during the whole time your child is in our care.

Parents/legal guardians must complete and sign a Health Care Plan and a Medication Form before the child is admitted onto our premises.

We are aware that a child who has been prescribed a controlled drug may legally have it in their possession, however due to the age of the children we look after we believe it is safer to store medication out of reach of children. All medication will be easily accessible to members of staff trained to administer it and will be taken on outings etc.

If you believe your child is old enough to have their medication with them at all times (e.g. carrying an inhaler pouch) you must specify this in their Health Care Plan.

Every child has to be provided with their own medication, siblings cannot share one inhaler even if they have been prescribed with the same medication. You will be informed every time your child has needed their inhaler and will have to sign a medical form when you pick up your child. It is parent's responsibility to return any expired medication to pharmacy and replace used up medication immediately. Your child will not be admitted onto our premises without their medication.

If your child is having difficulty breathing they will be given their prescribed dose of medication. We will wait for a maximum of 5 minutes for their condition to improve before contacting emergency services. If your child condition worsens during this time or they are suffering a severe asthma attack we reserve the right to contact emergency services immediately. You may have been advised by your doctor to wait less than 5 minutes – you must tell us about this in your child's Health Care Plan.

We believe in working together with parents to ensure that their children are in a safe, caring environment. To do this we need you to tell us every time your child's condition changes. All information is important to us.

Blackwell Montessori Nursery Ltd reserves the right to refuse admission to a child whose parents fail to comply with this policy.

Asthma

Health Care Plan

Date: _____

Child's full name: _____

Date of Birth: _____

Child's GP details: _____

How long has your child suffered with asthma: _____

What causes your child's asthma: _____

What symptoms does your child usually show: _____

Name of the medication to be given: _____

Dosage to be given: _____

Does your child need to use spacer or face mask with their inhaler? (you will need to provide these) Yes / No

Is your child old enough to take their medication themselves or will they need help: _____

Emergency services will be contacted if your child's condition worsens or does not improve within 5 minutes of having their medication , please let us know if you have been advised by your GP to wait less than 5 minutes: _____

Emergency contacts:

Name	Contact number	Relationship to the child

Additional information: _____

Parent/legal guardian signature: _____ Date: _____

Staff signature: _____ Date: _____