

# ADMINISTERING MEDICINE/ASTHMA POLICY

"أولادكم في الله يوصيكم "Allah enjoins you concerning your children" Surah Nisaa

#### Aim:

To consider medical advice on the best procedures to support asthmatic children in madrassah and to enable them to take part as fully and safely as possible in all madrassah activities.

- 1. Copies of the pupil's specific medical needs (as advised by parents) will be kept in the madrassah office, and is handed in to class teacher to alert the teacher to the needs this includes asthma. Their names will be highlighted in the register and a red M placed next to their name. Teachers MUST ensure these records are kept up-to-date.
- 2. Pupils with inhalers will be responsible for their own inhaler so that they always have immediate access to it. If necessary, this includes the inhalers being taken out of madrassah for off-site activities.
- 3. It is important that all adults involved with pupils in madrassah or madrassah associated activities, should receive advice on practical asthma management.
- 4. Parents will be informed of the arrangements by letter. Information for each pupil will be updated as appropriate and at least at the beginning of each madrassah year.

## **Obtaining and Recording Accurate Information:**

The madrassah will ask all new parents whether their pupil has asthma. As well as keeping a note on the pupil's personal file. A special needs record will be kept at madrassah and will be updated, as necessary.

The special needs record will show:

- Personal details, hospital reference, if applicable;
- Treatment needed regularly (preventer);
- Relief treatment (relievers) if required.

#### Access to Medicines and Inhalers:

Where medicines/inhalers are necessary, (i.e. prescribed by a Doctor), pupils will need free, permanent access to their location. All other medicines will be stored in the madrassah office. All inhalers and capsules will be labelled with the pupil's name and class.

There are two main types of inhalers:

- I. **Relievers** clearly relieve the symptoms of asthma common examples are called 'Ventolin' and 'Bricanyl' and are usually BLUE in colour.
- II. **Preventers** relieve inflammation and are clearly designed to prevent the onset of asthma common preventers are 'Beclafort', 'Becatide' and 'Intal' and are usually BROWN in colour.

N.B. Staff cannot administer medicines to pupils. However, pupils will be allowed to self-administer if written authority is provided by both the parents and the pupil's G.P.

#### **Extra-Curricular:**

Staff should be aware of those pupils who may become wheezy during exercise and who may need to use their inhaler before taking part. Breathlessness during an activity should result in the pupil withdrawing from the activity, for that lesson.

#### Animals:

Staff needs to be aware that some animals can cause a sudden and severe reaction. Pupils who react in this way, should not approach, handle or care for the animals.

# **Returning from Absence Due to Illness:**

We do not encourage pupils to miss lessons or to stay indoors during break, so before a pupil is sent back to madrassah after an illness, parents should ensure that they can cope with the whole madrassah day.

## **Long-term Medical Problems:**

Pupils suffering from conditions which might require emergency treatment at any time, such as asthma, epilepsy or diabetes, will be highlighted in the register with a red M next to their name and a red medical form at the front of the register will provide relevant information. Teachers MUST ensure these sheets are kept up-to-date.

# **Cleaning Regimes:**

Excessive dust from 'walked in' dirt can contribute to respiratory problems and should be removed by vacuuming on a regular basis rather than by normal sweeping. Filters on warm air central heating systems should be checked and cleaned regularly in particularly dusty environments. Such filters should always be cleaned before the heating is switched on in the autumn.