

How can a school best support Children & Young people with asthma

Sammy Ndlovu-Dawika


Paediatric Respiratory Specialist Nurse

Camden Asthma Friendly Schools Initiative



North Central London
Health and Care
Integrated Care System

1.1M
children suffer
from asthma



75%
are
avoidable



Asthma Context



2 out of 3
of these deaths
are preventable



Asthma is the most common long-term medical condition in children in the UK

Around 1 in 11 CYP have asthma = 3 in a class of 30

- UK has one of the highest prevalence, emergency admission and death rates for childhood asthma in Europe – majority preventable
- Worse outcomes for CYP living in deprived areas

Effects on CYP education:

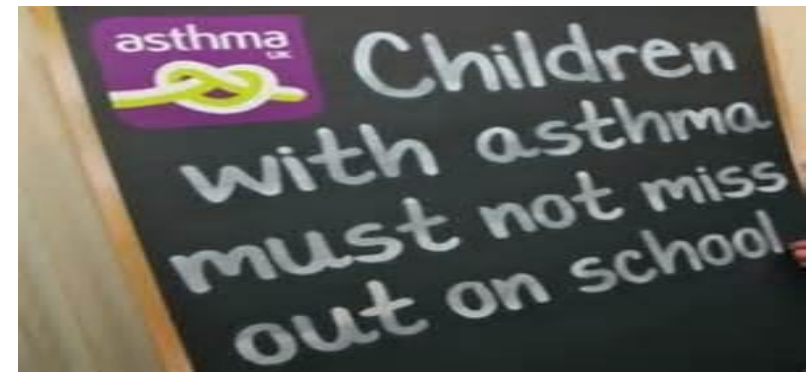
***Asthma* is the main contributor to missed school days**

***Asthma* is the commonest reason for CYP to take medication in school**

- Research shows that having a diagnosis of asthma is a risk factor in dropping a grade between mock and final exams
- CYP often labelled as Poor Achievers linked to school absence- Research has shown that this stays with them throughout their school career.
- Uncontrolled asthma can lead to a decrease in academic performance

ASTHMA CARE GOALS

- ✓ *Minimal use of reliever inhalers*
- ✓ *No school absence*
- ✓ *No symptoms with exercise*
- ✓ *No night-time symptoms or sleep disturbance*



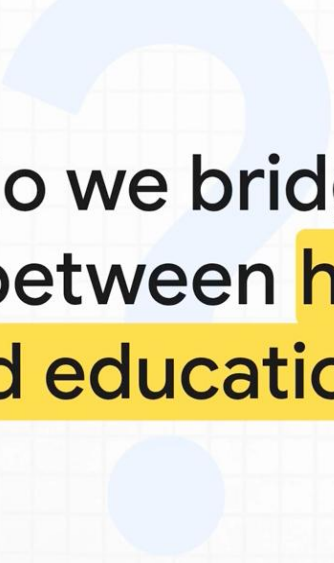
NHS

Good asthma
control means
having
no symptoms

#AskAboutAsthma



To enable each child to lead a full and active life!!



How do we bridge the
gap between health
and education?

Schools can best support CYP with asthma

Safe Environment for Pupils

- Asthma-friendly schools create a secure setting, reducing the risk of asthma attacks during school hours and ensuring pupil wellbeing.

Promoting Awareness and Education

- Staff and students learn about asthma, leading to quick emergency responses and fostering a culture of support and understanding.

Supporting Academic Success

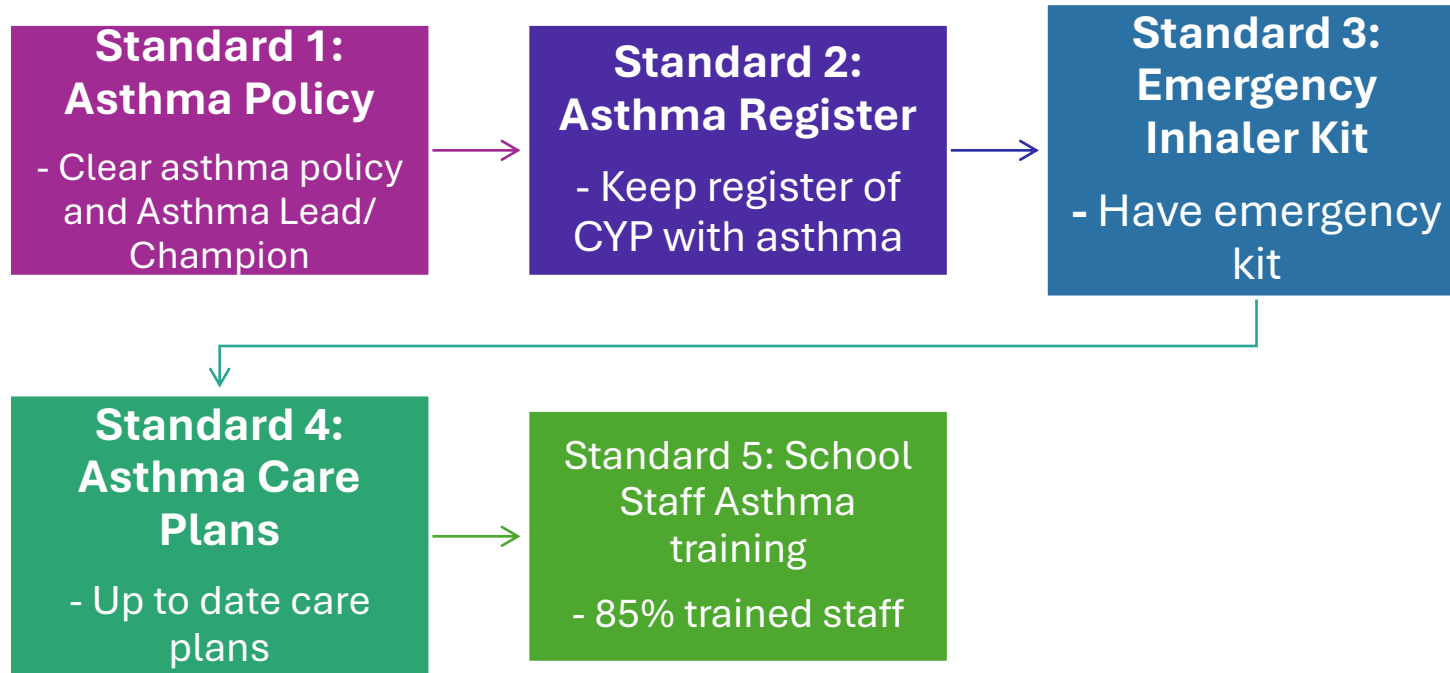
- Minimising asthma disruptions helps improve attendance and academic performance for pupils with asthma.

Effective Communication

- Improves communication with parents and between Health and education professionals

Is your School Asthma Friendly?

Ensuring schools are safe environments for children and young people with asthma



A child's or young person's asthma is everyone's responsibility. We all have a role to play in promoting good asthma self-management and care.

London Asthma Friendly Schools Guide



North Central London Integrated Care System



Child having an asthma attack? It's TIME to act now

T

Think

Does the child have any of the following signs?

- Coughing
- Wheezing
- Hard to breathe
- A tight chest
- Cannot walk
- Cannot talk
- Drowsy or tired

They could be having an asthma attack and need urgent treatment.

I

Intervene

- Stay with the child. Send someone else to get their inhaler and spacer.
- Keep calm and reassure the child. Sit them up and slightly forward.
- When you administer the inhaler, note down the time.

Which inhaler should I use? Salbutamol (blue inhaler) is the most common reliever inhaler. It acts quickly to treat asthma symptoms and attacks. Some children may use alternatives (e.g. Symbicort) – instructions can be found in the child's personalised asthma plan.

M

Medicine

- Shake the inhaler, then place inside the spacer's adapter.
- Spray 1 puff. The child then takes 5 breaths using the spacer's mouthpiece.
- Repeat the above steps for up to 10 puffs if needed.

If salbutamol inhaler doesn't relieve symptoms, or if the effect doesn't last more than 4 hours, this is a medical emergency – **follow the 'Emergency' steps below**. Inform parents and emergency services that this is an asthma attack and how many puffs you have given.

E

Emergency

- Call the child's parent or guardian. If the child has improved, the family should collect them and take them **directly to the GP or A&E** for an urgent check-up.
- If the child isn't improving, or if you're worried or unsure in any way, **call 999 for an ambulance and say: "child asthma attack"**.
- If the ambulance takes longer than 10 minutes and the child hasn't improved, **repeat the 'Medicine' steps above**. Give up to 10 more puffs if needed.

Avoid Reliever Inhalers Pre-Exercise

Risks of Pre-Exercise Use

Using reliever inhalers before exercise can hide poor asthma control and create a false sense of security.

Reduced Effectiveness

Frequent reliance on reliever inhalers may reduce their effectiveness and increase potential side effects over time.

Prioritise Proper Management

Focus on regular preventer treatment and asthma management for safe and effective exercise participation.

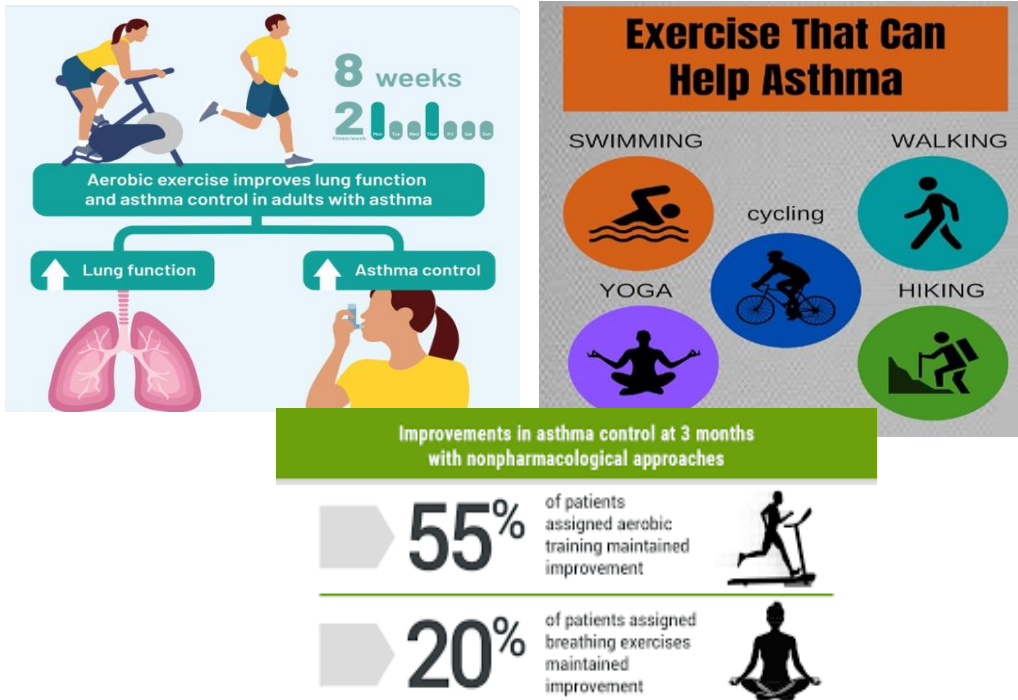


ASTHMA & EXCERISE

33% of children with asthma miss PE at least once a week!

All children should be able to fully participate in PE and all areas of the curriculum.

If they are unable to participate – this should be raised as a concern with your school nurse



Pursed Lip Breathing

1. Breathe in slowly through your nose with your mouth closed.
2. Purse your lips as if you were about to whistle.
3. Breathe out through your pursed lips to a count of four.

 Inhale
 Exhale

Yoga Breathing

Yoga is an exercise program that combines movement with deep breathing.

Using the same type of controlled breathing as in yoga may help improve asthma symptoms and lung function.

 Inhale
 Exhale





Breathing Techniques for Asthma


Improved Lung Function

Breathing techniques can help strengthen the lungs and ease asthma symptoms for better everyday breathing.

Buteyko Breathing

1. Breathe normally for a few minutes.
2. After a relaxed exhale, hold your breath by using your index finger and thumb to plug your nose.
3. Retain your breath until you feel the urge to breathe, then inhale.
4. Breathe normally for at least 10 seconds.
5. Repeat the cycle.

 Inhale
 Exhale

Diaphragmatic Breathing

 Inhale
 Exhale

1. Lie on your back with your knees bent and a pillow under your knees, or sit up straight in a chair.
2. Place one hand flat on your upper chest and the other hand on your stomach.
3. Breathe in slowly through your nose.
4. Breathe out slowly through pursed lips.

Promotes Relaxation

These methods encourage calmness and can reduce anxiety, which often triggers or worsens asthma attacks.

Enhances Quality of Life

Regular practice may increase physical activity tolerance and lower the risk of severe asthma flare-ups.

Asthma **RED** Flags

Inhaler Usage

Keep track of how often a child uses their reliever inhaler, especially frequent or repeated use in a short time and even frequency per week.

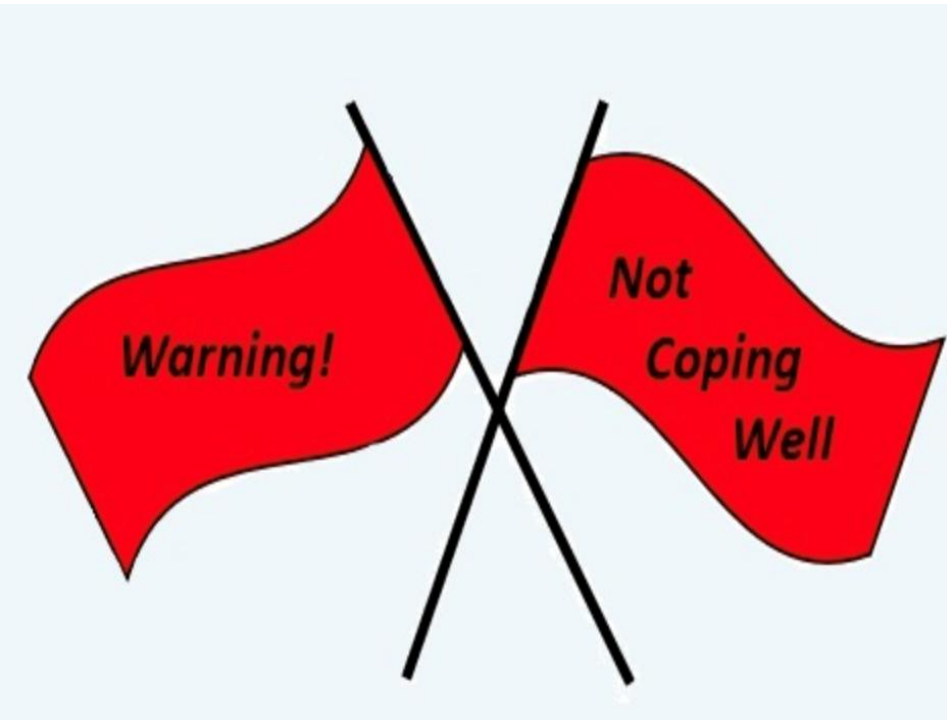
Identify Activity Limitations

Notice if a child cannot fully participate in school activities (PE) or has frequent absences due to asthma symptoms.

Communicate and Refer

Always communicate concerns to parents and refer the child to the school nurse for proper support and guidance.

RAISE CONCERNS AND REFER TO SCHOOL NURSE



Resources for Schools:

- [NHSE Asthma training modules](#) – Tier 1 for School Staff & Tier 2 for School Nurses.
- Asthma Toolkit – link [Asthma Friendly School toolkit](#)
- [London Asthma Friendly School Guide 2025](#)
- [Air pollution and Asthma](#) – London asthma toolkit for CYP
- [LearnLive broadcast](#) for schools “How we can all support young people with asthma to live their best lives”
- [Video “Would you know what to do if a child had an asthma attack at school?”](#)
- [Video “Asthma attack at school? How should schools respond”](#)
- [Podcast “How schools can support the air quality and asthma agenda to help CYP to live their best lives”,](#)
- [Podcast “Asthma friendly schools – how to implement them in your borough”](#)
- [Podcast “Tips to overcome challenges when setting up asthma friendly schools”](#)
- [Slides “Benefits of setting up an Asthma Friendly Schools initiative”](#)