

# Improving asthma management in primary school children - asthma reviews in a Neyland Community School

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## Background

Approximately, 1.1 million children in the UK are having treatment for asthma. Two thirds of school aged asthmatics will have an asthma attack in school. (1)

NRAD (2014) highlighted that in children, poor recognition of risk of adverse outcome was found to be an important avoidable factor in 70% of the deaths that were looked at, as well as poor prescribing practice, lack of a structured asthma review with a specialist and a lack of a personal asthma action plan. (2)

## Aim of project

To educate and empower the pupils, their parents and teachers about asthma to enable them to self-manage their condition.

Conduct the reviews in a child friendly environment to encourage full participation from the patient..

### Outline

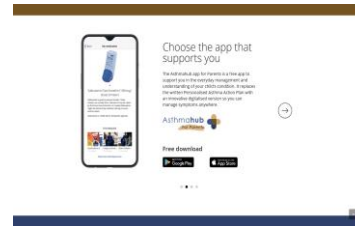
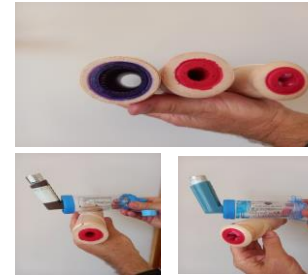
1. Hold group education sessions with school staff and parents of pupils with a blue inhaler in the school.
2. Review pupils in school with read/write access to the surgery PMR.

## Findings

Many pupils and parents were unclear about their diagnosis.  
The understanding of the pathophysiology of asthma and action and use of asthma medication was poor.  
No-one had an asthma action plan.  
Repeated A&E attendance without follow up was common.  
The school reported frequent absences due to asthma symptoms.

## Resources

I used the Asthma Right Care airways models and the NHSWales Asthma for Parents app to aid understanding, provide further information from a trusted source as well as an electronic asthma action plan to aid management of worsening symptoms.



Pupils who attended a follow up consultation reported no unscheduled care visits, improved school attendance, increased involvement in sports and physical activity and increased quality of life (using Childhood Asthma Control Test)

## Conclusions

An asthma review in a school setting is an effective way of equipping the patient, parents and school staff with the knowledge and skills necessary to safely manage their asthma at an early age.

Confirming the diagnosis of asthma allows this education to be tailored to the individual.

Being an expert patient leads to better control.

Good control of asthma means that the child's physical development, participation in sports and school attendance should not be affected.

Having a written or electronic asthma action plan that gives clearly defined steps in response to worsening symptoms is effective in keeping patients away from the unscheduled care environment.

Treating other atopy, especially allergic rhinitis, leads to an improvement in asthma control.

Discussing smoking status with the parents of children with asthma and offering support is an effective method of engaging smokers in a quit attempt.

## Aim of review

- improve diagnostic certainty
- treatment optimisation
- education about asthma, medication, inhaler technique, self-management.
- treat other atopy and follow up in the school.

## References

1. Asthma UK; <https://www.asthma.org.uk/about/media/facts-and-statistics/>
2. Royal College of Physicians. Why asthma still kills: the National Review of Asthma Deaths (NRAD) Confidential Enquiry report. London: RCP, 2014

## Acknowledgments

Thanks to South Pembrokeshire Cluster, Neyland and Johnston Surgery and the staff, parents and pupils from Neyland Community School.

## Further information

NHSWales asthma app info at <https://healthhub.wales/>  
NHS Wales asthma and pre-school wheeze action plan available at <https://allwales.icst.org.uk/wp-content/uploads/2021/03/Paediatric-asthma-management-plan-English.pdf>

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