

Educate U

Allergy and Anaphylaxis Management Policy

Approved by: Susan Evans Director of Education. **Date:** 01/10/21

Last reviewed on: 24/08/22 (Susan Evans), 01/09/23 (Sarah Paoletti), 18/02/24 (Sarah Paoletti,

Headteacher)

Next review date: 17/02/25



Allergy and Anaphylaxis Management Policy

Due to the vulnerable nature of our children, we will ensure we deliver information on an individual and small group basis, working with all our students to help them to understand the social, emotional and legal aspects that are associated. Each young person will be considered on an individual basis.

This policy will not guarantee a completely allergen free environment it is in place to minimize the risk of exposure, encourage self-responsibility, and plan for an effective response to possible emergencies.

We are committed to:

- Providing, as far as practicable, a safe and healthy environment in which people at risk of allergies and anaphylaxis can participate equally in all aspects of the school program.
- The encouragement of self-responsibility and learned avoidance strategies amongst students and staff suffering from allergies.
- Raising awareness about allergies and anaphylaxis amongst the school community.
- Ensuring each staff member has adequate knowledge of allergies, anaphylaxis and emergencyprocedures.
- Close liaison with parents/guardians of students who suffer allergies, to assess risks, develop risk minimisation strategies, and management strategies for their child.
- Facilitating communication to ensure the safety and wellbeing of the person with allergy who are at risk of anaphylaxis.

The aim of the policy is to:

- Minimise the risk of an allergic/anaphylactic reaction while the person is involved in schoolrelated activities.
- Ensure that staff members respond appropriately to an allergic/anaphylactic reaction by initiating appropriate treatment, including competently administering an adrenaline auto-injection device.
- Raise community the awareness of allergy/anaphylaxis and itsmanagement through education and policy implemented

We will ensure:

- The establishment of clear procedures and responsibilities to be followed by staff in meeting the needs of children/Staff with additional medical needs
- The involvement of parents, staff and the child in establishing an individual medical care plan.
- Ensuring effective communication of individual child/staff medical needs to all relevant teachers and other staff

- Ensuring First Aid Staff training includes anaphylaxis management, including awareness of triggers and first aid procedures to be followed in the event of an emergency.
- Packed lunches a requested to give careful thought to eliminating food that may be of risk to those members of staff and pupils who suffer from such allergies.

Nut Related Aspects

- If the school is aware of a child/staff member who suffers a nut allergy, the school team will be made aware of our Allergy and Anaphylaxis policy and will be requested to eliminate nuts and food items with nuts as ingredients from meals as far as possible. This does not extend to those foods labelled "may contain traces of nuts".
- Children/staff are encouraged to self-manage their allergy as far as possible in preparation for life after school where nut-free environments are rare.

Dairy and Egg Related Aspects

Children/staff with dairy product or egg allergies are managed in consultation with the parents on a case-by-case basis.

Insect Related Aspects

- Diligent management of wasp, bee and ant nests on School grounds and proximity. This must include the effective system for staff reporting to management, and a system of timely response to eradicating nests.
- Education of staff and students to report any above normal presence of wasps, bees or ants in all areas of the school.

Latex Related Aspects

If a child is allergic to latex they should avoid contact with some everyday items including, rubber gloves (unless latex free), balloons, pencil erasers, rubber bands, rubber balls, and tubes and stoppers used for science experiments

We will promote food allergy information (including anaphylaxis) through PSHE lessons. The question of banning anything in schools is, of course itself controversial. We live in a world that is contaminated with potential allergens. Anaphylactic children must learn to avoid specific triggers. While the key responsibility lies with the anaphylactic individual and his family, the school community must also be aware of the risks and consequences. In our school, the significant allergies are to peanut, nuts and bees. The school policy is that nuts should not knowingly be used in any area of the curriculum. Whilst this does not guarantee a nut- free environment as traces of nuts are found in a great deal of foodstuffs it will certainly reduce the chances of exposure to people with allergies.

It is important than no one is complacent about allergen exposure around the school and students, staff and parents will be informed of the potential harm of nuts and peanuts to people in school. In addition the school recognises that there are allergies to other foods/materials and to insect stings. In short, while the aim is to significantly diminish the risk of accidental exposure to known food and other allergens it can never be completely removed.

All information relating to allergies will be stored on Bromcom, our information management system.

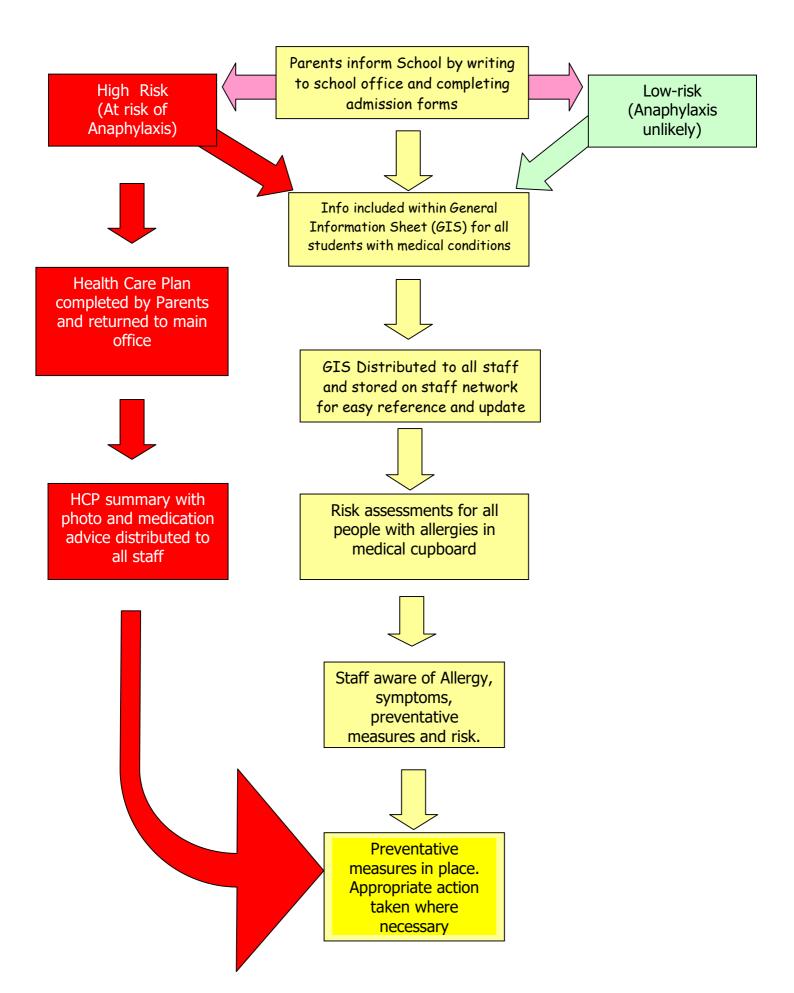
Educational Visits

The Group Leader will check with any food provider (including ourselves) and ensure 'safe' food is provided, or that an effective control is in place to minimise risk of exposure for people with allergies.

Where a student/staff member is prescribed EpiPen the Group Leader will ensure they or another supervising staff member is trained in the use of the EpiPen, and capable of performing any possible required medical treatment as outlined in the Students Health Care Plan.

Parents should ensure the students has his/her EpiPen on the visit, and that he/she will be responsible for its security. Staff are responsible for their own EpiPen and its security. If in doubt over the risk of a student with an allergy taking part on an education visit the Group Leader should seek advice from the Parent or dedicated First Aider.

Management of Allergies Flowchart



Parents are responsible for:

- Providing ongoing, accurate and current medical information in writing to the school. Whilst the school will play a role in reminding parents when information etc requires updating this responsibility lies wholly with the parents.
- Completion of the student's Health Care Plan where appropriate. The school will seek updated information via a student's Health Care Plan at the commencement of each calendar year, to which parents are required to respond. Furthermore, should a child develop a condition or have a change in condition the parents must advise the school of the fact, and details to be clarified accordingly in the student Health Care Plan.
- Providing written advice from a doctor, which explains the child's allergy, defines the allergy arteaction, and any required medication, including completion of an action plan with supporting photographic or other evidence.
- Supplying EpiPens and medication timeously
- Ensuring medication is replaced as necessary i.e on change of dose or expiry date.
- Surplus/expired medication is collected at the end of each academic year.
- Ensuring all medication has the original pharmacy label attached stating the student's name, date of birth and dose.
- Highlighting any classes/topics or activities which in the parent's view may need to be avoided or flagged up as 'high risk' e.g., food preparation and in science lessons.
- Contacting the school promptly where should this information/advice appears not be followed.
- Ensuring, including monitoring their use by dates and replacing medication where necessary.
- Providing appropriate foods to be consumed by the child if necessary.

Parents should also teach their son/daughter with allergies to:

- Recognise the first symptoms of a food allergic/anaphylactic reaction.
- Communicate with school staff as soon as he/she feels a reaction is starting.
- Carry his/her own EpiPen where appropriate.
- Not share snacks, lunches, drinks or utensils.
- Understand the importance of hand washing before and after eating.
- Report to the school's dedicated first-aider or a member promptly when he/she feels anallergic/anaphylactic reaction is beginning

We will encourage our students to develop the skills needed to keep themselves safe by:

- Developing a relationship with the school first-aider or trusted adult to assist in identifying issues related to the management of the allergy in school.
- Taking responsibility for avoiding food allergens, including informing staff of his/her allergy at times of potential risk
- Learning to recognise personal symptoms.
- Being proactive in the care and management of their own allergies and reactions.
- Keeping emergency medications where appropriate, in the first aider's office or in an agreedsuitable location. This may include carrying the medication with them at all times.
- Notify an adult if they are being picked on or threatened by other students as it relates to their food allergy.
- Developing an awareness of their environment and likely allergen zones.
- Knowing the overall Student Health Care Plan and understand the responsibilities of the plan.
- Develop greater independence to keep themselves safe from anaphylactic reactions.

Students and staff will be encouraged to

- Wash hands before and after eating and throughout the school day.
- Avoiding sharing or trading of foods or eating utensils with others.
- Avoiding eating anything with unknown ingredients or known to contain any allergen.
- Eating only food which brought from home unless it is packaged, clearly labelled and approved by their parents.
- Placing food on a napkin rather than in direct contact with a desk or table.
- Notifying an adult immediately if they eat something they believe may contain the food towhich they
 are allergic.

The school first aider:

- Contact parents for required medical documentation regarding a child's allergy and informing the Headteacher where important information is lacking. (The responsibility lies with parents to ensure this information is provided)
- Ensuring (in conjunction with the Headteacher) that there is an effective system to regularly updated and disseminated medical information to staff and others.
- Ensuring that parents are reminded of their responsibilities to provide a current Healthcare Plan.
- Ensuring that where children with known allergies are participating in overnight stays and/or
 externalvisits, the risk assessment and safety management plans for those external visits
 include the students Health Care Plan.
- Ensuring that first-aid staff are trained in the use of EpiPens and management of anaphylaxis and that similar training/information is provided periodically to all other staff.

Teachers are responsible for:

- Acquiring knowledge of the signs and symptoms of severe allergic reaction.
- Being familiar with information provided in the students health care plans, be aware of andimplement the emergency plan if a reaction is suspected.
- Participate in in-service training about students with life-threatening allergies including demonstration on how to use the Epipen.
- Determining suitable protocols regarding the management of food in the classroom (particularly in high-risk subjects) in collaboration with the First Aider. This protocol will be communicated by the teacher to the students of the class.
- Reinforcing appropriate classroom hygiene practices e.g., hand washing before and after eating or tasks potentially leading to contamination.
- Responding immediately to reports of students being teased or bullied about their food allergies.
- Follow Allergy Action Plan and call 999 when life-threatening allergy related symptoms occur.

DEFINITIONS

Allergen – A normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.

Allergy - A condition in which the body has an exaggerated response to a substance (e.g. food or drug). Also known as hypersensitivity.

Allergic reaction – A reaction to an allergen. Common signs and symptoms include one or more of the following: hives, generalised flushing of the skin, tingling around the mouth, swelling of tissues of the throat and mouth, difficulty breathing, abdominal pain, nausea and/or vomiting, alterations in heart rate, sense of impending doom, sudden feeling of weakness, collapse and unconsciousness.

Anaphylaxis – Anaphylaxis, or anaphylactic shock, is normally a sudden, severe and potentially life-threatening allergic reaction to food, stings, bites, or medicines though a delayed reaction is possible in certain cases.

EpiPen – Brand name for syringe style device containing the drug adrenaline which is ready for immediate intramuscular administration.

Minimised Risk Environment - An environment where risk management practices have minimised the risk of (allergen) exposure to a reasonable level. Not an allergen free environment.

Anaphylaxis Health Care Plan – A detailed document outlining an individual student's condition, treatment, and action plan for location of EpiPen.

Management System – A record system managed by the person in charge which describes the individual student medical care plans and the particular members of staff who will need to be trained and informed of these plans.

Severe Allergies Health Plan

This plan was last updated on					
Student's Staff members Full Name					
Date of Birth			Attach Photo H ere		
Full Address including postcode					
This plan should be completed by the student's parent/guardian and approved by his/her doctor.					
Name of Parent/Guardian					
Signature					
Date					
Full Address (if different fro above-mentioned pupil)	m the addressof the				
Relationship to Pupil					
Home Telephone number					
Mobile number					
Email address					
Name of approving doctor					
Full Address					
Doctor's signature (A letter detailing medication doctor/hospitalconsultant or replace the signature) Date					

Once completed, the parent/guardian is responsible for taking a copy of this School Health Care Planto all relevant hospital/doctors appointments for updating.

Student/staff Health Care Plan Overview

To be issued to all teachers and classroom support staff

Full Name			[
Year Group Class The above named student is allergic to				Attach Photo H ere
Tingling/bu Swelling o Swelling o Swelling o Swelling o Increased Behaviour Details of Medicar	ny rash urning sensation in n urning sensation in li f lips f eyes f face ound any sting rate of breathing change, less respor	ips nsive or confused	Any other sy Please list the	em below.
Medication		Dose	Comment to be Doctor or Parer	
☐ Antihistan	nine			
☐ Ventolin (S	Salbutamol)			
□ Inhaler				
☐ EpiPen				

Parent/Guardian Permission

emergency services will be summoned as required in the event that the school staff is unable to administer the plan at any time where appropriate.
Signature of Parent/Guardian
<u>Pupil Permission</u> (If appropriate)
I agree to the care arrangements as detailed in this plan
Name of Pupil
Signature of Pupil
<u>Designated Member of staff</u>
I agree to this plan being administered in school. The medication will be administered by members ofstaff that have been made aware of the procedures to follow.
In the event that these procedures cannot be implemented at any time the school will follow advicereceived from the health professional in summoning the emergency service as appropriate.
Designated Member of Staff
Signature Date

I wish my child to have the medication/care detailed in this care plan and I accept that the

Start here.

A. Mild/Moderate Reaction ☐ Swollen Lips ☐ Flushed, itchy, blotchy ☐ Abdominal Pain and Nausea ☐ Swelling around eyes ☐ Fast Breathing B. Give antihistamine dose as stated on pharmacy label C. If asthmatic, give reliever via spacer (2 puffs). Another 8 puffs, 1 puff per minute, can be given D. Contact parent/guardian to inform them that their child has had an allergic reaction Supervise closely E. If condition worsens to severe reaction

ALLERGY TREATMENT ACTION PLAN

15. Final steps

- · Dial the emergency services
- Follow instruction from ambulance control
- Contact parent/guardian
- Stay with Pupil
- Give adrenaline pen to ambulance staff.



H. Administer Epipen:

- 8. Hold adrenaline pen firmly
- 9. Remove out grey safety cap
- 10. Hold back end of adrenaline pen at 2 cmfrom upper outer thigh
- 11. Jab firmly against leg until you hear it click
- 12. Hold adrenaline pen in place for 10seconds
- 13. Remove adrenaline pen from leg
- 14. If no improvement 5 minutes after the administration of adrenaline then anotherdose of adrenaline can be given.



G. Lie pupil down and raise pupil's feet if breathing not compromised



F. Severe Reaction

- Swollen tongue
- 2. Hoarse voice, difficulty swallowing
- 3. Cough, difficulty breathing, noisy laboured breathing
- 4. Change in colour, pale, clammy
- 5. Feeling faint
- 6. Deteriorating consciousness
- Collapse