St Modan’s High School

ALLERGY AND ANAPHYLAXIS MANAGEMENT POLICY

POLICY STATEMENT

Values:

St Modan’s High School believes that the safety and wellbeing of those members of the school community suffering from specific allergies and who are at risk of anaphylaxis is the responsibility of the whole school community. The School position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure, encourage self responsibility, and plan for an effective response to possible emergencies.

The School is 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 pupils suffering from allergies.
- Raising awareness about allergies and anaphylaxis amongst the school community.
- Ensuring each staff member has adequate knowledge of allergies, anaphylaxis and emergency procedures.
- Close liaison with parents/guardians of pupils 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 is at risk of anaphylaxis.

Purpose

The aim of the policy is to:

- Minimise the risk of an allergic/anaphylactic reaction while the person is involved in school related 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, within the St Modan’s community the awareness of allergy/anaphylaxis and its management through education and policy implementation.
BACKGROUND

Any allergic reaction, including anaphylaxis occurs because the body’s immune system reacts inappropriately in response to a substance that it perceives as a threat.

Anaphylaxis is a severe and potentially life threatening allergic reaction at the extreme end of the allergic spectrum. It can occur within minutes of exposure to the allergen or the reaction may develop over hours. It can be life threatening if not treated quickly with adrenaline.

The common causes of allergies relevant to this policy are nuts, (in particular peanuts), dairy products, eggs, wasps, bees, and ants. The allergy to nuts is the most common high risk allergy.

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.
KEY STRATEGIES

General Aspects

St Modan’s will ensure:

- The establishment of clear procedures and responsibilities to be followed by staff in meeting the needs of children 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 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.
- Parents of children with packed lunches will be 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 who suffers a nut allergy, the school lunch caterer will be made aware of our risk minimisation 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 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 with dairy product or egg allergies are managed by the School 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 pupils 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.
ALLERGEN AWARENESS/ AVOIDANCE

The School will promote food allergy information (including anaphylaxis) through PSE, and/or Science/Home Economics lessons in particular with classes where a child has severe allergies.

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 and nuts. 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 pupils with allergies.

It is important than no one is complacent about allergen exposure around the school and pupils, staff and parents will be informed of the potential harm of nuts and peanuts to pupils in school. In addition the school recognises that there are allergies to other foods/materials and to insect stings. In the classrooms of anaphylactic children, special care is taken to avoid allergens. 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.

EDUCATIONAL VISITS

The Group Leader will check with any food provider and ensure ‘safe’ food is provided, or that an effective control is in place to minimise risk of exposure for pupils with allergies.

Where a pupil 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 Pupils Health Care Plan.

Parents should ensure the Pupil has his/her EpiPen on the visit, and that he/she will be responsible for its security.

If in doubt over the risk of a pupil with an allergy taking part on an education visit the Group Leader should seek advice from the Parent, School Nurse or dedicated First Aider.
St Modan’s High School

Management of Allergies Flowchart

High Risk
(At risk of Anaphylaxis)

Parents inform School by writing to PSD Teacher or Mrs Keeley (Medical Attendant)

Info included within General Information Sheet (GIS) for all pupils with medical conditions

Health Care Plan completed by Parents and returned to PSD Teacher or Mrs Keeley (Medical Attendant)

GIS Distributed to all staff and stored on staff network for easy reference and update

HCP summary with photo and medication advice distributed to all staff

Specific Medical List collated and distributed to all staff to show all recorded medical conditions

Staff aware of Allergy, symptoms, preventative measures and risk.

Preventative measures in place. Appropriate action taken where necessary

Low-risk
(Anaphylaxis unlikely)
RESPONSIBILITIES

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 Pupil’s Health Care Plan where appropriate. The School will seek updated information via a Pupil’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 during a year, or have a change in condition the parents must advise the School of the fact, and details to be clarified accordingly in the Pupil Health Care Plan.

- Providing written advice from a doctor, which explains the child’s allergy, defines the allergy triggers and reaction, 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 pupil’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 in Home Economics or use of certain materials (e.g latex) 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 an allergic/anaphylactic reaction is beginning
Pupils with a life-threatening allergy are responsible for:

- Developing a relationship with the school first-aider or trusted adult e.g., PSD Teacher, Year Head, Teacher 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 agreed suitable 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 Pupil Health Care Plan and understand the responsibilities of the plan.

- Develop greater independence to keep themselves safe from anaphylactic reactions.

Given that anaphylaxis can be triggered by minute amounts of allergen, food anaphylactic pupils must be encouraged to follow these additional guidelines:

- Proper hand washing 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 to which they are allergic.
The School’s dedicated First Aider is responsible for:

- Contacting parents for required medical documentation regarding a child’s allergy and informing DHT responsible for PSD where important information is lacking. (The responsibility lies with parents to ensure this information is provided)

- Ensuring (in conjunction with the DHT responsible for PSD) 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 Action Plan.

- Ensuring that where children with known allergies are participating in camps and/or external visits, the risk assessment and safety management plans for those camps and external visits include the Pupil’s 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 pupil health care plans, be aware of and implement 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 Principal Teacher and Nurse/First Aider. This protocol will be communicated by the teacher to the pupils of the class.

- Reinforcing appropriate classroom hygiene practices eg. 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.

  Note: Supply teachers will be advised to review the GIS for children in their class and to review emergency protocol with the Faculty PT

Catering Staff are responsible for:

- Ensuring suppliers of all foods and catering are aware of the school minimisation policy.

- Ensuring supplies of food stuffs are nut free or labelled “may contain nuts” as far as possible

- Being aware of pupils and staff who have severe food allergies.

- Clear labelling of items of food stuffs that may contain nuts.
EVALUATION

The School Management Team shall:

- Get feedback from staff following their participation in allergy/anaphylaxis management training.
- Audit enrolment documentation to ensure it is current and complete.
- Discuss this policy and its implementation with parents/guardians of children at risk of allergy/anaphylaxis and gauge their satisfaction in relation to their child.
- Respond in a timely and appropriate manner to any complaints received in relation to this policy.
- Review the adequacy of the response of the school if a pupil has an allergic/anaphylactic reaction and consider the need for additional training and other corrective action.

The School First Aider/ School Nurse shall:

- Conduct “anaphylaxis scenarios” and supervise practice sessions in administration of adrenaline auto-injection devices to determine the level of staff competence and confidence in using the device.
- Routinely review each child’s auto-injection device to ensure that it remains complete and is in date.
- Liaise with the pupils/parents at risk of anaphylaxis.

Parents/ guardians shall:

- Read and be familiar with the policy
- Identify and liaise with the nominated staff member.
- Bring relevant issues to the attention of the school.
St Modan’s High School Health Care Plan – Severe Allergies

This plan was last updated on ________________________________

<table>
<thead>
<tr>
<th>Pupil’s Full Name</th>
<th>Attach Photo Here</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth</td>
<td></td>
</tr>
<tr>
<td>Full Address</td>
<td></td>
</tr>
<tr>
<td>including postcode</td>
<td></td>
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</tbody>
</table>

This plan should be completed by the pupil’s parent/guardian and approved by his/her doctor.

<table>
<thead>
<tr>
<th>Name of Parent/Guardian</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Signature</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
</tr>
<tr>
<td>Full Address (if different from the address of the above-mentioned pupil)</td>
<td></td>
</tr>
<tr>
<td>Relationship to Pupil</td>
<td></td>
</tr>
<tr>
<td>Home Telephone number</td>
<td></td>
</tr>
<tr>
<td>Mobile number</td>
<td></td>
</tr>
<tr>
<td>Email address</td>
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| Name of approving doctor |                     |
| Full Address             |                     |
| Doctor’s signature       | (A letter detailing medication/care and signed by the doctor/hospital consultant or specialist nurse can replace the signature) |
| Date                     |                     |

Once completed, the parent/guardian is responsible for taking a copy of this School Health Care Plan to all relevant hospital/doctors appointments for updating.
# Pupil Health Care Plan Overview
To be issued to all teachers and classroom support staff

<table>
<thead>
<tr>
<th>Full Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Year Group</td>
<td></td>
</tr>
<tr>
<td>PSD Class</td>
<td>PSD Teacher</td>
</tr>
<tr>
<td>The above named pupil is allergic to</td>
<td></td>
</tr>
</tbody>
</table>

## Details of Symptoms (Please tick)
- [ ] Itching
- [ ] Red blotchy rash
- [ ] Tingling/burning sensation in mouth
- [ ] Tingling/burning sensation in lips
- [ ] Swelling of lips
- [ ] Swelling of eyes
- [ ] Swelling of face
- [ ] Swelling round any sting
- [ ] Increased rate of breathing
- [ ] Behaviour change, less responsive or confused

## Any other symptoms?
Please list them below.

## Details of Medication

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dose</th>
<th>Comment to be entered by Doctor or Parent/Guardian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antihistamine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ventolin (Salbutamol)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inhaler</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epipen</td>
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</table>
**Parent/ Guardian Permission**

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

**Pupil Permission** (If appropriate)

I agree to the care arrangements as detailed in this plan

Name of Pupil ..................................................................................

Signature of Pupil ........................................................................... Date ....................................

**The Headteacher or Designated Member of staff**

I agree to this plan being administered in school. The medication will be administered by members of staff 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 advice received from the health professional in summoning the emergency service as appropriate.

Name of Headteacher or Designated Member of Staff ...........................................................

Signature ....................................................................................... Date .....................................
ALLERGY TREATMENT ACTION PLAN

A. Mild/Moderate Reaction
- ☐ Swollen Lips
- ☐ Flush, itchy, blotchy skin
- ☐ 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

F. Severe Reaction
- ☐ Swollen tongue
- ☐ Hoarse voice, difficulty swallowing
- ☐ Cough, difficulty breathing, noisy laboured breathing
- ☐ Change in colour, pale, clammy
- ☐ Feeling faint
- ☐ Deteriorating consciousness
- ☐ Collapse

I. Final steps
1. Dial the emergency services
2. Follow instruction from ambulance control
3. Contact parent/guardian
4. Stay with Pupil
5. Give adrenaline pen to ambulance staff.

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

H. Administer Epipen:
1. Hold adrenaline pen firmly
2. Remove out grey safety cap
3. Hold back end of adrenaline pen at 2 cm from upper outer thigh
4. Jab firmly against leg until you hear it click
5. Hold adrenaline pen in place for 10 seconds
6. Remove adrenaline pen from leg
7. If no improvement 5 minutes after the administration of adrenaline then another dose of adrenaline can be given.