



"Inspiring a love of lifelong learning"

Anaphylaxis/Allergy Policy

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Learning at Charville is underpinned by our Core Values

Respect
Independence
Self-belief
Honesty
Caring
Determination

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1. Scope

The staff and governors of Charville Academy are committed to following a policy of inclusive education that welcomes and supports pupils with medical conditions. This policy is designed to support the management of children and staff with allergies that require medical care in school. The policy is drawn up in consultation with the School Nursing team, The Health and Safety committee within the academy and the Health and Safety Advisor. It is also written in accordance with the Medical Needs Policy.

2. Aim

- To encourage and help children to participate fully in all aspects of school life
- To reduce absence from school related to medical needs
- To recognise that immediate access to allergy medication is important
- To ensure that staff have a clear understanding of what to do in the event of an allergic reaction/anaphylaxis.

3. Anaphylactic shock

Anaphylactic shock is a severe life-threatening medical emergency condition.

A reaction can develop within minutes of exposure to the allergen or there could be a delayed reaction. With awareness, planning and updated information a reaction can be treated effectively by using an adrenaline auto injector which is injected by trained personnel into the muscle of the outer mid-thigh.

Possible triggers can be the sting of a certain insect, e.g. bee, ingestion eating for example a peanut, skin or airborne contact with an irritant. Peanuts are one of the foods that can cause a severe allergic reaction but there are plenty of others e.g. egg, fish, tree nuts, kiwi fruit etc. A reaction can happen within minutes or seconds of an individual having contact with a trigger/allergen.

4. Symptoms of an allergic reaction

Symptoms of a severe reaction/anaphylaxis could include:

- Difficulty in breathing – severe asthma or asthma like symptoms, including a cough
- Swelling of the mouth and throat
- Hives anywhere on the body or generalised flushing of the skin
- Difficulty in speaking or swallowing
- Abdominal pains/cramps, nausea and vomiting

- Sudden feeling of weakness
- Change in heart rate (fast pulse)
- Sense of impending doom which could manifest as anxiety/panic
- Collapse and unconsciousness which can potentially be fatal.

Symptoms of a mild-moderate allergic reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour.

5. Parent/carer responsibilities

The parent/carer must provide the school with their child's allergy care plan from the Hospital Allergy Team or the GP.

All medication, as stated on the allergy care plan, must be handed to the Welfare Officer.

The parent/carer must sign a permission form to administer medication as detailed on the child's allergy care plan.

An academy care plan will be attached to the allergy care plan with the child's details and actions to be taken in the event of an allergic reaction.

Parent's/carer must provide the academy with new medication when the old medication expires.

Educate their child in allergy self-management, including what foods are safe and unsafe, how they can avoid allergens, how they can spot the symptoms of an allergic reaction, how and when they should tell an adult of any reaction and how to read food labels.

Parents/carers are expected to communicate with the Welfare staff about their child's condition immediately if there are any changes as staff will need to be updated.

6. School staff responsibilities

At Charville Academy we take the health of all children seriously. All staff will undertake annual anaphylaxis/allergy update and shared information session with an NHS school nurse.

The Headteacher will ensure all staff can recognise symptoms; know what to do in an emergency and work to eliminate the use of allergens in the individual's meals, educational tools, arts and crafts and other curriculum projects.

The Headteacher will read the pupil care plan and sign to give authorisation for staff to administer the child's medication in accordance with the plan.

All trained staff will follow the child's care plan in the event of an allergic reaction.

Parents/carers will be informed if their child has been administered allergy medication.

In the event of an adrenaline auto injector being administered an ambulance will always be called and the parents notified immediately.

7. Food management

We are an allergy aware school. The catering team refer to the allergen file for all identified children.

We aim to maintain a nut free environment however we cannot guarantee that a product containing nuts will not come into school.

When "nut" items are brought into school they are removed straight away, the area is cleaned and the child will be given an alternative item. The parents/carers of the child will be reminded that we do not allow nut products in school as we have children with severe nut allergies.

Children are reminded not to share or swap foods.

The Catering Manager liaises with parents/carers regarding known food allergies on an individual basis. The Catering Manager will adapt the child's meal where possible.

Only food provided by the school canteen and food brought into school which has been overseen by the Canteen Manager, will be given to the child.

8. Allergy medication

Medicine that may be required, adrenaline auto injector, antihistamine, an inhaler with spacer and a hospital care-plan.

Parents are required to provide the following if listed on their child's care plan:

- 2 x adrenaline auto injectors – One in the classroom and one in welfare
- 1 x inhaler and spacer – Classroom
- 2 x antihistamine plastic bottles - One in the classroom and one in welfare
- 1 x care plan

Antihistamine only care plan only will require x1 bottle of antihistamine.

The medication must be prescribed to the child concerned. There must be a visible expiry date.

Children who only require antihistamine medication will have medication stored in the medical room with their care plan.

Medications are appropriately stored and easily accessible in a secure location for designated staff members. They should not be locked away.

9. Storage of allergy medication

All allergy medication will be stored in clearly labelled boxes in the classroom/medical room alongside the relevant allergy care plan.

Children whose care plans list an adrenaline auto-injector will have two boxes - one in the classroom and one in the medical room)

Classroom box – Allergy care plan, antihistamine, adrenaline auto-injector, inhaler and spacer if applicable

Medical room box – Allergy care plan, antihistamine, adrenaline auto-injector

Children whose care plan only lists antihistamines will have one box stored in the medical room containing an allergy care plan and the antihistamine medication.

In Nursery allergy medications will be stored in the Nursery medical room.

Classroom/Nursery allergy boxes will move around the school with the class/child including being taken to assembly, the library, the hall and other lessons.

10. Allergy medication procedure during lunch time period

At lunch times the antihistamine/adrenaline auto injector boxes will be taken to the canteen by a member of staff and stored in a box by the Catering Manager. The boxes will be collected by an adult after lunch and taken back to the classroom.

The exception will be Reception classes who will have an adult/SMSA take the boxes back to class as soon as the child finishes their dinner and leaves the canteen.

In Nursery allergy medications will remain in the Nursery medical room during the lunch break.

11. Cooking and food activities/After school cooking club

The class teacher/teaching assistant will check the class medical information to see who has an allergy and which food the child is allergic to. This information can also be found on SIMS and in the Medical room in paper copy format. Staff to check all ingredients with the Catering Manager.

12. Art and creative learning

Parents and staff should be vigilant when providing materials for art and craft lessons and homework projects.

13. Staff allergies

Staff members will notify their employer of their medical condition and who to contact in an emergency. Staff are responsible for their own allergy medication. It would be advisable for the staff member with the allergy to let either Welfare staff and/or a close colleague know where their emergency medication is kept e.g. locker, car or the medical room.

14. School trips off site

The school will complete a risk assessment for all off site trips. The children with allergies will have their allergy medication, along with the care plan, accompany them on the school trip. Allergy medications will be carried by the staff member responsible for the child's group. This also includes their back up allergy medication which is stored in the Medical Room.

15. Action plan for an allergic reaction

In the event of a child showing any signs of an allergic reaction do not move them.

Send an adult to get the child's medication, bring the medication to the child.

16. Minor reaction (follow care plan)

- Give antihistamine
- If asthmatic administer inhaler
- Inform parent
- The child may recover and return to class, closely monitored by an adult
- All incidents should be recorded on CPOMs and logged on the child's care plan.

If a minor reaction deteriorates quickly and turns into a major reaction and the child does not have an adrenaline auto-injector then:

- Dial 999
- If the child loses consciousness place in the recovery position
- If they stop breathing, staff will start CPR under the guidance of the emergency services
- All incidents should be recorded on CPOMs and logged on the child's care plan after the event. Any relevant accident paperwork must be completed

17. Major reaction (follow care plan)

- Lie child flat. If breathing is difficult allow to sit
- Administer adrenaline auto-injector in the outer upper thigh for 10 seconds. The adrenaline auto-injector will make a click sound. Record time of administration.
- Ask an adult to dial 999 and state that a child is in anaphylactic shock. Please use a mobile phone when possible because the 999 call centre will be asking questions about the child
- Give inhaler if asthmatic
- If no improvement after 5 minutes administer second adrenaline auto-injector. Record time of administration (The ambulance should have arrived prior to this)
- Inform parents/carer
- A member of staff will accompany the child to hospital in the ambulance if the parents haven't arrived
- All incidents should be recorded on CPOMs after the event and relevant accident paperwork completed.

Approved by: Health and Safety Committee

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