St. Michael's C.E.(C) Primary School
ALLERGY AND ANAPHYLAXIS POLICY

POLICY STATEMENT

We recognise the potentially serious consequences that may occur for children with allergies. These allergies may include a condition known as anaphylaxis. Anaphylaxis is a severe, potentially life-threatening allergic reaction brought on by exposure to certain foods or other substances. The foods most likely to cause allergic reactions are peanuts, tree nuts (walnuts, almonds, hazelnuts, brazil nuts, pecans, cashews, pistachio nuts, pine nuts, macadamia nuts etc), dairy products, eggs, soy, wheat, fish and shellfish. Although most food allergies produce symptoms that are uncomfortable, pupils with allergies to the above listed foods can also suffer more serious consequences. Non-food items such as latex and bee stings can also bring about a life-threatening reaction.

RESPONSIBILITY

We live in a world that is contaminated with potential allergens; therefore, anaphylactic children must learn to avoid specific triggers. Parents are responsible to educate their child about managing their allergy at school, including, but not limited to, identifying "safe foods" by reviewing the weekly lunch menu together.

Creating an environment that reduces the risk to severely allergic or anaphylactic children requires the co-operation and understanding of all members of our school including teachers, teaching assistants, lunch time supervisors, children and parents. In relevant literature sent home to parents we request that **NO NUT PRODUCTS ARE ALLOWED IN SCHOOL AT ANYTIME**. As with other policies, staff, parents and children are expected to comply.

We work alongside our caterers to provide food in the dining hall that all students may enjoy. If parents are uncertain about possible exposure to allergy-causing foods, or, in the case of a pupil with multiple or unusual allergies, the family may be required to provide lunch and snacks for their children.

It is the responsibility of the relevant members of staff to ensure that the emergency medication kits, containing Adrenaline Auto-Injectors relevant medical information, emergency treatments and contact details, is taken on all school trips.

IDENTIFICATION OF CHILDREN AT RISK

- It is the responsibility of the Parent and/or Guardian to inform the school that his or her child has allergies or is anaphylactic or potentially anaphylactic. This must be listed on the registration form, and they must notify the school in writing.

• School, with the support of external agencies where appropriate, will work with parents to implement a care plan to ensure that the allergies, needs and treatment of an individual pupil are known.
• All staff shall be aware of these children. An individual health and care plan, agreed by parents, will be in place for children with allergies and these will be available on Bromcom. While the information pertaining to a pupil's allergies will be shared with all staff, details will be kept as confidential as possible.
• On the child's admission to the school, the relevant teacher will discuss the child's allergies with the parent.
• All staff will receive annual training on allergy awareness administered by the "Medical Needs in School Team". This will include training on the administration of emergency medication (e.g. Epi-pen).

AVAILABILITY AND LOCATION OF ADRENALINE AUTO-INJECTORS

The Adrenaline Auto-Injectors are medication containing epinephrine (adrenaline). This medication is a stimulant used to treat severe allergic reactions. It may also be used to treat severe allergic reactions that affect breathing.

Parents of an anaphylactic child must provide two Adrenaline Auto-Injectors to be left at school. The parent must promptly replace the Adrenaline Auto-Injectors when the expiry date is reached. The expiry date of the Adrenaline Auto-Injectors will be recorded on Bromcom.

As our children are often too young to carry their own Adrenaline Auto-Injectors, they will be stored in a suitable location. They will be clearly labelled with the child's name, class and expiry date. All staff, and the pupil, will be made aware of its location.

- School staff are trained annually, and are ready, at all times, to administer the Adrenaline Auto-Injectors.
- Children who are no longer allergic, or no longer require an Adrenaline Auto-Injector, must present a letter of explanation from their doctor or allergist so their name may be removed from the school's allergy list.
- If the Adrenaline Auto-Injectors have expired, the parent will be required to supply another one by the next day.
- The parent must complete a 'Medicine Held in School' form for the Adrenaline Auto-Injector. All staff will receive a virtual or face to face demonstration of Adrenaline Auto-Injectors administration by the "Medical Needs in School Team" as required.

SYMPTOMS OF AN ALLERGIC REACTION

Symptoms of an allergic reaction (as defined by NHS 31/10/2022) include:

- a runny nose or sneezing
- pain or tenderness around your cheeks, eyes or forehead

- coughing, wheezing or breathlessness
- itchy skin or a raised rash (hives)
- diarrhoea
- feeling or being sick
- swollen eyes, lips, mouth or throat

Symptoms of a Severe Allergic Reaction (Anaphylaxis) (as defined by the NHS 31/10/2022)

- feeling lightheaded or faint
- breathing difficulties – such as fast, shallow breathing
- wheezing
- a fast heartbeat
- clammy skin
- confusion and anxiety
- collapsing or losing consciousness

Other symptoms may include:

- An itchy, raised rash (hives)
- Feeling sick or being sick
- Stomach Pain
- Swelling of the mouth, especially the tongue
- Swelling of the throat- hoarse voice
- feeling of throat closing
- feeling of choking
- Swelling of the airways - difficulty in breathing
  - tight chest
  - bark-like cough
- Drop in blood pressure- pallor
  - floppiness
  - collapse
  - loss of consciousness

WHAT TO DO IF SOMEONE HAS ANAPHYLAXIS

Anaphylaxis is a medical emergency. It can be very serious if not treated quickly.

If someone has symptoms of anaphylaxis:

1. Use an adrenaline auto-injector if the person has one – but make sure you know how to use it correctly first.
2. Call 999 for an ambulance immediately (even if they start to feel better) – mention that you think the person has anaphylaxis.
3. Remove any trigger if possible – for example, carefully remove any stinger stuck in the skin.

4. Lie the person down and raise their legs – unless they're having breathing difficulties and need to sit up to help them breathe. If they're pregnant, lie them down on their left side.
5. Give another injection after 5 minutes if the symptoms do not improve and a second auto-injector is available.

EMERGENCY TREATMENT

All staff are trained, as follows, in the management of an anaphylactic emergency:

1. There are no contraindications or hesitation to use an Adrenaline Auto-Injectors for a potentially life-threatening allergic reaction. Time of administration is noted.
2. An appropriate adult stays with the affected child.
3. The paramedic ambulance is called immediately.
4. The parents are contacted immediately after the 999 call is completed. If the parent is not available, the other emergency contacts on the registration form will be phoned.
5. Regardless of the degree of reaction or response to the Adrenaline Auto-Injectors, the child is taken to the hospital. An assigned member of staff **MUST** go with them if the parent is not present at the time of the ambulance departure.
6. The assigned member of staff will stay with the child at the hospital until the parent arrives. The Adrenaline Auto-Injectors that was administered will be taken to the hospital by the assigned member of staff.
7. The teacher will file a serious incident report.

All staff are trained on an annual basis, which includes a review of anaphylactic reactions and Adrenaline Auto-Injectors administration.

TRIGGERS OF ANAPHYLAXIS

Anaphylaxis is the result of the immune system, the body's natural defence system, overreacting to a trigger.

This is often something you're allergic to, but not always.

Common anaphylaxis triggers include:

- foods – including nuts, milk, fish, shellfish, eggs and some fruits
- medicines – including some antibiotics and non-steroidal anti-inflammatory drugs (NSAIDs) like aspirin
- insect stings – particularly wasp and bee stings
- contrast agents – dyes used in some medical tests to help certain areas of your body show up better on scans
- latex – a type of rubber found in some rubber gloves and