

Highbury Quadrant Allergy Policy

Date of review: April 2021
Date to be reviewed: April 2022

1. POLICY STATEMENT

Highbury Quadrant School aims to support pupils with allergies, ensuring they participate fully in all aspects of school life.

Highbury Quadrant recognises that allergy is a widespread and potentially serious condition which can be even life threatening.

Risk Assessments are performed and followed for any potential allergy triggers.

Highbury Quadrant is aware that pupils with allergies need access to their anti-histamines and immediate access to their adrenaline if they have anaphylaxis to a known trigger food. Anaphylaxis is a severe and often sudden allergic reaction. Anaphylaxis occurs within 5 to 10 minutes after exposure to allergen. Whilst someone administers first dose of adrenaline another member of staff must call 999 and 'say paediatric anaphylaxis'. Call parents/carers immediately. The person administering the first dose must observe a child for 4 to 5 minutes. If a child is not recovering, the second dose should be given. Remember to give the empty adrenaline pens to the paramedics. Every child must have 2 pens in school. There can also be a delayed exposure to allergen and this can happen a few hours later.

All staff must be aware of what to do if a pupil has an allergic reaction and anaphylaxis. ([see Appendix 1](#))

2. MEDICATION

Pupils' adrenaline device and anti-histamines **should be taken to the dining hall every day.**

Staff must ensure that any pupils with food allergies who are leaving HQ for school trips/matches etc must have their adrenaline device on them. A trained member of staff must also sign out the pupil's spare Adrenaline pen with them on the trip. All pupils with Adrenaline pens have a spare pen in a named box in the school office or in the classroom (Early Years).

If a pupil goes on a residential trip, they must take their anti-histamines and any other prescribed medication with them.

It is the parent's responsibility to ensure their child's medication is in date. School Nurse/School Office Staff/Early Years Staff will check this on a regular basis.

Medication is only to be given to a person named on the prescription.

3. RECORD KEEPING

When a pupil starts Highbury Quadrant an allergy diagnosis is usually identified on the Allergy Action plan ([see Appendix B](#)). It needs to be reviewed and signed by a parent/carer prior to the first day at school.

All pupils with an allergy will have a School Nurse appointment within the few weeks of starting school. They are followed up regularly by the School Nurse.

All pupils' allergy information is being shared with the school office, class teacher and school catering staff.

Highbury Quadrant also has posters up in the school kitchen and classrooms with photos on of all pupils who have anaphylaxis and other medical needs.

4. ALLERGIC REACTIONS

All staff that come into contact with a pupil who has a specific allergy should be able to recognise the signs of a pupil having an allergic reaction and help them immediately. ([see Appendix A](#))

When the above action has been taken, the incident must be reported to the Head Teacher and pupil's parents/carers must be contacted as soon as possible.

5. SYMPTOMS OF ALLERGY

Ear/nose/throat symptoms - runny or blocked nose, itchy nose, headache, loss of smell/taste, sore throat, swollen larynx or itchy mouth.

Eye symptoms - watery, itchy, red and swollen.

Airway - wheeze, difficulty breathing, cough.

Digestion - itchy tongue, stomach ache, nausea, vomiting, constipation, diarrhoea.

Skin - Urticaria, wheals or hives, itchy raised red rash. Eczema, cracked dry weepy skin. Angiodema - painful swelling of deep layers of skin.

Every pupil's specific Allergy Action Plan should be followed in regards to treating the pupil.

However if the pupil is having any of the following symptoms then these are signs of a serious allergic reaction and adrenaline should be given without delay:

- difficulty in breathing or swallowing;
- weakness or floppiness;
- steady deterioration;
- anxiety;
- collapse or unconsciousness.

If adrenaline has been given an ambulance MUST be called and the pupil MUST be taken to hospital.

6. MANAGING ALLERGIES

Avoid the allergen where possible is the most important first step. If pupils do not come in contact with the particular allergen, they will not have a reaction.

When drawing up an Allergy Action Plan for a pupil with an allergy a risk assessment needs to be carried out and measures taken to reduce risks of allergic reactions for the pupil.

Knowledge of food ingredients is vital within the school environment. Food containing eggs and any other allergens must be identified by the catering staff.

Easy access to medication is vital therefore it is encouraged to have pupils' adrenaline device and anti-histamines in the dining hall every day.

All staff should be aware of where emergency adrenaline is kept within the school (the school office).

Regular training - all staff should have regular Anaphylaxis training if they are expected to administer adrenaline in an emergency.

Regular communication with parents/carers is vital. Parents/carers are reminded to keep school informed of any changes in their children's food allergies.

7. ROLES AND RESPONSIBILITIES

Highbury Quadrant works in partnership with all relevant and interested parties including School Governors, all Staff, Parents, School Nurse to ensure the policy is planned, implemented and successfully maintained.

Highbury Quadrant makes sure the Allergy Policy is effectively monitored and regularly reviewed/updated.

SCHOOL STAFF

All school staff have a responsibility to:

- understand Highbury Quadrant Allergy Policy;
- attend a First Aid Training Course;
- attend Anaphylaxis Awareness Training provided by School Nurse at school;
- know which pupils, they come into contact with, have a food allergy;
- know what to do in the event of an Anaphylactic reaction ([see Appendix A](#));
- inform the Head Teacher immediately if a pupil has an allergic reaction;
- ensure all pupils with allergies have their adrenaline device with them at all times (especially in the dinner hall);

- be aware of possible trigger situations in certain lessons such as science experiments, cookery, arts and crafts. Where possible teachers should avoid using the triggers;
- make sure other pupils' packed lunches do not contain food allergens that might be fatal if consumed or touched by another pupil with food allergies.

MEDICAL PROFESSIONALS

The Medical Professionals have a responsibility to:

- develop/update/review individual Allergy Action Plan and share with parents/carers, school staff and catering team;
- offer allergy and Anaphylaxis training to staff as required, to ensure all educational needs are met;
- provide medical assistance if a pupil has an allergic reaction or anaphylaxis;
- see all new pupils with allergies before the first day at Highbury Quadrant.

PARENTS

Parents have a responsibility to:

- inform the school if an allergy diagnosis has been made and what medication has been prescribed;
- inform the school of any changes to treatment plan or reactions they have had when not in school;
- update the school after any Consultant/Hospital visits;
- ensure pupil has medication and it is in date when they return to school after holidays/breaks.

Review Date: March 2022

Sources of Reference:

<https://www.sparepensinschools.uk/for-schools/>

<https://www.anaphylaxis.org.uk/schools/schools-allergywise/>

www.allergyuk.org

www.anaphylaxis.org.uk

Definitions:

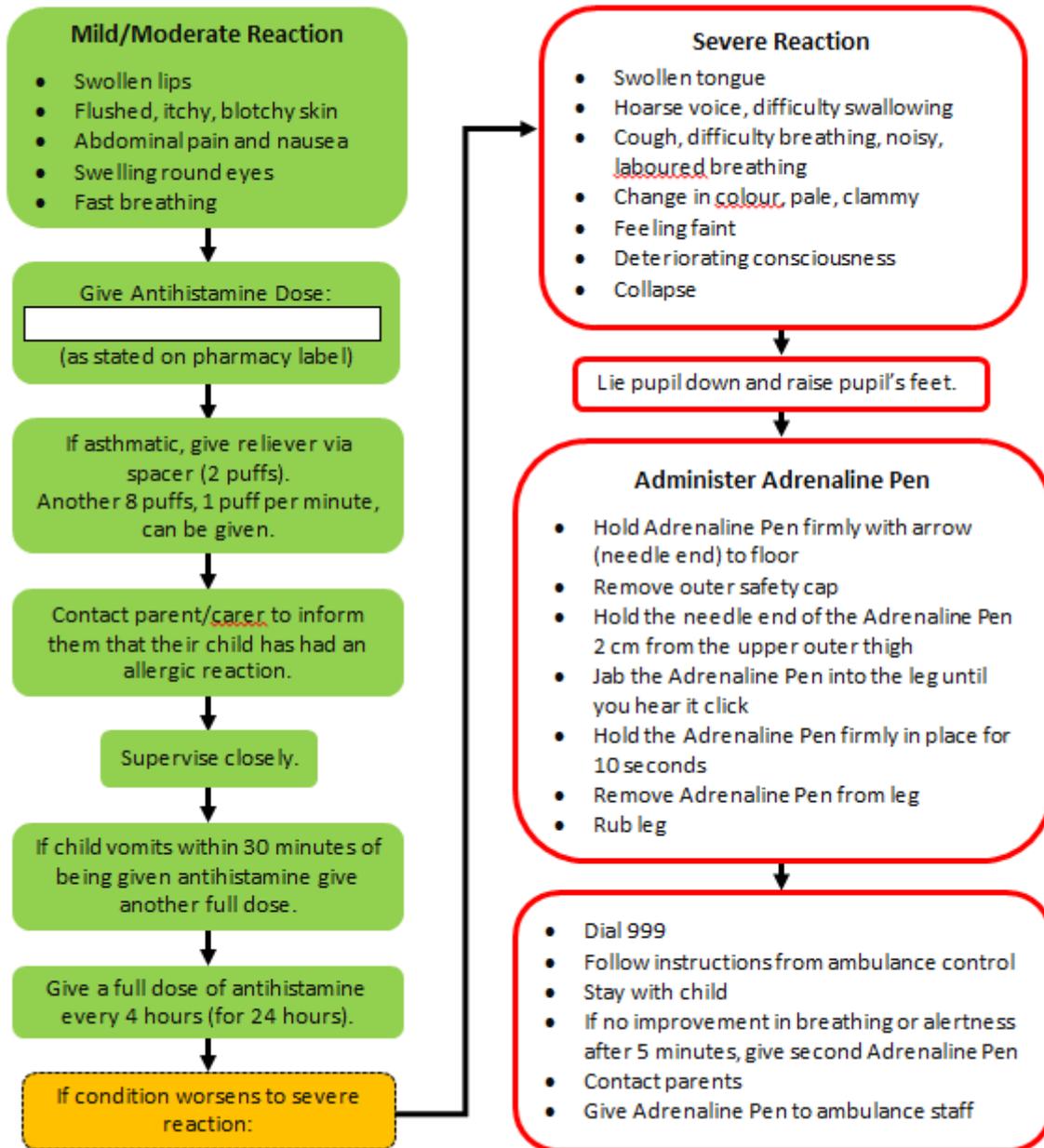
A food allergy – a condition in which the body's immune system reacts unusually to specific types of food.

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

Anaphylaxis - is a severe and often sudden allergic reaction, which usually happens within 5-30 minutes of eating the trigger food. It can get worse quickly: so it always requires an immediate emergency response.

Adrenaline device – a syringe style device that contains the drug adrenaline. This is an individual prescribed drug for known sufferers which is ready for immediate intramuscular administration. This may be referred to as an Epi-Pen/Ana pen or Jext which are particular brand names.

Appendix A



This child has the following allergies:

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Name:

DOB:

Photo

Mild/moderate reaction:

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

Action to take:

- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine:
- Phone parent/emergency contact

● Watch for signs of ANAPHYLAXIS (life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

A AIRWAY	B BREATHING	C CONSCIOUSNESS
<ul style="list-style-type: none"> • Persistent cough • Hoarse voice • Difficulty swallowing • Swollen tongue 	<ul style="list-style-type: none"> • Difficult or noisy breathing • Wheeze or persistent cough 	<ul style="list-style-type: none"> • Persistent dizziness • Pale or floppy • Suddenly sleepy • Collapse/unconscious

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1 Lie child flat with legs raised** (if breathing is difficult, allow child to sit)
- 2 Use Adrenaline autoinjector without delay** (eg. EpiPen®) (Dose: mg)
- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")**
***** IF IN DOUBT, GIVE ADRENALINE *****

AFTER GIVING ADRENALINE:

1. Stay with child until ambulance arrives, **do NOT stand child up**
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement **after 5 minutes, give a further adrenaline dose** using a second autoinjectable device, if available.

You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis.

Emergency contact details:

1) Name:

2) Name:

How to give EpiPen®

- 1** PULL OFF BLUE SAFETY CAP and grasp EpiPen. Remember: "blue to sky, orange to the thigh"
- 2** Hold leg still and PLACE ORANGE END against mid-outer thigh "with or without clothing"
- 3** PUSH DOWN HARD until a click is heard or felt and hold in place for **3 seconds**. Remove EpiPen.

Additional instructions:

If wheezy, GIVE ADRENALINE FIRST, then asthma reliever (blue puffer) via spacer

Parental consent: I hereby authorize school staff to administer the medicines listed on this plan, including a 'spare' back-up adrenaline autoinjector (AA) if available, in accordance with Department of Health Guidance on the use of AAs in schools.

Signed:

Print name:

Date:

This is a medical document that can only be completed by the child's healthcare professional. It must not be altered without their permission. This document provides medical authorization for schools to administer a 'spare' back-up adrenaline autoinjector if needed, as permitted by the Human Medicines (Amendments) Regulations 2012. During travel, adrenaline auto-injector devices must be carried in hand luggage or on the person, and NOT in the luggage hold. This action plan and authorization to travel with an emergency medication has been prepared by:

Signed & print name:

Hospital/Clinic:

Date:

For more information about managing anaphylaxis in schools and "spare" back-up adrenaline autoinjectors, visit: sparepensinschools.uk