



Parmiter's School

Allergy and Anaphylaxis Management Policy

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1. Aims and scope

Parmiter's School aims to protect the safety and wellbeing of all members of the school community including those suffering from specific allergies and those who are at risk of anaphylaxis. It is the responsibility of the whole school community to take reasonable steps to protect the health and wellbeing of others. 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.

Parmiter's 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 students 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/carers of students who suffer allergies, to assess risks, develop risk minimisation strategies, and individualised management strategies for their child.
- Facilitating communication to ensure the safety and wellbeing of the person with allergy who is at risk of anaphylaxis.

The aims of this policy are to:

- Minimise the risk of an allergic/anaphylactic reaction whilst students are 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 school's community the awareness of allergy/anaphylaxis and its management through education and policy implementation.

2. Background and definitions

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, 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.

Adrenaline auto-injector - Syringe style device containing the drug adrenaline which is ready for immediate intramuscular administration. There are 3 main types of adrenaline auto-injector, which are used in slightly different ways.

- EpiPen – [find out how to use an EpiPen](#)
- Jext – [find out how to use Jext](#)
- Emerade – [find out how to use Emerade](#)

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.

3. Key Preventive Strategies

Parmiter's School will ensure:

- The establishment of clear procedures and responsibilities to be followed by staff to meet the medical needs of all students.
- The involvement of parents, staff and the student in the management of care.
- Effective communication of individual student medical needs to all relevant teachers and other staff.

- 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 students with packed lunches will be requested to give careful thought to eliminating food that may be of risk to those members of staff and students who suffer from such allergies.

Nut Related Strategies

- If the school is aware of a student who suffers a nut allergy, the school catering manager 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”.
- Students 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 Strategies

- Students with dairy product or egg allergies will be managed by the School in consultation with the parents on a case by case basis.

Insect Related Strategies

- 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 Strategies

- 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.

4. Allergen Awareness

The School will promote food allergy information (including anaphylaxis) through Personal Development, Science and Food Technology lessons in particular with classes where a student 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 students 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.

Currently, in our school, the significant allergies are to peanuts 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 students with allergies.

It is important that 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 students or staff 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.

5. Educational Visits

The trip 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 students with allergies.

Parents should ensure the student has his/her adrenaline auto-injector on the visit, and that he/she will be responsible for its security.

If in doubt over the risk of a student with an allergy taking part on an education visit the trip leader should seek advice from the Parent and Matron.

6. Roles and 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.
- Providing written advice from a doctor, which explains the child's allergy, defines the allergy triggers and reaction, and any required medication.
- Supplying adrenaline auto-injector and medication timeously.
- Ensuring medication is replaced as necessary i.e on change of dose or expiry date.
- Collecting surplus/expired medication 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 in Food lessons or use of certain materials (e.g. latex) in science lessons.
- Contacting the school promptly where this information/advice appears not to have been followed.
- Ensuring, including monitoring their use by dates and replacing medication where necessary. ●

Providing appropriate foods to be consumed by the student 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 adrenaline auto-injector.
- Not share snacks, lunches, drinks or utensils.
- Understand the importance of hand washing before and after eating.
- Report to the school's Matron promptly when he/she feels an allergic/anaphylactic reaction is beginning.

Students with a life-threatening allergy are responsible for:

- Communicating regularly with Matron 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 includes carrying the medication with them at all times.
- Developing an awareness of their environment and likely allergen zones.
- Developing greater independence to keep themselves safe from anaphylactic reactions.

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

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

The School Matron is responsible for:

- Contacting parents for required medical documentation regarding a child's allergy and informing the Deputy Headteacher where important information is lacking (the responsibility lies with parents to ensure this information is provided).
- Ensuring (in conjunction with the Assistant Headteacher) that there is an effective system to regularly update and disseminate medical information to staff and others.
- Ensuring that parents are reminded of their responsibilities to provide current information/ medication.
- Ensuring that, where students with known allergies are participating in external visits, the risk assessment management plans for those external visits include the relevant information for the student(s) concerned.
- Ensuring that first-aid staff are trained in the use of adrenaline auto-injector 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.
- Familiarising themselves with information about student health needs.
- Participating in training about students with life-threatening allergies including demonstration on how to use the adrenaline auto-injector.

- Determining suitable protocols regarding the management of food in the classroom (particularly in high-risk subjects) in collaboration with the School Matron. This protocol will be communicated by the teacher to the students 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.

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 students and staff who have severe food allergies.
- Clearly labelling of items of food stuffs that may contain nuts.

7. Monitoring arrangements

The Senior Leadership Team shall:

- Audit enrollment documentation to ensure it is current and complete.
- Discuss this policy and its implementation with parents/ carers of students 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 student has an allergic/anaphylactic reaction and consider the need for additional training and other corrective action.

The School Matron shall:

- Routinely review each child’s auto-injection device to ensure that it remains complete and is in date.
- Liaise with the students and their parents as well as with Staff who are at risk of anaphylaxis.

Parents and carers shall:

- Ensure that school is provided necessary medicines.
- Read and be familiar with this policy.
- Liaise with the School Matron.
- Bring relevant issues to the attention of the school.

