



LOCHINVER HOUSE

Anaphylaxis Policy

Lochinver House School aims to support pupils with allergies to ensure they are not disadvantaged in any way whilst taking part in all aspects of School life. This policy should be read in conjunction with the School’s First Aid Policy.

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Definition

Anaphylaxis is a severe and often sudden allergic reaction. It can occur when a susceptible person is exposed to an allergen such as food, an insect sting, or an unknown allergen. A reaction can be mild or severe with slow or fast onset. It is potentially life-threatening and always requires an immediate emergency response.

Common allergens include peanuts, tree nuts, sesame, shellfish, milk and eggs, grass and tree pollen, insect stings, latex, dust mites, moulds, and animal dander.

Symptoms and signs

Symptoms and signs of an allergic reaction / anaphylaxis include:

- Metallic taste or itchy/tingling mouth
- Swelling of face, tongue, lips, and throat
- Itchy skin, usually around the mouth but can be anywhere on the body
- Difficulty swallowing
- Flushed complexion / hives / rash
- Abdominal cramps and nausea
- Rise in heart rate
- Looking pale
- Feeling dizzy
- Wheezing or difficulty breathing
- Collapse, unconsciousness, death

Pupils can have any of the above signs and symptoms in any order or they may experience only one reaction of a combination, as there is no set pattern and, just because certain signs and symptoms may have been experienced before, this does not mean they will be experienced again.

Recognition and management (treatment) of an allergic reaction / anaphylaxis

These are detailed above but they can happen in any order or may not happen at all.

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

Action:

- DO NOT LEAVE THE PUPIL
- Stay with the pupil and call for help if necessary
- Give reassurance
- Assist pupil to sit/lie down
- Given antihistamine according to the pupil's allergy treatment plan/healthcare plan
- Locate adrenaline auto-injector if prescribed
- Monitor pupil and provide further assessment as needed
- Phone parent/emergency contact to update.

Watch for signs of Anaphylaxis
(Life threatening allergic reaction):

Airway:	Persistent cough Hoarse voice Difficulty swallowing, swollen tongue
Breathing:	Difficult or noisy breathing Wheeze or persistent cough
Consciousness:	Persistent dizziness Becoming pale or floppy Suddenly sleepy, collapse, unconscious

IF ONE, or more, OF THESE SIGNS ARE PRESENT:

1. Lie the pupil flat with legs raised (if breathing is difficult, allow the pupil to sit to make breathing easier)
2. Use adrenaline auto-injector without delay
3. If the pupil is conscious and able, they should be encouraged to self-administer the adrenaline auto-injector under supervision.
4. All of the injectors are to be administered into the fleshy part of the thigh, through light clothing if necessary. The injection techniques vary between brands. If you have to assist in using the adrenaline auto-injector, read the simple instructions on the barrel of the injector itself.
5. Every time you use an adrenaline auto-injector **call 999, ask for an ambulance and state 'anaphylaxis', even if the pupil starts to feel better.**

**** IF IN DOUBT, GIVE ADRENALINE ****

After giving adrenaline:

1. Stay with the pupil until the ambulance arrives and continue to monitor, do NOT stand the pupil up.
2. Commence CPR if there are no signs of life.
3. Telephone the parent / emergency contact as soon as possible to update.
4. If no improvement after 5 minutes, give a further dose of adrenaline using another adrenaline auto-injector device, if available.
5. Continue to provide reassurance and maintain dignity of pupil.

Relapse is possible after apparent recovery.

The pupil should always be sent to hospital after an attack, even if they seem to have fully recovered.

Adrenaline Auto-Injectors (AAIs)

In most severe cases of anaphylaxis, people are normally prescribed a device for injecting adrenaline. The device, an adrenaline auto-injector (AAI) looks like a large pen and is pre-loaded with the correct dose of adrenaline (following review by a consultant in a hospital setting).

The AAI is normally injected into the fleshy part of the thigh, sometimes through light clothing depending on the situation. The needle is not revealed, and the injection is easy to administer. It is not possible to give too large a dose using this device. Each adrenaline injector is a pre-loaded with a single dosage and can only be used once. If in doubt, it is better to give the injection than to hold back. An ambulance should be called immediately when an AAI has been administered.

There are three adrenaline auto-injectors available on prescription in the UK; EpiPen, Jext and Emerade. All contain the ingredient 'adrenaline' and different doses are available depending on the weight of the child to whom the pen is prescribed and also dependent on the manufacturer. The prescribing consultant will decide on the most appropriate treatment for the individual.

- EpiPen has a spring-loaded concealed needle that delivers a single measured dose when the pen is jabbed against the muscle of the outer thigh.
- Jext has a locking needle shield which engages after use, designed to protect against needle stick injury
- Emerade is the most recent single-use adrenaline injector to become available. Emerade follows the UK Resuscitation Council's Guidelines for the emergency treatment of anaphylactic reactions.

Management in the School

It is the responsibility of the parent/carer to notify the School if their child has an allergy and is at risk from anaphylaxis. This can be done by contacting the School Nurse on 01707.653064 or email medicalteam@lochilverhouse.com

Parents are required to provide the School full details of medication prescribed, dosage and likely reactions as well as any letter/care plan issued by the consultant managing the pupil's condition. The School Nurse will work with the pupil's parents to develop a healthcare plan for use in School.

Photographs and details of the pupil diagnosed with a severe allergy (whether prescribed anti-histamine or an AAI) will be shared with School staff via the School's Central Resource Library and SchoolBase and the pupil's photo will be displayed in staff areas such as the School kitchen. A copy of all data is kept in the medical room and basic information is kept in the allergy response kits. All pupil data is updated annually before the start of every academic year and ongoing adjustments made as required.

Pupils from Reception to Y4 must wear lanyards at meal times identifying their allergy. Pupils are reminded to verbalise their name, food restriction to the kitchen staff.

All staff, including new members, are given access to anaphylaxis management training on an annual basis. Anaphylaxis training is also included in any first aid certification. Staff certified in First Aid or Paediatric First Aid are identified in the School's First Aid Policy. Further training can be given by the School Nurses as required, for example, before residential trips. It should be noted that any person, who is willing to or is required to, in case of emergency, can administer an AAI and can do so by following the instructions on the AAI, as specialist training is not required.

All staff with computer access can familiarise themselves with the individualised care plans for pupils who are diagnosed with allergies/anaphylaxis and are registered at the School. These care plans are available on SchoolBase or on the CRL, they are also printed and held in the pupils' emergency bags in the dining hall. Staff are requested to familiarise themselves with pupils known to have allergies; in particular those who they teach or who are in their form or tutor groups.

Parents are welcome to be involved in completing the risk assessment and in the development of their child's health care plans.

Any queries or concerns regarding allergies and anaphylaxis must be directed to the School Nurse who can be reached via x217 from any School phone or via the Nurses' mobile phone 07810.502757.

Supply, storage, care and disposal of medication used to treat anaphylaxis

AAIs are prescribed initially by hospital consultants. Where repeat prescriptions are required between treatment reviews, this can be done via the pupil's GP. Other treatment includes antihistamine syrup or tablets. Occasionally, pupils who are prescribed a salbutamol inhaler for asthma find these can help during an allergic reaction.

Pupils in their emergency bag will have either:

- An AAI and a treatment card which includes pupil name, photograph and an advice card.
- Pupils where allergies that are less severe can have antihistamine administered from the nurses' stock, provided consent for this has previously been provided by parents.
- Each pupil should have a minimum of two named, in date AAIs in School:
 - For Reception to Y2 pupils, both named EpiPens are in the orange bag in the dining room cupboard. For sports fixtures and for trips, the medicine must go with the pupil – overseen by the appropriate member of staff (ie the Trip Leader will collect the medicines before the trip and return them at the earliest opportunity).
 - For senior pupils, emergency bags are held in the dining room.
- The School Nurse checks the expiry date on all AAIs and antihistamine every term. Although provision of in date medication is the responsibility of the parent, the School nursing team will send one reminder email to parents to advise that any allergy/anaphylaxis medication is due to expire.
- The AAIs should be stored at room temperature (in line with manufacturer guidelines), protected from direct sunlight and extremes of temperature.
- Once an AAI has been used it cannot be reused and must be disposed of in accordance with manufacturer guidelines. Used AAIs can be given to the ambulance paramedics on arrival, if this assistance is sought, or can be disposed of in pre-ordered sharps bin which is collected by the local council. These are held in the nurses' room. Expired AAIs will be disposed of by the School Nurses in the same manner.

Emergency AAIs in School

A number of different brands of AAIs are available in different doses depending on the manufacturer. Following Department of Health guidelines, it is up to the School to decide which brand(s) to purchase. Schools are advised to hold an appropriate quantity of a single brand of AAI to avoid confusion in administration and training.

At Lochinver House School the chosen 'spare' AAI is EpiPen 300mcg + EpiPen Junior 150mcg spare pens are held in a green box marked 'Allergy Response Kit', it is situated on the wall to the right-hand side when entering the medical room. For awareness, due to occasional unprecedented increase in national demand of AAIs, there are periodic drug shortages, and this can result in periods where orders for AAIs cannot be provided in a timely manner. When this happens, the School Nurse assesses where the most appropriate place is for the current spare AAIs to be stored in School.

The 'Allergy Response Bag' is sealed by an easy to remove tag and contains the following:

- 1 x EpiPen 300mcg + 1 x EpiPen JR 150mcg
- Instructions how to use the device
- Manufacturer information
- A list of pupils to whom the AAI can be administered
- A bottle of liquid antihistamine
- A spare Ventolin inhaler

It is the responsibility of the School Nurse to monitor the expiry dates of the School held medicines, as mentioned above, and to replace accordingly.

Arrangements for replacing the AAls is organised by the School Nurse. Replacements are ordered from the School supplier. Where the Nurse has been advised of national shortages, advice will be sought from manufacturers. The aim is to have spare AAls in School but this is dependent on the suppliers.

Supporting pupils in School not previously known to have allergies and/or anaphylaxis

In the case of a first-time reaction of an undiagnosed pupil, the School Nurse will be called to assess the situation. If there is likely to be a delay in the School Nurse attending, the member of staff with the pupil should call an ambulance immediately dialling 999:

- The pupil must not be left alone and must be supported with basic first aid until help arrives.
- Offer reassurance to the pupil and maintain their dignity.
- Contact parents are the earliest opportunity.
- Staff are advised to follow the advice being given by ambulance personnel by telephone, whilst awaiting the arrival of the ambulance.

Catering / reducing the risk of allergen exposure in children with food allergies

The School Nurse informs the Catering Manager of any pupils with severe dietary allergies. Parents are welcome to meet with the Catering Manager to discuss their child's needs. Parents are also advised to talk openly with their child(ren) so that pupils have a good understanding of what their allergens are.

Avoidance of the pupils' allergic trigger is key, but there are rarely any absolute certainties in life, and there may be occasions where allergens are unknown. By having allergy awareness, clear policies and procedures that recognise the allergic child and clear management pathway of what to do if a child has an allergic reaction, risk can be minimised, and situations can be promptly dealt with in the most appropriate way.

The Department of Health makes the following recommendations:

- Drink/water bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the pupil for whom they are intended.
- Where food is provided by the School, the catering staff are trained how to read food labels for food allergens and are instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include preparing food for children with food allergies first, careful cleaning (using warm soapy water) or having specially designated food preparation areas and utensils. For further information, parents are encouraged to liaise with the Catering Manager.
- Food should not be given to food-allergic pupils in School without parental engagement and permission (eg shared food to celebrate birthday parties or any other food treats). Parents are encouraged to have a labelled 'treat box' for their child so they can be offered an alternative.
- Foods containing nuts are discouraged from being brought into School.
- Use of foods in crafts, cooking classes, science experiments and special events (eg fetes, assemblies, cultural events) need to be considered and may need to be restricted/risk assessed depending on the allergies of each particular pupil and their age.

Nuts in School and School trips

At Lochinver House School we have an increasing number of pupils and staff who suffer from food allergies and intolerances. Additionally, there are many who have food preferences, this may be for many reasons including religion and personal beliefs.

The national organisation 'Anaphylaxis Campaign' state that they would not necessarily recommend a blanket ban of any particular allergen in any establishment, including schools. This is because there are many allergens that could affect pupils and staff and no school can guarantee a truly allergy free environment. Our catering staff do not use nuts in any of the food they prepare and serve. However, they are unable to guarantee that dishes, or products served are totally free from nuts/nut derivatives. This is because ingredients, for example, curry paste, may be made in a factory containing nuts, bread may be baked in a factory handling nuts, or some production lines have machines lubricated with nut oil.

Allergy UK and The Anaphylaxis Campaign believe that a complete nut free school is an artificial environment that would not be the same as the 'real world'. It is felt that a 'whole school awareness of allergies' is a much better approach as this makes teachers, pupils and all other staff aware of what allergies are, the importance of avoiding pupils' triggers (where known), signs and symptoms, how to deal with allergic reactions and to facilitate 'duty of care' procedures to minimise risk. Moreover, we have a duty of care to all our pupils and staff and we want any individual affected by allergies to feel secure in their environment. Avoidance of allergen triggers is key, but there are rarely any absolute certainties in life, and there may be occasions where allergens or reactions are unknown. With updated allergy awareness, clear policy and procedures that identify allergic pupils/staff and a clear management pathway of what to do if pupils/staff members have an allergic reaction, risk can be minimised, and situations can be promptly dealt with in the most appropriate way.

Lochinver House School would like to make the following recommendations and request parental, staff and student support with the following:

- Nuts and products containing nuts or nut derivatives should NOT be brought into School.
- Nuts and products containing nuts must not be taken on School trips or to sports fixtures. Nuts and products containing nuts must not be consumed on transport between venues when pupils are away from School. The aim of this is to reduce the risk of an airborne allergic reaction and cross-contamination.
- If pupils wish to give birthday treats it must be Chocolate Freddo Frogs, Cadbury Buttons or Haribo. These are to be given out at the end of the day and **not** consumed in School.

Allergy support for School trips / sporting fixtures

Trip leaders are responsible for identifying pupils diagnosed with anaphylaxis/allergies and ensuring they have prescribed medication with them on trips. When required, AAIs and antihistamine medication should be signed out of the dining room cupboard by a member of the trip staff and returned immediately after the end of the trip. The relevant form is on the cupboard door.

Where a pupil is known to have allergies/anaphylaxis, they will not be allowed to join a trip if they do not have the appropriate, in date medication with them.

When planning an out of School activity such as a sporting event, excursions (including visits to restaurants and food processing plants), School outings, day trips and residential stays, parents are requested to think in advance about the catering requirements needed for their child. Contingency planning, including access to emergency medication and medical care should be discussed between the parents and trip staff in advance of the trip taking place.

Where pupils are attending a trip abroad, or for an overnight stay or extended day trip, parents are advised to discuss allergies/medical requirements with the trip leader at the time the trip is proposed.

For home sporting fixtures, catering staff will provide snacks, lunches and teas under the same existing controls held and adhered to for daily School lunches. Pupils with known allergies are encouraged to discuss their allergies and food choices with the catering staff before making a choice.

When away sporting fixtures are being arranged, PE staff will liaise with accompanying school staff to inform them that there may be pupils attending from Lochinver House School, who are known to have allergies/anaphylaxis. Lochinver House School cannot guarantee what provision/policies the host school is providing regarding sports teas, allergy management and so forth. To avoid an emergency, where the Lochinver House School pupil is known to have a severe allergy, parents may wish to consider providing a suitable packed lunch for their child to bring to the away fixture as this will lessen the risk of exposure to an allergen.

PE staff are responsible for ensuring pupils (who are known to have adrenaline/antihistamine medication prescribed) have the appropriate medication with them for away sports fixtures. For pupils on the School site, the medication should 'follow' the pupil and be held safely in the pupil's own orange emergency bag and taken to pitch side for easy access in case of an emergency. It is important that the bag is returned to the dining hall cupboard on return to School site. It is the sporting/trip leader's responsibility to do this.

Key messages to parents

If a child has been prescribed adrenaline, there are key messages that must be remembered:

- Ensure the pupil has quick access to their anaphylaxis/allergy medication at all times – there must be no exceptions
- For every AAI prescribed and held, check the expiry date regularly and make a note of it to ensure replacement devices are obtained in good time. The School Nurse will send one reminder email to parents when medication held in School is due to expire.
- Get a health professional to show the child how to use an AAI. If there has not been a demonstration, revert to the prescribing GP and ask for this. Alternatively, ask the practice nurse at the GP surgery or the School Nurse at the School for support. AllergyWise online can also help.
- Access a ‘trainer’ pen and practice regularly with the child. The School Nurse can support with this.
- Children who have been prescribed ‘junior’ AAIs need to go onto the adult dose when they weigh 30kg. This is likely to be during their time at the School.

Supporting staff with allergies

Lochinver House School staff with allergies should ensure the School Nurse has a record of the allergies and treatment. The School Nurse is happy to meet with individual members of staff to discuss required support.

Links with other guidance

Official guidance:	Statutory guidance: www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions Guidance on the use of AAIs: www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools
Spare AAI:	www.sparepensinschools.co.uk
Allergy UK:	Whole school allergy and awareness management: www.allergyuk.org/schools/whole-school-allergy-awareness-and-management
Anaphylaxis Campaign	www.anaphylaxis.org.uk AllergyWise training for Schools: www.anaphylaxis.org.uk/information-training/allergywise-training/forschools AllergyWise training for School Nurses: www.anaphylaxis.org.uk/information-resources/allergywise-training/forhealthcare-professionals
Education for Health	www.educationforhealth.org
Food allergy quality standards	The National Institute for Health and Care Excellence: www.nice.org.uk Assessment and referral after emergency treatment: www.nice.org.uk/guidance
Resuscitation Council	Emergency treatment of anaphylactic reactions: www.resus.org.uk/anaphylaxis/emergency-treatment-of-anaphylactic-reactions/

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Policy linked to: Catering and Hygiene Policy, Data Protection Policy, Educational Visits Policy, First Aid Policy, Health and Safety Policy, Supervision Policy.

Any data held in relation to the content of this policy will be managed in accordance with our Data Protection Policy and Privacy Notice.