WYCHWOOD SCHOOL

ALLERGY AND ANAPHYLAXIS MANAGEMENT POLICY

OVERVIEW

Wychwood School is committed to a whole school approach to the health care and management of those members of the school community suffering from specific allergies.

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.

The School is committed to proactive risk allergy management through:

• The encouragement of self-responsibility and learned avoidance strategies amongst children suffering from allergies.
• Provision of a staff awareness programme on anaphylaxis.
• The establishment and documentation of a comprehensive management plan where needed.
• The establishment of specific risk exposure minimisation practices and strategies wherever required
• Close liaison with parents of children who suffer allergies.

This management approach is congruent with contemporary specialist medical advice, and the School believes educating children to self manage their condition is a skill attuned to their ‘real world’ situation.

RATIONALE

The School recognises that a number of community members (pupils and staff) may suffer from potentially life threatening allergies to certain foods or toxins from insects. The School seeks parent, staff and pupil support towards maintaining a minimised risk environment, whilst also concentrating on ensuring effective medical response to potential anaphylactic episodes.

The intent of this policy is to minimise the risk of any child suffering allergy-induced anaphylaxis whilst at School or attending any school related activity, and to ensure staff are properly prepared to manage such emergency situations should they arise.

The common causes of allergies relevant to this policy are nuts, (in particular peanuts), dairy products, eggs, wasps, bees, and ants. The allergy to nuts is the most common high risk allergy, and as such demands more rigorous controls than the controls for allergies to dairy products, eggs and wasps, bees and ants.

The School is also aware of the stresses imposed on parents, guardians and teachers, with the potential for anaphylactic reaction in children for whom they have a responsibility. To this end, the provision of procedures and systems to manage such stress effectively is also an aim of this policy.

The underlying principles of the School Allergy Policy include: -

• The pro-active establishment of effective risk management practices to minimise pupil, staff, parents’ and visitors’ exposure to known trigger foods and insects.
• Staff training and education to ensure an effective emergency response to any allergic reaction situation.
DEFINITIONS

- **Allergy** - A condition in which the body has an exaggerated response to a substance (e.g. food or drug). Also known as hypersensitivity.
- **Allergen** – A normally harmless substance that triggers an allergic reaction in the immune system of a susceptible person.
- **Anaphylaxis** – Anaphylaxis, or anaphylactic shock, is a sudden, severe and potentially life-threatening allergic reaction to food, stings, bites, or medicines.
- **EpiPen** – Brand name for syringe style device containing the drug adrenaline which is ready for immediate intramuscular administration.
- **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.
- **Anaphylaxis Health Care Plan** – A detailed document outlining an individual student’s condition, treatment, and action plan for location of EpiPen.
- **Management System** – A record system managed by the person in charge which describes the individual student medical care plans and the particular members of staff who will need to be trained and informed of these plans.

KEY STRATEGIES

**General Aspects**

- The establishment of clear procedures and responsibilities to be followed by staff in meeting the needs of children with additional medical needs.
- The involvement of parents, staff and the child in establishing an individual medical care plan.
- Ensuring effective communication of individual child medical needs to all relevant teachers and other staff.
- Ensuring 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 children with packed lunches will be requested to give careful thought to eliminating food that may be of risk to those members of staff and pupils who suffer from such allergies.

**Nut Related Aspects**

- If the school is aware of a child who suffers a nut allergy, the school lunch caterer and suppliers must be made aware of the risk minimisation policy and requested to eliminate nuts and food items with nuts as ingredients from meals. This does not extend to those foods labelled “may contain traces of nuts”
- Children are encouraged to self manage their allergy.

**Dairy and Egg Related Aspects**

- Children with dairy product or egg allergies are managed by the School in consultation with the parents on a case by case basis.

**Insect Related Aspects**

- 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 pupils to report any above normal presence of wasps, bees or ants in all areas of the school.

RESPONSIBILITIES
• **Parents are responsible for:**
  o Providing ongoing and accurate and current medical information in writing to the School. This is to include the completion of the **Pupil’s Health Care Plan**. The School will seek updated information via a **Pupil’s Health Care Plan** at the commencement of each calendar year, to which parents are required to respond. Furthermore, should a child develop a condition during a year, or have a change in condition the parents must advise the School of the fact, and details to be clarified accordingly in the individual health plan.
  o Providing written advice from a doctor, which explains the child’s allergy, defines the allergy triggers and reaction, and any required medication, including completion of an **action plan** with supporting photographic or other evidence.
  o Providing EpiPens and/or other necessary medication, including monitoring their use by dates and replacing medication if necessary.
  o Providing appropriate foods to be consumed by the child if necessary.

• **The House Mistresses are responsible for:**
  o Ensuring the School receives medical documentation regarding a child’s allergy.
  o Ensuring there is an effective system to ensure this medical information is regularly updated.
  o Ensuring that an **Action Plan** is provided by the child’s parents.
  o Ensuring that where children with known allergies are participating in camps and/or external visits, the risk assessment and safety management plans for those camps and external visits include the **Pupil’s Health Care Plan**.
  o Ensuring that first aid staff are trained in the use of EpiPens and management of anaphylaxis.

• **Catering Staff are responsible for:**
  o Using only authorised suppliers and being the controlling/point and contact for all purchases of food stuffs for school catering.
  o Ensuring suppliers of all foods and catering suppliers are aware of the school minimisation policy.
  o Ensuring supplies of food stuffs are nut free or labelled “may contain nuts”
  o Being aware of pupils and staff who have such food allergies.
  o Clear labelling of items of food stuffs that may contain nuts.

**MINIMISED NUT ENVIRONMENT**

• The School is to promote the food allergy information through the New Girls Pack, in a class which has a child suffering an allergy.
• Staff awareness through H&S Induction.
• Notices in and around the catering areas and in risk assessments:
  o No Peanuts
  o No Nuts of any type
  o Foods with peanut or nut derivative or ingredient (e.g. Nutella)

**EDUCATIONAL VISITS**

• The Group 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.
• Where a pupil is prescribed EpiPen the Group Leader will ensure they or another supervising staff member is trained in the use of the EpiPen, and capable of performing any possible required medical treatment as outlined in the Pupils Health Care Plan.
• The Group Leader will ensure the Pupil has her EpiPen on the visit, and will be responsible for its security.
• If in doubt over the risk of a pupil with an allergy taking part on an education visit the Group Leader should seek advice from the Parent or School Doctor.
SCHOOL MANAGEMENT OF SEVERE ALLERGIES (ANAPHYLAXIS)

- All school staff, supply teachers, GAPS and support staff should be made aware of severe allergies and anaphylaxis and the emergency care procedures.
- Involved staff will know about the School Health Care Plan.
- The pupil is to carry one Epipen with another Epipen kept in a central, easily accessible place with an Emergency Care Flow Diagram.
- It is the responsibility of the parent/guardian to ensure that:
  - Medication is supplied to the school.
  - The medication is replaced as necessary i.e on change of dose or expiry date.
  - It is collected at the end of each academic year.
  - All medication has the original pharmacy label attached stating the pupil’s name, date of birth and dose.
- Consideration of a pupil’s allergies is to be made with regard to classes to be attended, e.g food preparation or use of certain materials in science lessons.
# Wychwood School Health Care Plan – Severe Allergies

<table>
<thead>
<tr>
<th>Pupil’s Full Name</th>
<th>Date of Birth</th>
<th>Full Address</th>
</tr>
</thead>
</table>

This plan should be completed by the pupil’s parent/guardian and approved by her doctor.

<table>
<thead>
<tr>
<th>Name of approving doctor</th>
<th>Signature and Date</th>
</tr>
</thead>
</table>

(A letter detailing medication/care and signed by the doctor/hospital consultant or specialist nurse can replace the signature)

<table>
<thead>
<tr>
<th>Name of parent or guardian</th>
<th>Signature and Date</th>
<th>Full Address</th>
<th>Relationship to Pupil</th>
<th>Home Telephone</th>
<th>Mobile</th>
<th>Email address</th>
</tr>
</thead>
</table>

Once completed, the parent/guardian is responsible for taking a copy of this School Health Care Plan to all relevant hospital/doctors appointments for updating

<table>
<thead>
<tr>
<th>Full Name of Pupil</th>
<th>The above named pupil is allergic to</th>
</tr>
</thead>
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## Details of Symptoms

- Itching
- Red blotchy rash
- Tingling/burning sensation in mouth
- Tingling/burning sensation in lips
- Swelling of lips
- Swelling of eyes
- Swelling of face
- Swelling round any sting
- Increased rate of breathing
- Behaviour change, less responsive or confused
**Details of Medication**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dose</th>
<th>Comment to be entered by Doctor or Parent/Guardian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antihistamine</td>
<td>(…………………………)</td>
<td></td>
</tr>
<tr>
<td>Ventolin (Salbutamol) Inhaler</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epipen</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I wish my child to have the medication/care detailed in this care plan and I accept that the emergency services will be summoned as required in the event that the school staff is unable to administer the plan at any time where appropriate.

<table>
<thead>
<tr>
<th>Signature of Parent/Guardian</th>
<th>Date</th>
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</table>

Pupil (If appropriate)

I agree to the care arrangements as detailed in this plan

<table>
<thead>
<tr>
<th>Name of Pupil</th>
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</table>

Signature and Date

The Headmistress or Designated Member of staff

I agree to this plan being administered in school. The medication will be administered by staff that has been made aware of the procedures to follow. In the event that these procedures cannot be implemented at any time the school will follow advice received from the health professional in summoning the emergency service as appropriate.

<table>
<thead>
<tr>
<th>Name of Headmistress of Designated Member of Staff</th>
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</table>

Signature and Date
**Mild/Moderate Reaction**
- Swollen Lips
- Flushed, itchy, blotchy skin
- Abdominal Pain and Nausea
- Swelling around eyes
- Fast Breathing

Give antihistamine dose as stated on pharmacy label

If asthmatic, give reliever via spacer (2 puffs),. Another 8 puffs, 1 puff per minute, can be given

Contact parent/guardian to inform them that their child has had an allergic reaction

Supervise closely

If condition worsens to severe reaction

**Severe Reaction**
- Swollen tongue
- Hoarse voice, difficulty swallowing
- Cough, difficulty breathing, noisy laboured breathing
- Change in colour, pale, clammy
- Feeling faint
- Deteriorating consciousness
- Collapse

Lie pupil down and raise pupil’s feet if breathing not compromised

**Administer Epipen:**
1. Hold adrenaline pen firmly
2. Remove out grey safety cap
3. Hold back end of adrenaline pen at 2 cm from upper outer thigh
4. Jab firmly against leg until you hear it click
5. Hold adrenaline pen in place for 10 seconds
6. Remove adrenaline pen from leg

1. Dial the emergency services
2. Follow instruction from ambulance control
3. Contact parent/guardian
4. Stay with Pupil
5. Give adrenaline pen to ambulance staff.