

Epi-Pen/Allergy Policy



'We can and we will'

GLEBE PRIMARY SCHOOL

Epi-Pen/Allergy Policy

Mission Statement:

At Glebe school we believe in an ethos that values the whole child. We strive to enable all children to achieve their full potential academically, socially and emotionally.

Aims

The aims of this policy are:

- To ensure that we provide all our children with the best quality of care we can; that they are safe, healthy, happy and therefore able to learn to the best of their ability.
- To ensure the safe and legal use of medication in the school environment;
- To ensure that pupils, staff and parents understand how our school will support pupils with medical conditions;
- To ensure that pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.

Legislation

Local authorities, schools and governing bodies are all responsible for the health and safety of pupils in their care.

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: Supporting pupils at school with medical conditions.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf

This also meets the requirements of:

- The Disability Discrimination Act 1995 (DDA),
- The Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005 and Equality Act (2010). These acts make it unlawful for service providers, including schools, to discriminate against disabled people.

Epi-Pen/Allergy Policy

Other relevant legislation includes:

- The Education Act 1996,
- The Care Standards Act 2000,
- The Health and Safety at Work Act etc. 1974,
- The Management of Health and Safety at Work Regulations 1999
- The Medicines Act 1968.

Allergies

An allergy is a hypersensitivity to a foreign substance that is normally harmless, but which produces an immune response reaction in some people. This can be a minor response such as localised itching or a severe response known as anaphylaxis or anaphylactic shock. Anaphylaxis is potentially life threatening, often explosive in onset with symptoms ranging from mild flushing to upper respiratory obstruction and collapse. It occurs when the allergen enters the bloodstream, causing the release of chemicals throughout the body to protect it from the foreign substance. Common triggers of an anaphylactic reaction are nuts and other foods including shellfish, sesame seeds and kiwi, insect stings or bites, drugs, latex, detergents/perfumes, blood products and sometimes exercise. Anaphylaxis causes approximately 20 deaths per year in the UK.

Epi Pen

Children with severe allergic reaction (anaphylaxis) to any substance may be prescribed an Epi-pen along with other medication to control and alleviate their condition.

If an Epi-pen is required in school then we must have two, one to be kept in the welfare room and one to be kept in the classroom.

All Epi-pens sent into school for any child MUST first come to the Hygiene Room where it will be logged onto the system and then sent to the relevant classrooms.

Any out of date Epi-Pens are returned to the parent for safe disposal.

Any child with Epi-Pens must have an up to date treatment plan which should be replaced after the child's review at hospital with the updated copy.

Parent Responsibilities

On entry to the school, parents are asked to inform the school nurse via the medical questionnaire of any history of allergy, highlighting previous severe allergic reactions, and any history of anaphylaxis. Those parents will be sent an Allergy Health Care Plan for completion and a copy of the Glebe School Allergy/Epi-Pen Policy and they will be invited in to school to meet with the school nurse. They must sign to say they understand and are happy with the care it stipulates.

Parents are responsible for ensuring any required medication (Epi-Pens , inhalers and any specific antihistamine – Piriton- are always kept on site) is supplied, in date and replaced as necessary.

Epi-Pen/Allergy Policy

Where food allergy is a major concern, the nurse will arrange for the parent to meet with the catering manager to make a plan to reduce potential exposure.

If an episode of anaphylaxis occurs outside school, the school nurse must be informed. Parents are requested to keep the school nurse up to date with any changes in allergy management with regards to clinic summaries or re-testing and new food challenges.

The responsibilities of the school nurse

Once aware of an allergy the school nurse should ensure the parent and pupil complete an allergy care plan and that sufficient emergency supplies are kept on site.

A meeting should take place between the school nurse, parents and pupil, preferably prior to entry to the school, so they can discuss the plan and the individual pupil needs in school. The catering staff should also be involved if the allergy is a food allergy.

Spare Epi-Pens should be kept at an appointed place clearly marked with each pupil's name and also any other medication that might be used such as a spare inhaler and antihistamine. A copy of their care plan will also be available at this location. If the allergy is food related, this MUST be repeated in the dining hall or kitchen.

In addition, the allergy will be highlighted on the pupil's electronic file and photo lists will be on display in the staff room, the hygiene room and in the dining room.

Care plans are available on each pupil's electronic file, detailing the action to be taken in an emergency.

The responsibilities of the school staff

All staff will complete anaphylaxis training. Training is provided for all staff on a yearly basis and on an ad-hoc basis for any new members of staff.

Staff must be aware of the pupils in their care (regular or cover classes) who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.

Staff must check all food and drink items that are brought into class for the allergens their specific child is allergic too. However, all staff must check that nuts in any form are not in tracker bars, sweets sandwiches nor brought in as snacks as we are a nut free school.

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication.

Administering the Epi-Pen

Epi-Pen/Allergy Policy

If a member of staff deems it necessary to administer an Epi-pen, then an ambulance MUST be called immediately stating Anaphylaxis and then the parent/guardian contacted.

ONLY STAFF WHO HAVE HAD THE PROPER TRAINING ARE PERMITTED TO ADMINISTER AN EPI-PEN.

It is important that the child is monitored at all times and if there is a delay in the ambulance arriving, and it is deemed necessary, then the second Epi-pen is administered.

ON NO ACCOUNT MUST THE CHILD BE TAKEN TO HOSPITAL USING PRIVATE TRANSPORT.

In the cases of life long and/or long term conditions expiry dates on medication should be diarised by the parent for replacement. **The school will endeavour to contact parents either by text, letter or phone call when medication is near to expiry date, but the ultimate responsibility is with the parent. The school cannot be held responsible for out of date medication.**

Children who do not have the correct, in date medication in school will not be permitted off school premises during the time they are in our care.

Audits are undertaken by the school nurse attached to Glebe and support given where required.

Further information can be found at:

The Anaphylaxis Campaign

PO Box 275

Farnborough

Hampshire

GU14 6SX P

hone 01252 546100

Fax 01252 377140

info@anaphylaxis.org.uk

www.anaphylaxis.org.uk

Reviewed: March 2022

Revised: March 2024

Emergency management of anaphylaxis (ABC) and involving family/carers

All pupils at risk of anaphylaxis, should have an Allergy Action Plan that describes exactly what to do and who to contact in the event that they have an allergic reaction. The [BSACI Allergy Action Plans](#) include this information, and are recommended for this purpose. The plan should include First Aid procedures for the administering of adrenaline.

Identify activities which the child may be at risk - for example food-based and outdoor activities.

Symptoms of anaphylaxis include one or more of the below:

Airway:

- Swollen tongue
- Difficulty swallowing/speaking
- Throat tightness
- Change in voice (hoarse or croaky sounds)

Breathing:

- Difficult or noisy breathing
- Chest tightness
- Persistent cough
- Wheeze (whistling noise due to a narrowed airway)

Circulation:

- Feeling dizzy or faint
- Collapse
- Babies and young children may suddenly become floppy and pale
- Loss of consciousness (unresponsive)

Action to be taken

- Position is important -lie the person flat with legs raised (or sit them up if having breathing problems)
- Give adrenaline – WITHOUT DELAY – if an AAI is available
- Bring the AAI to the person having anaphylaxis, and not the other way round. Avoid standing or moving someone having anaphylaxis
- Call an ambulance (999) and tell the operator it is anaphylaxis
- Stay with the person until medical help arrives
- If symptoms do not improve within five minutes of a first dose of adrenaline, give a second dose using another AAI
- A person who has a serious allergic reaction and/ or is given adrenaline should always be taken to hospital for further observation and treatment
- Sometimes anaphylaxis symptoms can recur after the first episode has been treated. This is called a biphasic reaction.