

JOHN LOCKE ACADEMY



Anaphylaxis/ Allergy Policy

Status	Guidance
Date approved	
Date of next review	

What is anaphylaxis?

Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. The whole body is affected, usually within seconds or minutes of exposure to a certain food or substance, but on rare occasions may happen after a few hours.

Any allergic reaction, including the most extreme form, anaphylactic shock, occurs because the body's immune system reacts inappropriately in response to the presence of a substance that it wrongly perceives as a threat.

Anaphylaxis is manageable. With sound precautionary measures and support from the staff, school life can continue as normal for all concerned.

Causes

Common causes include foods such as peanuts, tree nuts (e.g. almonds, walnuts, cashews, Brazil), sesame, eggs, cow's milk, fish, shellfish, and certain fruits such as kiwifruit. Whilst non-food causes include penicillin or any other drug or injection, latex (rubber) and the venom of stinging insects (such as bees, wasps or hornets) are other causes of anaphylaxis.

In some people, exercise can trigger a severe reaction - either on its own or in combination with other factors such as food or drugs (e.g. aspirin).

Symptoms

The most severe form of allergic reaction is anaphylactic shock, when blood pressure falls dramatically and the patient loses consciousness. This is rare in young pupils but does occur in adolescence.

More common symptoms are:

- Severe asthma
- Nettle rash (hives) anywhere on the body;
- Sense of impending doom;
- Swelling of throat and mouth;
- Difficulty in swallowing or speaking;
- Alterations in heart rate;
- Abdominal pain, nausea and vomiting;
- Sudden feeling of weakness (drop in blood pressure).
- A pupil would not necessarily experience all of these symptoms.
- Even where only mild symptoms are present, the pupil should be watched carefully. They may be heralding the start of a more serious reaction.

Medication

- The treatment for a severe allergic reaction is an injection of adrenaline. Pre-loaded adrenaline injection devices containing one measured dose of adrenaline are available on prescription for those believed to be at risk. The devices are available in two strengths – adult and junior.
- Adrenaline (also known as epinephrine) acts quickly to constrict blood vessels, relax the smooth muscles in the lungs to improve breathing, stimulate the heartbeat and help stop swelling around the face and lips.
- Should a severe allergic reaction occur, the adrenaline injection should be administered into the muscle of the upper outer thigh. An ambulance should always be called.

What the Academy should do

- Pupils who are at risk of severe allergic reactions are not ill and neither are they disabled. They are normal pupils, except that if they come into contact with a certain food or substance, they may become very unwell. It is important that such pupils are not made to feel different. It is important, too, to allay parents' fears by reassuring them that prompt and efficient action will be taken in accordance with medical advice and guidance.
- Many schools and academies have decided that it is necessary to draw up individual protocols for pupils with severe allergies. The Academy (in consultation with the school nurse) and the pupil's doctor should agree such protocols with the parents and pupil. The risks for allergic pupils will be reduced if an individual plan is in place.
- All staff should have at least some minimum training in recognising symptoms and the appropriate measures. Academies should have procedures known to staff, pupils and parents.

Adrenaline injectors are simple to administer. When given in accordance with the manufacturer's instructions, they have a well-understood and safe delivery mechanism. It is not possible to give too large a dose using this device. The needle is not seen until after it has been withdrawn from the pupil's leg. In cases of doubt it is better to give the injection than to hold back.

Where pupils are sufficiently responsible to carry their emergency treatment on their person, there should always be a spare epipen kept safely but not locked away and accessible to all staff.

Here at John Locke Academy we require children to have 2 adrenaline injectors available. These are kept in the class box so will be readily available if needed.

Staff are not obliged to give injections, but when they volunteer to do so training should be provided by an appropriate provider e.g. one from the local health trust.

Sporting and off-site activities

Whenever a severely allergic pupil goes out of the Academy building, even for sports in the Academy grounds, his/her emergency kit must go too. A staff member trained to treat allergic symptoms must accompany the pupil. Having the emergency kit nearby at all times is a habit the pupil needs to learn early, and it is important the Academy reinforces this.

Where a pupil has a food allergy, if is not certain that the food will be safe, think about alternatives that will mean the pupil is not excluded from school trips and activities. For example, for a day trip a pupil can take a lunch prepared at home, and for longer visits some pupils take their meals in frozen form to be reheated individually at mealtimes. In any event, the allergic pupil should always take plenty of safe snacks.

Insect sting allergies can cause a lot of anxiety and will need careful management. Special care is required when outdoors, the pupil should wear shoes at all times and all food or drink should be covered until it is time to eat. Adults supervising activities must ensure that suitable medication is always on hand.

Parents/Carers responsibility

- To provide school with an up to date treatment plan or letter of authorisation signed by the prescriber.
- To provide school with all prescribed medications, that is within the use by date.
- To inform school of any changes.

References:

Managing Medicines in School and Early Years Settings, DfES 2005 <http://publications.teachernet.gov.uk/eOrderingDownload/1448-2005DOC->

Medical Conditions at School: A Policy Resource Pack has been compiled by the Medical Conditions at School Group to compliment the DCSF guidance. It can be downloaded at <http://www.medicalconditionsatschool.org.uk/>

The Anaphylaxis Campaign website at <http://www.anaphylaxis.org.uk/home.aspx> contains Guidance for schools, which discusses anaphylaxis, treatment, setting up a protocol, and support for pupils and staff. It also includes a sample protocol.

The Anaphylaxis Campaign Helpline is 01252 542 029.

The Anaphylaxis Campaign Allergy in schools website at: <http://www.anaphylaxis.org.uk/information/schools/information-for-schools.aspx> has specific advice for schools at all levels.



JOHN LOCKE ACADEMY POLICY APPROVAL FORM

Anaphylaxis Policy

Signed: (Principal)

Printed name:

GOVERNING BODY SIGNATURE NOT REQUIRED ON THIS POLICY