



CHELTENHAM
LADIES' COLLEGE

Allergy Safety and Anaphylaxis Policy

2026-27

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1. AIMS AND OBJECTIVES

The policy outlines CLC's approach to allergy management including how College can work together to reduce the risk of an allergic reaction happening and to outline the procedures in place to respond if one does.

It will highlight training for staff, how we gather information about allergies, how this information is disseminated and how we support the welfare of pupils with allergies.

This policy applies to all staff, pupils, parents and visitors to College.

2. WHAT IS AN ALLERGY

An allergy is an adverse reaction caused by the body's immune system responding to a normally harmless substance (known as an allergen). Allergic reactions can range from mild symptoms (such as itching, rashes, or sneezing) to severe and potentially life-threatening reactions, including anaphylaxis, which requires immediate medical attention.

When a person with an allergy comes into contact with an allergen their immune system mistakenly identifies it as a threat and releases histamine. Histamine is a natural chemical released by the body as part of the immune system. It plays a normal role in protecting the body from harm, but during an allergic reaction, histamine is released too quickly and in excessive amounts, causing allergy symptoms.

People can be allergic to anything but serious allergic reactions are most commonly caused by food, insect venom (such as bee and wasp stings), latex and medication.

3. DEFINITIONS

Anaphylaxis is a severe, rapid and potentially life-threatening allergic reaction that can escalate very quickly. Life-threatening anaphylaxis may present with respiratory and/or cardiovascular symptoms even in the absence of skin or mucosal signs.

4. ROLES AND RESPONSIBILITIES

College takes a whole school approach to allergy management.

4.1. Designated Allergy Lead (DAL) & Designated Allergy Lead Governor (DALG)

The DAL is Jill Hill, Head of Medical Health & Welfare who reports to the Head of College and who is the senior leader responsible for allergy safety, The DALG is Warren Honey, the Safeguarding member of Council.

The DAL is responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy;
- Taking decisions on allergy management across the school;
- Ensuring staff are appropriately trained, have good allergy awareness and know how to respond to an incident
- Taking accountability for ensuring spare stocks of adrenaline, spare adrenaline pens and that staff know how to access them
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management
- Information gathering of allergies from parents, pupils and staff, ensuring allergy information is recorded, up-to-date and communicated to all staff
- Keeping a record of any allergic reactions or near-misses, reporting these to the appropriate authority (e.g.RIDDOR) where necessary and ensuring the circumstances are investigated and learnings shared
- Ensuring clear communication of any incidents and progress with the DALG
- Promoting regular opportunities for staff to practise a response to an anaphylaxis including an annual Anaphylaxis "drill"

The DALG is responsible for:

- Ensuring College publishes an up-to-date allergy safety policy and reviews it annually or following near misses/incidents
- Ensuring allergy is included on the College's risk register, with active management of allergy-related risks
- Assuring the governing body that the College's allergy management arrangements meet statutory requirements and reflect best practice
- Receive periodic reports on serious incidents and near misses
- Ensure the College's complaints procedure allows complaints to be raised and investigated related to allergy management.

4.2. The Catering Manager for College is responsible for:

- Allergen training for catering staff including adherence to and management of allergens within the kitchens.

- Staff adherence to the standards set out in the Food Safety Management System document.
- Staff compliance of food safety particularly around food labelling
- Distribution of pupil and staff allergy information to individual kitchens
- Ensuring catering staff adopt a holistic approach to food safety considering the wellbeing of the individual
- Head Chefs and Supervisors complete the accredited Highfield Level 3 award in Food Allergen Management
- Senior Chefs complete the accredited Highfield Level 2 award in Food Allergen Awareness and Control in Catering
- Kitchen Assistants complete a Level 2 Food Allergen Awareness and Control in Catering

4.3. The College Nurses/ Clinical Nurse Manager are responsible for:

- Collating allergy information for all pupils on entry to College
- Recording allergy information on the pupils' Medical conditions notes on Isams with details of severity and triggers
- Apply a "medical flag" on Isams that is visible to all staff and is imported via Evolve for school trips
- Updating any new information for all pupils in the same way should they develop an allergy following admission
- Completing Allergy Action Plans and Individual Healthcare Plans (where appropriate) including all relevant allergy information
- Completing initial and annual allergy "check in's" for boarding pupils with allergies as part of their annual nurse medical
- The allocated Allergy Nurse completes an initial and annual review for pupils who hold adrenaline pens to offer advice and practice in how to self-administer

4.4. All staff are responsible for:

- Promoting and practising allergy awareness across the school;
- Reading, understanding and putting into practice the Allergy Safety Policy and Anaphylaxis Policy and related procedures, and asking for support if needed

- Being aware of pupils with allergies and what they are allergic to
- Considering the risk to pupils with allergies posed by any activities in the classroom or on a trip
- Ensuring pupils always have access to their medication and how to summon help
- Knowing where emergency/additional Anaphylaxis kits are held
- Completing the mandatory online training and being able to recognise and respond to an allergic reaction, including anaphylaxis
- Participate in face-to-face practice in how to respond to anaphylaxis
- Whilst it is the school's responsibility to provide staff with annual training, individual members of staff are responsible for alerting the DAL or their manager if they have not received allergy training in the past 12 months
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times
- Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy;
- Forwarding any communication or information that comes directly to them from parents/pupils/guardians regarding allergens to the Nurses or DAL
- Ensuring that pupils have their medication and staff have access to their individual Allergy Action Plan when taking responsibility for a pupil off the school site

4.5. All boarding staff in addition to 4.4 are responsible for:

Supporting pupils, particularly new pupils with allergies in making safe food choices while they settle into the House mindful that the cuisine could differ significantly from what they are accustomed to.

They can do this by;

- Ensuring pupils with allergies check the menu at the servery before meals and supporting them in doing this
- Looking at the menu's the week ahead to check the pupils with allergies recognise what each dish contains- if necessary checking the complete allergen folder held in the kitchen
- Sitting with the pupils to eat to enjoy a meal together and making them feel included
- Intervening if they see a pupil may have taken food that contains their allergen

- Instilling allergy safety within the boarding community through formal and informal learning
- Ensuring all pupils are aware of their closest anaphylaxis kit
- Empowering pupils to ask questions and encouraging them to self-advocate
- Checking in with pupils with allergies to ensure they feel included and supported.

4.6. The Admissions team is likely to be the first to learn of a pupil/visitors allergy are responsible for:

- Ensuring a clear method to capture allergy information or special dietary information at the earliest opportunity in advance of any visit to College particularly if food will be offered
- Ensure there is a clear structure in place to communicate this information to the relevant parties including the catering manager/their team/school staff
- Parents and applicants are informed of catering arrangements during any admissions visits
- Plans are made for emergency medication if the child is to be left without parental supervision and how this is communicated to individual member of staff

4.7. All parents are responsible for:

- Being aware of and understanding the school's Allergy safety and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies even if their child does not have an allergy
- Providing the school Nursing team or Head of Medical Health and Welfare all information about their child's medical needs, including dietary requirements and allergies, history of allergy, any previous allergic reactions or anaphylaxis.
- Parents should also inform the school of any related conditions, e.g asthma, hayfever, rhinitis or eczema
- Considering and adhering to any food restrictions or guidance the school has in place particularly where there is a pupil with a severe allergy residing in the same boarding house
- Accurately describing whether their child has a medical allergy or intolerance, as distinct from a dietary preference or choice, so that the correct information is recorded and acted on.

- Providing consent to emergency treatment in line with College's Medical Policy
- Encouraging their child to be allergy aware

4.8. Parents of children with allergies

In addition to point 4.6, the parents and carers of children with allergies should:

- Enable the Nurses to complete the individual Allergy Action Plan and where appropriate an Individual Healthcare Plan or providing their Allergy Action Plan from home
- Ensure their child arrives with two in date labelled adrenaline pens. For day pupils this should be each day, for boarding pupils this should be on arrival and departure of the boarding house over holidays and exeats
- Ensure any other in date medication including inhalers are with their child at all times. For day pupils this should be each day, for boarding pupils this should be on arrival and departure of the boarding house over holidays and exeats
- Update the Nursing team with any changes to their child's condition at the earliest possible opportunity
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring such as not eating the food to which they are allergic

4.9. All pupils

All pupils should:

- Be allergy aware-particularly if there are pupils with whom they live who have severe allergies and to read the pupils' guide to allergies outlining these expectations
- Understand the risks allergens might pose to their peers and respect measures to support them
- Learn how they can support their peers and be alert to allergy-related bullying; to be upstanders and demonstrate allyship
- Learn how to recognise an allergic reaction and support their peers in case of an emergency, to seek immediate help and to know where their emergency anaphylaxis kit is held

- To be alert to known allergies and be aware of any food including tuck purchased outside of the House and how to store this safely

4.10. Pupils with allergies

In addition to point 4.8, pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk
- Avoiding their allergen as best as they can-feel empowered to check if unsure
- Understanding the importance of following the school specific processes put in place to mitigate risk
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction
- Ensure they carry two adrenaline auto-injectors with them at all times (if applicable) including when off site and only using them for their intended purpose
- Understanding how and when to use their adrenaline auto-injector
- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies

4.11. Staff with allergies

In addition to point 4.4, staff members with allergies are responsible for

- Knowing what their allergies are and how to mitigate personal risk
- If they are invited to a meal in College, they must contact the Catering Manager or relevant Head Chef ahead of time
- Avoiding their allergen as best as they can-feel empowered to check if unsure
- Understanding the importance of following the school specific processes put in place to mitigate risk
- Informing their line manager, HR and if they wish the DAL of their allergy and having this recorded appropriately

- Understanding that they should tell someone if they are not feeling well, or suspect they might be having an allergic reaction
- Ensure they carry two adrenaline auto-injectors with them at all times (if applicable) including when off site and only using them for their intended purpose
- Understanding how and when to use their adrenaline auto-injector
- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies

5. INFORMATION AND DOCUMENTATION

5.1. Register of pupils with allergies

Information for pupils with known allergies is held centrally on College's school database Isams. Pupils who have a history of anaphylaxis or are considered as having a severe allergy and have been prescribed adrenaline pens are highlighted separately to those where no adrenaline pens have been prescribed. Houses and the catering manager have access to a live list of pupils with allergies that can be run at any time. There are no restrictions on who or what staff can view in relation to allergies. This is a deliberate safety decision, not an oversight: restricting staff access to allergy information on a need-to-know basis can itself increase risk in an emergency. This approach is applied consistent with College's Data Protection Policy.

5.2. Allergy Action Plans & Individual Healthcare Plans

Each pupil with an allergy has an Allergy Action plan (AAP) and depending on the need, and Individual Healthcare Plan (IHP). The AAP and IHP are completed and update by the Nurses (unless provided by the pupils' own clinician) in collaboration with the pupil and from the information provided by parents. The information on these plans include:

- Known allergens and risk factors for allergic reactions;
- A history of their allergic reactions;
- Name of the medication the pupil has been prescribed including dose, this should include adrenaline pens, antihistamine, inhalers
- A photograph of each pupil (Photographs of pupils are processed under the lawful basis of legitimate interests and therefore do not require explicit consent)
- If they carry an adrenaline pen, details on how to administer this

5.3. Information for Staff with Allergies

Staff are asked to share information about their allergies with the Head of Medical Health & Welfare (DAL) and HR on appointment or at any time afterwards. Staff are asked to give consent to share this information with their immediate line manager/s and appropriate Colleagues and for this information to be held on their staff record. Staff with severe allergies and who carry adrenaline pens are asked to consent to have their photograph and allergy details displayed in the staff areas of kitchens in the same way as pupils do. Although information sharing is strongly encouraged, it can be shared only with the staff member's consent.

6. ASSESSING RISK

Potential allergens can be found in unexpected locations. All staff including visiting staff are expected to remain mindful of allergen hazards and consider them in their activities. Some examples include:

- Classroom activities such as science experiments, lessons or activities involving food where allergens are or may be present
- Bringing animals into the school such as a dog or hatching chick eggs can pose a risk
- Running activities or clubs where they might hand out snacks or food "treats"
- Ensure safe food is provided or consider an alternative non-food treat for all pupils
- Planning special events, such as cultural days and celebrations

7. FOOD, INCLUDING MEALTIMES & SNACKS

7.1. Catering in College

College is committed to providing a safe meal for all students, staff and visitors, including those with food allergies

- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training -reference 4.2
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures in line with the Food Safety Management System document.

- College has robust procedure in place to identify pupils with food allergies. The catering team within each of the College kitchens will get to know the pupils with allergies and what their allergies are. Photographs of pupils and staff who carry an adrenaline pen will be displayed in each kitchen
- The catering team will provide varied meal options to students and staff with allergies
- Food containing the main 14 allergens will be clearly labelled on each dish. Other ingredient information will be available on request.
- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging
- Where changes are made to the ingredients this will be communicated by the catering manager to the pupils directly, via the Head Chef or the Houseparent

7.2. Food bans or restrictions

College is aware that there is a perceived reassurance for those with allergies if an environment considers itself to be free of allergen, and example of this would be claims that we could be a "nut free" school. The reality is that bans of certain foods are impossible to enforce and give a sense of complacency or a false sense of security.

College commits to being an Allergen Aware school.

7.3. Food hygiene for pupils

- Pupils are reminded to wash their hands before and after eating
- Sharing, swapping or throwing food is not allowed
- Water bottles and packed lunches should be clearly labelled
- Pupils who prepare their own food in common room kitchens are expected to clean and pack away food when they are finished. Any breach of this practice that has potential to cause harm will be taken very seriously.

8. EDUCATIONAL VISITS AND SPORTS FIXTURES

- Trip leaders will have a register of pupils with allergies and details of their medication. Trip leaders should meet with the Clinical Nurse Manager ahead of any residential trip to discuss individual pupils' needs and complete a detailed risk assessment outlining the catering arrangements
- Allergies are included as a stand-alone, mandatory field on all trip risk assessments

- Staff (and some pupils, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction with face-to-face training and practice.
- Allergens will be clearly labelled on catered packed lunches.
- If attending Match Tea at another school, details of their dietary requirements will be sent ahead by the trip leader to ensure they have a safe meal
- Pupils with adrenaline pens will not be permitted to travel if they do not have 2 labeled adrenaline pens with them
- Antihistamine medication is provided in all trip first aid kits

9. INSECT STINGS

Pupils and staff with a known venom allergy will be highlighted on Isams and have an IHP to accompany their AAP. They can help to minimize the risk by:

- Avoid walking around in bare feet or sandals when outside and when possible keep arms and legs covered
- Avoid wearing strong perfumes or cosmetics
- Keep food and drink covered
- Know their own individual treatment plan (e.g. use of antibiotics or steroids) in the event of a sting or bite

10. ANIMALS

It's normally the dander (flakes of skin) saliva or urine that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupil with a known animal allergy should avoid the animal to which they are allergic.
- If an animal comes on site a risk assessment will be done prior to the visit.
- Areas visited by animals will be cleaned thoroughly
- Anyone in contact with an animal will wash their hands after contact

- If an animal lives on site such as in Boarding House, admissions must raise with pastoral staff ahead of House allocation. Pupils, parents and staff will be made aware and consideration and adaptations will be made
- School trips that include visits to animals will be carefully risk assessed

11. ALLERGIC RHINITIS/ HAY FEVER

Pupils with allergic rhinitis and hay fever are identified on entry and as their symptoms present. The Nurses document and distribute information as described in section 4.3. Pupils may require an IHP depending on their individual treatment plan.

12. INCLUSION AND MENTAL HEALTH

Allergies can significantly affect a pupil's mental health and wellbeing. They may experience increased anxiety, low mood, and a greater risk of bullying.

- No child with allergies should be excluded from taking part in a school activity either on or off site
- Pupils with allergies may require additional pastoral support in addition to those with the medical team
- Bullying related to allergy will be treated in line with the school's Behavior, Discipline and Rewards policy and Anti-Bullying and Anti-Cyberbullying Policy

13. ADRENALINE PENS

The medical centre and the MIU hold ampules of 1:1000 adrenaline which can be administered by the Registered Nurses to pupils and staff without prescription to save a life. There are additional adrenaline pens located in areas of College such as the day girl dining room, the HFC and main reception for emergency use by any member of staff or pupil.

Parents offer consent on joining College for staff to administer emergency first aid including prescribed medication as required.

Staff in those areas should ensure auto-injectors within a half-term of their expiration date and request a repeat prescription as necessary.

13.1. Storage of adrenaline pens/adrenaline ampules

- Boarding pupils who are prescribed with at least 2 adrenaline pens will have easy access to them at all times
- Day pupils are expected to arrive with and carry with them 2 adrenaline pens at all times.
- Half termly "surgery checks" by the named nurse for boarders include checks that adrenaline pens are in date. There is an expectation that House staff will check the dates of the pens weekly and parents for day pupils will do the same
- Adrenaline pens **must not** be locked away, each House will have a separate labelled box which is accessible by staff and pupils at all times
- Adrenaline pens should be stored at moderate temperatures (according to manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator)
- Used or out of date pens will be disposed of as sharps via the Medical Centre

13.2. Spare adrenaline pens

This school has a supply of spare adrenaline pens along with ampules of adrenaline held by the Nurses.

The locations of spare adrenaline pens are clearly signposted in Houses and on site.

The DAL is responsible for:

- Deciding how many spare pens are required
- What dosage is required, based on the Resuscitation Council UK's age-based guidance
- Which brand(s) to buy
- Distribution around the site and clear signage

14. RESPONDING TO AN ALLERGIC REACTION /ANAPHYLAXIS

Anaphylaxis is a severe allergic reaction with the potential to be fatal very quickly and the aim of the policy is to prevent an anaphylactic reaction by treating the allergic response early.

- The AAP clearly states what steps to take if the pupil presents with symptoms and all staff responsible for the pupil should be familiar with it.

- Pupils or staff presenting with a Mild-Moderate allergic reaction should be administered an anti-histamine tablet
- They should be closely monitored for signs of Anaphylaxis using the A (airway) B(breathing) C (circulation) approach
- If anaphylaxis is suspected administer adrenaline without delay- **If in doubt always give the adrenaline pen**
- If the symptoms progress as described in the AAP, pupils with an adrenaline pen should be encouraged to administer this to themselves. If they are unable to do this, staff can assist without delay
- Lie the pupil/staff member down with their legs raised. If they are having difficulty breathing, they may sit up slightly but legs should remain extended; if pregnant, lie on their left side; if unconscious, but breathing, place in the recovery position. Do not let them stand or sit up suddenly; keep them lying down until advised by a medical professional
- If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen
- Call 999 and also call the medical centre on 3000/01242 707048
- If their condition worsens at any time or after 5 minutes, there is no improvement, use a second adrenaline pen and the emergency services should be updated by dialling 999 inform them that a second dose of adrenaline has been given
- For pupils where a mild allergic reaction settles following administration of the antihistamine, they should be assessed by a nurse from the Medical Centre and kept for a period of observation
- Pupils who have used an adrenaline pen need to go into hospital by ambulance for a period of observation as per NICE guidance and/or local hospital policy
- If anaphylaxis is suspected but the pupil or staff member does not have a prescribed adrenaline pen or AAP, lie the pupil down with their legs raised, call 999 and explain anaphylaxis is suspected. Inform the operator that spare adrenaline pens are available and follow instructions from the operator- the Nurses will be able to administer adrenaline

15. TRAINING

15.1. The school is committed to training all staff annually to give them a good understanding of supporting those with allergies and knowing how to support individuals experiencing a reaction

This includes:

- Understanding what an allergy is;
- How to reduce the risk of an allergic reaction occurring
- How to recognise and treat an allergic reaction, including anaphylaxis [staff should be given the opportunity to practise with a training adrenaline auto-injector];
- How the school manages allergies and how to respond to an emergency
- Where adrenaline pens are kept (both prescribed pens and access to spare pens or adrenaline) and how to access them
- Their own responsibilities according to their role
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying;
- Understanding the importance of food labelling
- Having the opportunity to practise using anaphylaxis scenarios

16. ASTHMA

It is vital that pupils with allergies keep their asthma well controlled as asthma can exacerbate allergic reactions.

All pupils with Asthma

- Are identified on Isams as a condition and flagged as a medical flag by the nurses as per 4.3
- Boarding pupils have an annual asthma check with the asthma specialist nurse in the medical centre.
- All boarding pupils have an asthma action plan written by the nurses and overseen by the GP at Overton Park Surgery
- Parent of Day Pupils should provide their asthma plan to the nurses including any updates to their medication regimes and peak flow
- Pupils with asthma are highlighted on the AAP with the advised measures and additional considerations.

17. REPORTING ALLERGIC REACTIONS

College staff will log all allergic reaction incidents and near-misses on the H&S incident reporting system. The DAL will conduct a formal investigation including how the incident occurred, immediate and medium term actions alongside any lessons learnt with resulting changes in process.

18. RESOURCES

Allergy and Anaphylaxis Policy



RESPONDING TO ANAPHYLAXIS

SYMPTOMS OF ANAPHYLAXIS

A – Airway

- Persistent cough
- Hoarse voice
- Difficulty swallowing
- Swollen Tongue

B – Breathing

- Difficult or noisy breathing
- Wheeze or cough

C - Circulation

- Persistent dizziness
- Pale or floppy
- Sleepy
- Collapse or unconscious

IF YOU SUSPECT ANAPHYLAXIS, GIVE ADRENALINE FIRST BEFORE YOU DO ANYTHING ELSE.

DELIVERING ADRENALINE

1. Take the medication to the patient, rather than moving them.
2. The patient should be lying down with legs raised. If they are having trouble breathing, they can sit with legs outstretched.
3. It is not necessary to remove clothing but make sure you're not injecting into thick seams, buttons, zips or even a mobile phone in a pocket.
4. Inject adrenaline into the upper outer thigh according to the manufacturer's instructions.
5. Make a note of the time you gave the first dose and call 999 (or get someone else to do this while you give adrenaline). Tell them you have given adrenaline for anaphylaxis.
6. Stay with the patient and do not let them get up or move, even if they are feeling better (this can cause cardiac arrest).
7. Call the pupil's emergency contact.
8. If their condition has not improved or symptoms have got worse, give a second dose of adrenaline after 5 minutes, using a second device. Call 999 again and tell them you have given a second dose and to check that help is on the way.
9. Start CPR if necessary.
10. Hand over used devices to paramedics and remember to get replacements.

Name.....

Known Allergens.....

Emergency Contact details.....

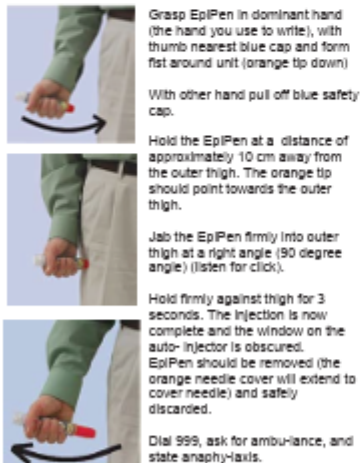
Mild/Moderate Reaction

- Hives (raised, red itchy rash)
- Itchy/tingling lips, mouth or tongue
- Swollen lips, face, or eyelids
- Abdominal pain or vomiting

Action to take

- Take
.....
non-sedating
antihistamine(s)
- Take a second dose if you have vomited, or are no better after 30 minutes
- Be prepared to use your adrenaline autoinjector.

How to give EpiPen®



Watch for signs of ANAPHYLAXIS

(life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider that you might be having anaphylaxis if you develop **SUDDEN BREATHING DIFFICULTY**

A AIRWAY

- Swelling in throat, tongue or upper airway
- Difficulty in swallowing

B BREATHING

- Sudden onset wheezing
- Breathing difficulty
- Noisy breathing

C CIRCULATION

- Dizziness, feeling faint
- Sudden sleepiness, tiredness, confusion
- Pale clammy skin
- Loss of consciousness

IF YOU HAVE ANY OF THESE SIGNS OF ANAPHYLAXIS:

- 1 Lie flat with your legs raised (if breathing is difficult, you may sit up)
  
- 2 Use your Adrenaline auto-injector without delay (eg. EpiPen®)
- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")

AFTER GIVING ADRENALINE:

1. Stay lying flat or sitting up until ambulance arrives, **do NOT stand up.**
2. If you are no better after 5 minutes, give yourself a further adrenaline dose using a second auto-injectable device, if available.

You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis.

- Always carry your adrenaline auto-injector(s) with you
- Check the expiry date regularly on your adrenaline auto-injectors
- Practise how to use your pen with a trainer device

This medical document can only be completed by a suitably trained healthcare professional. It should not be edited after completion. A new document should be completed if changes are needed, and only with a trained healthcare professional's recommendation. During travel, adrenaline auto-injector devices must be carried in hand luggage or on the person, and NOT in the luggage hold.

This action plan and authorisation to travel with emergency medications has been prepared by:

Sign & print name

.....

Hospital/Clinic

.....

Contact details

Date

ANAPHYLAXIS EMERGENCY RESPONSE PLAN

Purpose

The purpose of the Emergency Response Plan is to ensure staff and pupils understand their roles in response to a medical emergency such as anaphylaxis.

Anaphylaxis could happen to a pupil on role or a visiting pupil, a member of staff, a visitor or a member of public.

This document will provide a checklist to ensure support staff and pupils following an incident.

Patient name	House/Contact no.	DOB	Allergens

Adrenaline pen administration

Time	Given by (name)

Ambulance called

Time	Called by(name) include any subsequent calls

Information

Name of hospital	
Accompanied by	

Communication

Parents/NoK (Name)	Time	Contacted by	Contacted by

Reporting

Senior team	Date/time	Contacted by (name)
DAL informed		

DSL informed		
Nurses informed		
Houseparent (e.g for trips)		
Incident form completed		

Replacement Adrenaline *(patients should be issued with a replacement pen at the hospital)*

Adrenaline used	Number used	Replacement sourced	By (Name)
Pupils pen			
Emergency pen (location)			
Adrenaline 1:1000			

Follow up consideration

Question	Y/N	Comments
Psychological support/debrief for those involved?		
Investigation required?		
Medical follow up?		
Learning considerations?		
Additional training?		
Other?		

● Watch for signs of ANAPHYLAXIS
(life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms. ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

A AIRWAY	B BREATHING	C CONSCIOUSNESS
• Persistent cough • Hoarse voice • Difficulty swallowing • Swollen tongue	• Difficult or noisy breathing • Wheeze or persistent cough	• Persistent dizziness • Pale or floppy • Suddenly sleepy • Collapse/unconscious

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1 Lie child flat with legs raised** (if breathing is difficult, allow child to sit)
- 2 Use Adrenaline autoinjector without delay** (eg EpiPen®) (Dose: . . . mg)
- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")**

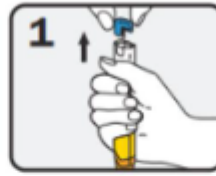
***** IF IN DOUBT, GIVE ADRENALINE *****

AFTER GIVING ADRENALINE:

1. Stay with child until ambulance arrives, **do NOT stand child up**
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement **after 5 minutes**, give a further adrenaline dose using a second autoinjectable device, if available.

You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis.

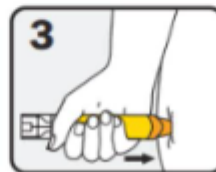
How to give EpiPen®



PULL OFF BLUE SAFETY CAP and grasp EpiPen. Remember: "blue to sky, orange to the thigh"



Hold leg still and PLACE ORANGE END against mid-outer thigh "with or without clothing"



PUSH DOWN HARD until a click is heard or felt and hold in place for **3 seconds**. Remove EpiPen.

Please complete and return this to the DAL Hillj@cheltladiescollege.org