

# Children's Allergy and Anaphylaxis Protocols for Schools and Child Care Organisations

The following care plan has been adapted from the organisation Allergy UK and is designed to ensure that everyone caring for the child is aware of their allergies, symptoms and to promote better understanding of the child's needs and medical requirements. This should allow for better management of symptoms and recognition of how to deal with emergency situations if they arise. It should also allow for effective communication between parents, childcare organisations and medical professionals which should help both the allergic child and anyone involved in their care.

Regular updates of this document should be made (it is recommended that this document is read by those caring for the child between 3-6 monthly periods to ensure familiarity and up to date appropriate care. An annual review is recommended (unless changes need to be made as suggested by the treating Doctor or Dietitian before this date).

The information included is given for guidance purposes only and should be used as an example to help with drawing up of an individual named protocol in conjunction with the clinical judgement of the patient's GP, dietitian or Consultant, the parents the childminder/ nursery /playschool /carer who is looking after that child.

It is essential that any child with a suspected food allergy is encouraged to seek medical confirmation of that food allergy if they have not already done so. All children with suspected food allergies should be referred directly to the GP. Please note all allergy referrals are by Health Care Professionals only – contact your Health Visitor or GP to discuss appropriate referrals.

## Allergic Reactions

These reactions can be mild, moderate or severe and in some cases life threatening – this is known as Anaphylaxis. Prompt treatment is necessary and follow up by medical staff may be required.

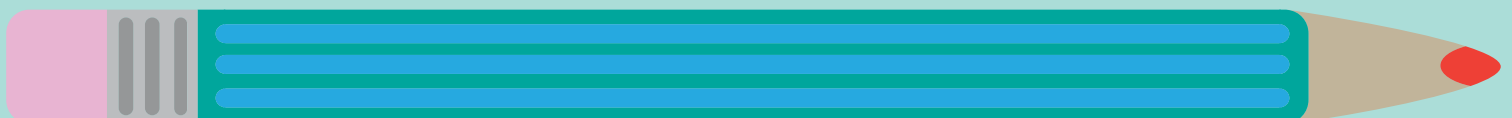
- It is essential that each child follows their own individual protocol and that this is updated if any changes occur.
- It is important that strict attention is paid to any potential allergens and risk of coming into contact with these allergens is minimised. (These are detailed below in precautionary measures).
- Emergency medication (if needed) must be accessible at all times and a plan of action should be drawn up to ensure everyone knows what to do in such an event to ensure safety of the child.
- It is important that children with allergies are treated sympathetically but also that they are able to be included in as many activities with precautionary measures in place which do not place the child at risk. Therefore allowing them to take part in school and out of school activities and feel they can be included in a supportive environment.

## Symptoms of Allergic Reactions

**Ear/Nose/Throat Symptoms:** runny or blocked nose, itchy nose, sneezing, painful sinuses, headaches, post nasal drip, loss of sense of smell/taste, sore throat/swollen larynx (voice box), itchy mouth and/or throat and blocked ears.

**Eye Symptoms:** watery, itchy, prickly, red, swollen eyes.

**Airway Symptoms:** wheezy breathing, difficulty in breathing and or coughing (especially at night time).





The gastrointestinal system/digestive system: swollen lips, tongue, itchy tongue, stomach ache, feeling sick, vomiting, constipation and or diarrhoea.

Skin: Urticaria –wheals or hives-bumpy, itchy raised areas and or rashes. Eczema –cracked, dry, weepy or broken skin. Red cheeks. Angiodema –painful swelling of the deep layers of the skin most commonly of the lips, face and around the eyes.

### Symptoms of Severe Reaction/ Anaphylaxis:

These could include any of the above together with:

- Difficulty in swallowing or speaking.
- Difficulty in breathing –severe asthma or throat swelling
- Swelling of the throat and mouth
- Hives anywhere on the body or generalized flushing of the skin
- Abdominal cramps, nausea and vomiting
- Sudden feeling of weakness (drop in blood pressure)
- Alterations in heart rate (fast Pulse)
- Collapse and unconsciousness

If you are in any doubt about the severity of any symptoms always seek urgent medical attention (Call 999 for an ambulance and state Anaphylaxis. The first line treatment of anaphylaxis is Adrenaline (epinephrine) given by injection.)

**Parents/carers of children with diagnosed food allergies should complete the following care plan with input from the early years staff and relevant medical professionals.**

#### Background Information

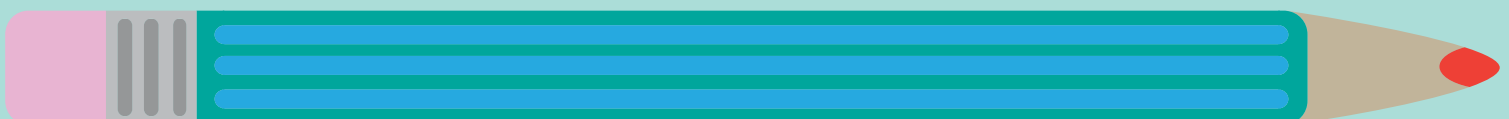
Photograph of child:

#### TIP !!!

Place child's photo here – make sure it is recent it could be a school photograph or one which shows recent hairstyle, etc. This is to make your child is easily recognisable to anyone who may be caring for him/her

Name of child:

Date of birth:



Address:

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Parents/carers name and contact numbers:

Additional Contacts:

---

GP contact details



**ALLERGY TO:**

This means .....must avoid ALL substances which contain or may contain .....

.....

.....

.....

.....

**Symptoms**  
Please list usual allergic symptoms of your child;

- 
- 
- 
- 
- 

**Emergency Procedure**

This emergency procedure should be kept with the records on the premises and a copy attached to any medication required so it is readily accessible. All staff should be made aware of this procedure.

Does..... need/carry emergency medication? Please detail the relevant medication below:

- 
- 
- 





Is this an inhaler?

Is this antihistamine medicine or tablets?

Is this an EpiPen or Anapen?



Where is this medication kept? (Parents should liaise with nursery staff to agree a suitable place for storage out of reach of children but readily accessible)

When and how should the medication be administered?

.....  
.....  
.....  
.....  
.....  
.....  
.....

All medication should be clearly labelled with the child's name, in the original container as dispensed by the pharmacist, expiry dates and instructions for use should be clearly stated.

**Please note that the responsibility for ensuring the medication is "in date" remains with the parents.**



Name of medication



Details of use



Expiry Date

It is very important that anyone caring for.....is aware of the symptoms of the food allergy and uses the appropriate agreed protocol to deal with these symptoms or if in any doubt seeks urgent medical advice as soon as possible. (Please telephone an ambulance in cases of severe allergic reactions as these are medical emergencies).

Staff may volunteer to be trained to administer medication for the treatment of anaphylaxis and training could be arranged through the health visitor, allergy nurse or G.P. The Anaphylaxis Campaign training video, Action for Anaphylaxis, is a useful resource to have to hand.

### Training

Names of staff volunteers.....

Dates of Training.....

Provided by.....

Updated training due.....

Names of Staff aware of procedures.....





## Precautionary Measures

1)..... should avoid all products containing .....  
Staff will try to avoid any accidental exposure during the nursery day. .... needs reminding by their parents that they must not swap or share any food items with other children

2).....'s medication must be taken to any off site activities Prior discussion for any trips or offsite activities will include safe storage and handling of medications and ensuring this protocol accompanies the child at any times they are off site.

3).....'s class mates will be made aware of allergies and their triggers at certain times i.e. circle time or during cookery/ science and in general conversations. The 'No sharing' rule will be emphasized during these times.

## Be aware of the following

- Information should be given by the child's key worker about ..... 's allergy to all staff including temporary staff, cover staff, students and trainees. Staff should at all times try to avoid as far as possible any triggers. All reactions should be reported to the parents via the responsible staff member.
- For art and craft lessons make sure suitable materials are being used.
- Advise the child regularly of the 'NO SHARING' policy.
- Encourage your child to report to a designated member of staff if they are not feeling well.
- A written record of medications/treatments given should be kept by staff and a copy given/ sent to the parent.

## Consent and Agreement signed by the parents/carers

I agree to the staff taking responsibility and administrating medication in the event of an allergic reaction taking place.

Parents/carers..... Date .....

The Nursery/playgroup manager ..... Date.....

The key worker ..... Date.....





**Follow up form:**

**Record sheet allergic information**

To be filled out if any symptoms of allergy occur (this can be used in school settings or early childcare settings) this is to be sent to parents once completed via child or given to the parents when child is collected.

**Name of child:**

**Age of child:**

**Allergy :**

**Date of allergic reaction:**

**Time :**

**Symptoms:**

**Treatment given & Time: Given by (signature)**

**Monitoring of symptoms:**

**Parents contacted Yes / No**

**Special note to parents:**

**Signed:**

**Dated:**

