



**The Park Federation Academy Trust  
Cranford Park Academy**

**Anaphylaxis Policy  
2022-2024**

## Version History

Version	Date	Status and Purpose	Changes overview
1	June 2015	New policy for CPA	
2	February 2017	Review	No changes
3	February 2019	Review	No changes
4	February 2021	Review	Addition of parent reminder letter sent (6). Addition of risk assessment carried out (12).
5	February 2022	Change of procedure for Auto injectors	New procedure for auto-injector storage (10). Auto-injector procedure for after school events (11, 12 & 13)

## Approval

<b>Signed by CEO and Federation Principal on behalf of the Board of Directors</b>	Dr. Martin Young
<b>Date of approval</b>	June 2015
<b>Date of review</b>	October 2022
<b>Next review</b>	October 2024

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## Severe Allergy (Anaphylaxis) Policy

1. It is the parents' responsibility to inform the School Welfare Team about their child's condition before the day of commencement of school.
2. If the condition is diagnosed during their time at the school, it is the parents' responsibility to inform the school immediately.
3. Welfare Team to ask for written confirmation from parents regarding medical instructions or a copy of the treatment plan as provided by the hospital specialist (if this has not been sent directly). It is the parent's responsibility to update medical instructions and provide consent for the administration of medication.
4. The Welfare Team will arrange a meeting with themselves and the parent if necessary to discuss the treatment plan.
5. It is the responsibility of the parents to provide at least **two** sets of the relevant medication e.g. Auto-injectors/Antihistamine/Salbutamol (one for the classroom and one for the canteen).
6. It is the Welfare Team's responsibility in liaison with the parent to check the expiry date of medication and parental responsibility to replace medication, which is due to expire or has been used. The Welfare Team will send a reminder letter to the parent one month before expiry.
7. The Class teacher and LSA will be briefed about child's condition. Individual treatment plans will be displayed in the **Welfare room**, available in the **classroom box** and in the **canteen medical cupboard folder**.
8. Training support for **all staff** to be reviewed on an annual basis. It will be the responsibility of the Welfare Team to contact the school nurse responsible for anaphylaxis training and keep a record of attendees. This will include practical supervised sessions on the administration of adrenaline injection (Epipen/Emerade/Jext). All teaching staff, LSAs and SMSAs should attend.
9. Medications will be held in the **classroom box** and the **canteen** clearly labelled with the child's name and class with a copy of their individual treatment plan to ensure they are easily accessible to staff during the school day.
10. Both Auto-injectors (e.g. Epipens) will be kept in the classroom box so that they are easily accessible at all times during the school day and if the child is at a club or booster after school.

11. After School Club will provide Welfare with name of the child attending. Welfare will get auto-injector meds from classroom box and deliver to AFC in a red bag. AFC will return bag to Welfare and Welfare will return meds to class box the following day
12. Multi Sports Club – Welfare will identify any children with auto-injector meds from the termly register. Welfare will get meds from classroom box and deliver to MSC in a red bag. MSC will return bag to Welfare and Welfare will return meds to class box the following day
13. Booster classes – the teacher will provide Welfare with a termly register. Welfare will get auto-injector meds from class box and give to the teacher. Teacher will return meds to Welfare room and Welfare will return meds to class box.
14. If a child has an allergic reaction, staff are to follow the instructions detailed on the child's individual treatment plan.
15. Parents have responsibility to provide an appropriate packed lunch for school trips.
16. When a child is on a school trip, a risk assessment is carried out and the school will ensure appropriate medication is held by a member of staff. Children who have a risk of anaphylactic shock will always be in a group supervised by a member of staff.
17. Parents to instruct their children not to buy food when on school trips but to simply eat items from their own packed lunch boxes.
18. When planned curriculum involves contact with food items (e.g. cookery), prior discussion to be held between school and parents to agree on suitable ingredients.