

ST.Anthonys School

PPG NO 05.

POLICY TITLE: <u>Policy for management of Anaphylaxis</u>
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1:0 PURPOSE: To ensure that any person who has an Allergic event in St.Anthonys School will receive prompt and appropriate action

2:0 SCOPE: Applies to all areas within the workforce of St.Anthonys.

3:0 RESPONSIBILITY: Lies with the Principal to alert the School Nurse prior to enrolment of a pupil made known to the Principal with severe allergy. Lies with each member of staff for ensuring he/she adheres to this policy and that School Nurse promotes a responsible attitude to preventing and reporting of any incident. Lies with all those in a supervisory capacity who are responsible for the implementation of this policy.

4:0 PROCEDURE:

Management of an Anaphylaxis event should proceed as adapted from the HSE guidelines:

- Staff member trained in Anaphylaxis/BLS to administer first aid
- To carry out a risk assessment
- Management /School Nurse responsible for referring the party involved to Mayo General Hospital A+E Dept for treatment and/or contacting respective G.P
- An incident form shall be completed by the School Nurse in charge

4:1 RISK ASSESSMENT: Risk of anaphylaxis event during school time from exposure to the following

- Peanuts, Hazelnuts, Cashews, Almonds
- Egg
- Cows Milk
- Wheat, Soybean
- Bee or wasp sting
- Fish, Shellfish

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4:2 MANAGEMENT OF RISKS: Control Measures to minimise risk of Anaphylaxis

- Knowledge of above risk factors
- Prevention of exposure to the allergens
- Staff training to respond appropriately to anaphylactic event and include demonstration of use of pupils prescribed Epipen (or similar)
- Identifying the pupil concerned and underlying risk factors if specified from parent/GP
- Promote staff awareness of the identity of the pupil. Each staff member shall familiarise with pupils concerned and the course of action necessary in the event of said pupil having an allergic reaction. Nurse will liaise with teacher on individual plan for pupil
- Communicate with staff and students about severe allergies and the school policy i.e. promote awareness among staff that Anaphylaxis is a severe and rapidly progressive allergic reaction which is potentially life threatening. For Teachers to be aware of traces of allergens on milk or egg cartons (during art/cookery activity) That Teacher should avoid use of food treats in class as some foods have hidden allergens. That Teacher will have a strategy in place for field trips or sporting events outside the school setting.
- Communicate with parent/guardian of said pupil to familiarise regarding previous allergic reactions and respective treatment prescribed before starting school term.
- Nurse will furnish updated information on Anaphylaxis as per best practice. This will be filed in the green folder at the nurses station

4:21 MANAGEMENT OF RISKS: For pupil who is prescribed the Epipen (or similar)

- Promote awareness of where the Epipen is stored to all staff
- Staff training in the use of the Epipen
- The Epipen should never be stored in a locked area, freezer or fridge
- The Epipen should be easily accessed at all times and away from direct heat
- The Epipen should be clearly labelled with the pupils name
- The training pen should be stored in a different location to the prescribed pen
- Nurse will be responsible for alerting parent weeks prior to expiry date of the Epipen
- The Epipen must be replaced by parent before the school term

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4:21 MANAGEMENT OF RISKS: Further Control Measures (contd)

- Completion of Risk Assessment and Management Form for all pupils made known to the nurse who have Severe Allergies (see next page) to be stored at the nurses station in respective folder and a copy of which should be given to the pupils teacher
- In the event of a pupil having an anaphylaxis episode who was not previously been made known to the school nurse Emergency First Aid should be given (see page 10)
- Management shall promote awareness amongst their pupils re severe allergies and the importance of their role in maintaining a safe and supportive environment for their peers.

Board of Management

[Signature] Date: 29/6/2026 *[Signature]*

Policy Prepared and updated by Mary O'Malley RGN/School Nurse

Date: 5/2/26

[Signature]

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Sample Risk Assessment and Management Forms as listed

- Pg. 5 Risk Assessment Forms to be completed by the school nurse (sample plan for management of Allergy in school and sample for management of pupil known to be at risk of Anaphylaxis)
- Pg. 7 Copy of Sample letter to GP
- Pg. 8 Copy of sample letter to be returned by GP
- Pg. 9 Reference list
- Pg. 10 Emergency First Aid for an Anaphylaxis episode

Updated by Mary O'Malley RGN/School Nurse
Date: 5/2/26

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Individual Risk assessment and Management of Allergic Reaction in school

Name of Pupil: _____

(insert photo below) D.O.B _____

Class Teacher: _____

School Nurse: _____



Diagnosis/Allergy:

Known Triggers :

Medication: PRN (as per GP note)

First emergency contact (Mother/Guardian)

Mobile:

Second contact: (Dad)

Mobile:

G.P:

Phone:

Risk assessment and implementation of plan of action

Mild to moderate reaction

→

- Tingling sensation in mouth
- Swelling of eyes, lips ,face
- Large hives, extensive skin redness
- Stomach ache, vomiting, diarrhoea

»»»»»» Course of action

Reassure the pupil and observe closely
Call for assistance/school nurse
Give the prescribed antihistamine/inhaler
Phone the emergency contact as listed above
Monitor closely for signs of severe reaction and follow actions
Record the incident with respective follow up

Severe reaction

→

- Breathing difficulty
- Wheezing/coughing spasm
- Pale/floppy
- Loss of consciousness/collapse

»»»»»» Course of action

Call for assistance to administer emergency Anapen
Delegated staff member to phone ambulance (112)
State your location. Be specific regarding symptoms
Delegated staff member to phone emergency contact
Commence basic life support
Continue with BLS until paramedics arrive
Record the incident with respective follow up

Signed: Mary O'Malley /School Nurse

Mary O'Malley RSN

ST.Anthonys School

RE: Pupil _____

Date:

DOB:

Dear Doctor

Pupil _____ attends our school and their mother _____ has advised that he was recently prescribed the Epipen following severe allergic reaction. I understand _____ is attending Dr _____ in Hospital. In order to update my records and implement our Risk Assessment and Management of Anaphylaxis in school I would very much appreciate if you can complete the enclosed and return at your earliest convenience:

Regards
Mary O'Malley /School Nurse

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GP: _____

PUPIL NAME: _____

D.O.B: _____

DIAGNOSIS

LIST OF PRESENT MEDICATION

PRN MEDICATION WHICH CAN BE GIVEN BY THE SCHOOL NURSE

SIGNED: (GP Signature) _____

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Reference List

Melnyk B, Fineout-Overholt E. *Evidence Based Practice in Nursing and Healthcare*, Philadelphia, U.S.A 2005

Melnyk B.M (2002) Strategies for overcoming barriers in implementing evidence based practice. *Paediatric Nursing*, 28(2),159-161

An Bord Altranais (2000) Guidance to Nurses and Midwives on the development of Policies Guidelines and Protocols

An Bord Altranais (2000) Guidance to Nurses and Midwives on Medication Management

An Bord Altranais (2000) The Code of Professional Conduct for each nurse and midwife
www.nursingboard.ie

Website: www.asthmasociety.ie

Website: www.into.ie/ROI/ManagingChronicHealthConditionsatSchool

Website: www.hse.ie

Website: www.anaphylaxisireland.ie

First Aid

FOR Anaphylaxis

To handle an emergency situation, use Emergency Scene Management (ESM).

- 1 Take Charge.
- 2 Call out for help.
- 3 Assess hazards and make the area safe.
- 4 Find out what happened.
- 5 Identify yourself and offer to help.
- 6 If head or spinal injuries are suspected, support the head and neck.
- 7 Assess responsiveness.
- 8 Send or go for medical help.

Note: Protect yourself and others by wearing vinyl gloves when giving first aid. Use a shield or face mask with a one-way valve when giving AR or CPR.

Common causes of anaphylaxis

- 1 Stings - by bees, hornets, wasps and fire ants
- 2 Medications - including antibiotics (esp. penicillin), seizure medications, ASA and muscle relaxants
- 3 Foods - like milk, eggs, nuts (incl. peanuts), shellfish, whitefish, food additives
- 4 Exercise

Emergency Numbers



St. John Ambulance

AMBULANCE _____
FIRE _____
POLICE _____
FAMILY DOCTOR _____
POISON INFORMATION CENTRE _____

Signs and symptoms of anaphylaxis

The early signs and symptoms of anaphylaxis may include:

- 1 Itchy, flushed skin, raised skin rash (hives)
- 2 Sneezing, running nose and watery eyes
- 3 Swelling of the airway
- 4 A "lump" or "tickle" in the throat that won't go away
- 5 Coughing
- 6 Sense of impending doom
- 7 Nausea and vomiting

As anaphylaxis progresses, the signs and symptoms may include:

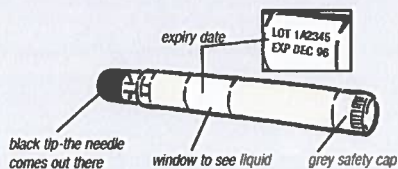
- 1 Pale skin and / or cyanosis
- 2 Anxiety and perhaps a severe headache
- 3 Wheezing, chest feels like it's being squeezed
- 4 Breathing difficulties, coughing
- 5 Pulse is rapid and irregular
- 6 Shock - wrist pulse may be hard to find
- 7 Swelling of the lips, tongue, throat, hands and feet
- 8 Unconsciousness, stopped breathing, stopped heart (cardiac arrest)

How to help with medication for anaphylaxis

Anaphylaxis medication is injected into the body with a needle. The EpiPen® Auto-Injector is designed for simple use to give the right amount of medication with each injection. If the casualty cannot give the injection to him or herself, you may have to do it.

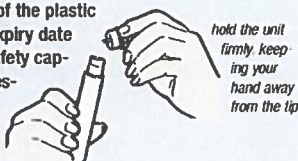
EpiPen® Auto-Injector

The EpiPen® Auto-Injector is a disposable drug-delivery system with a spring-activated, concealed needle. The EpiPen® Auto-Injector delivers a single dose of medication. A casualty may have more than one auto-injector for multiple doses.



To use the EpiPen® Auto-Injector

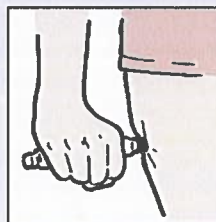
- 1 Take the unit out of the plastic case. Check the expiry date and pull off the grey safety cap - once this is off, any pressure on the black tip will activate the unit.



- If the liquid in the syringe is brown, do not use it. It should be clear and have no colour.
- If the device has expired (check the expiry date) do not use it.
- If you or anyone else is injected by mistake, get medical help.

only use the auto-injector on the fleshy part of the outer thigh

The EpiPen® Auto-Injector can be given through lightweight clothing



- 2 Firmly jab the black tip into the outer thigh until the unit activates - you'll feel and hear a "click." Hold the EpiPen® Auto-Injector in place for ten seconds, then pull it straight out.
- 3 After the injection, keep the casualty warm and avoid any exertion. If the casualty's condition doesn't get better in 10 minutes, give another dose if the casualty has one. The medication will begin to wear off within 10 to 20 minutes - get medical help right away.

What to do with the EpiPen® Auto-Injector

Bend the needle now coming out of the black tip of the unit against something - never touch it. Put the broken needle and the used unit back in the plastic case and take it to a hospital with the casualty.