



## Epipen Policy

**Excellence for All**

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Committee	Pupils & Personnel Finance & General Purposes
Executive Headteacher	Mr Ben Waldram
Chair of Governors	Mr Pete Cumberland

Revision date	Author of changes	Summary of changes
August 2024	Lorraine Jones	None



Anaphylaxis is a severe and potentially life-threatening reaction to a trigger such as an allergy. It's also known as anaphylactic shock.

### **Symptoms of anaphylaxis**

Anaphylaxis usually develops suddenly and gets worse very quickly.

The symptoms include:

- feeling lightheaded or faint
- breathing difficulties – such as fast, shallow breathing
- wheezing
- a fast heartbeat
- clammy skin
- confusion and anxiety
- collapsing or losing consciousness

There may also be other allergy symptoms, including an itchy, raised rash (hives), feeling or being sick, swelling or stomach pain.

### **Aim of this policy**

The aim of this policy is to describe to parents, governors and staff the measures taken by the school to protect those children who may need to receive the administration of an epi-pen. Staff will receive training from the school nurse to support them with the administration of epi-pens.

### **Management of allergies**

All children with non-allergies that require medical treatment have an Individual Medical Plan stating their allergies and triggers. These plans are kept in the classroom and school offices. Photographs of these children with their triggers and medication are displayed on the staffroom wall and staff are directed to this information.

Our aim is that each child has two epi-pens in school, one that it is kept in the school office and the other kept in the child's classroom. All staff who work with the child should know where the epi-pens are kept in the classroom, so that they can be accessed in an emergency.

If a child attends any school activities either on site or off-site, the class epi-pen will be taken with them, the office epi-pen should stay in the school office except on offsite activities.

Spare epi-pens have been obtained and are kept in each school office with the other medicines and in the Nursery kitchen. Parents with children who have epi-pens will be asked to sign the written consent form for use of the spare epi-pen in an emergency. These pens will be regularly checked by our Teaching Assistants responsible for overseeing first aid on each site.

Signs of an allergic reaction

The signs of an allergic reaction are:

**Mild-moderate allergic reaction:**

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

**ACTION:**




- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine according to the child's allergy treatment plan
- Phone parent/emergency contact



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

- AIRWAY:** Persistent cough  
Hoarse voice  
Difficulty swallowing, swollen tongue
- BREATHING:** Difficult or noisy breathing  
Wheeze or persistent cough
- CONSCIOUSNESS:** Persistent dizziness  
Becoming pale or floppy  
Suddenly sleepy, collapse, unconscious

**IF ANY ONE (or more) of these signs are present:**

1. Lie child flat with legs raised: (if breathing is difficult, allow child to sit)   
2. Use Adrenaline autoinjector\* **without delay**
3. Dial 999 to request ambulance and say ANAPHYLAXIS

**\*\*\* 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 dose of adrenaline using another autoinjector device, if available.

Anaphylaxis may occur without initial mild signs: **ALWAYS** use adrenaline autoinjector **FIRST** in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY** (persistent cough, hoarse voice, wheeze) – even if no skin symptoms are present.

As a school, we recognise that asthma is a widespread, serious, but controllable condition. This school welcomes all pupils with asthma and aims to support these children in participating fully in school life. We endeavour to do this by ensuring we have:

- ✓ an asthma register
- ✓ up-to-date asthma policy,
- ✓ all pupils with immediate access to their reliever inhaler at all times,

*Friendship • Respect • Inclusion • Enthusiasm • Nurture • Determination*

- ✓ an emergency salbutamol inhaler
- ✓ ensure all staff have regular asthma training,
- ✓ promote asthma awareness pupils, parents and staff.

### Asthma Register

We have an asthma register of children within the school, which we update yearly. We do this by asking parents/carers if their child is diagnosed as asthmatic or has been prescribed a reliever inhaler. When parents/carers have confirmed that their child is asthmatic or has been prescribed a reliever inhaler we ensure that the pupil has been added to the asthma register and has:

- their reliever (salbutamol/terbutaline) inhaler in school,

## Guide to Using Your EpiPen® and Trainer Pen

Using your **EpiPen®** is easy, especially if you practise using your Trainer Pen. Familiarise yourself with these simple steps and watch the demonstration video so you are clear about what to do in an emergency.

There is no need to remove clothing to use your **EpiPen®**, but make sure the orange end will not hit buckles, zips, buttons or thick seams on your clothes.

To remove **EpiPen®** from the carry case. Flip open the lid on the carry case. Tip the carry case and slide the **EpiPen®** out of the carry case.

Lie down with your legs slightly elevated to keep your blood flowing or sit up if breathing is difficult.

**1** **Pull off Blue Safety Cap.** Grasp EpiPen® in dominant hand, with thumb nearest blue cap and form fist around EpiPen® and pull off the blue safety cap. Remember: "Blue to the sky, orange to the thigh".

**2** **Position Orange Tip.** Hold the EpiPen® at a distance of approximately 10cm away from the outer thigh. The orange tip should point towards the outer thigh.

**3** **Jab Orange Tip.** Jab the EpiPen® firmly into outer thigh at a right angle (90° angle). Hold firmly against thigh for 3 seconds. EpiPen® should be removed and safely discarded. The orange needle cover will extend to cover the needle.

**4** **Dial 999.** Dial 999, ask for ambulance and state "anaphylaxis".

Each **EpiPen®** can only be used once. If symptoms don't improve, you can administer a second **EpiPen®** after 5-15 minutes.

**“You Must call 999, ask for an ambulance and state ‘anaphylaxis’.”**





**CONSENT FORM FOR THE USE OF AN EMERGENCY EPI-PEN**

1. I can confirm that my child has been diagnosed with a severe allergy and has been prescribed an epi-pen.
2. My child has two epi-pens clearly labelled with their name, which they keep in school.
3. In the event of my child displaying symptoms of an allergic reaction, and if their epi-pen is not available or is unusable, I consent for my child to receive the school's emergency epi-pen held by the school for such emergencies.

Signed:..... Date: .....

Name (print).....

Child's name: .....

Class:.....

Parent's address and contact details:

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

Telephone: .....

If your child requires their or the emergency epi-pen at school we will notify you immediately and phone 999