

Categorising

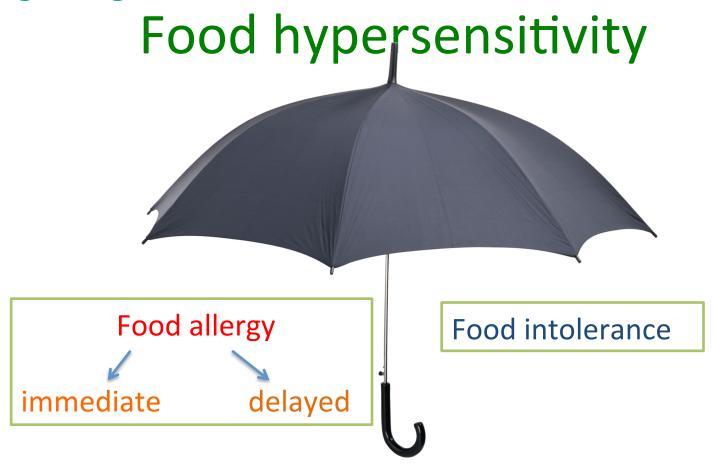
Recognising

Managing

Parental preference True allergy Mild Moderate Severe

Food allergens Non food items Food Allergy Food Intolerance Policies Procedures Education Training

## **Categorising risk**



## **Categorising risk**

# Food Allergy

 Can be life threatening

# Food Intolerance

- Not life threatening
- symptoms may cause symptoms with discomfort.

## **Categorising risk**

# Mild allergic reaction

# Severe allergic reaction

### MILD REACTION

Swelling of lips, face, eyes Hives, itchy skin, rash Tingling of mouth, abdominal pain, vomiting, nausea

### PLAN

Give antihistamine Stay with child Monitor carefully for any signs of deterioration/severe reaction Contact family

## SEVERE LIFE THREATENING REACTION

### Think ABCDE!

#### A. AIRWAY OBSTRUCTED

hoarseness/wheezing/swollen tongue/itching or swelling in throat

And/or.

#### B. BREATHING DIFFICULTY

breathlessness/noisy breathing/unable to communicate verbally And/or.

#### C. CIRCULATION IMPAIRED

pale/clammy skin/rapid/weak pulse/blue around mouth/feeling faint And/or.

#### D. DISABILITY

confusion/agitation/altered consciousness And/or.

### E. EXPOSURE

hives/swelling of lips, eyes, throat/generalised rash

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# Two very important questions

What could happen?

What could cause it to happen?

# Recognising risk 4 questions

- What type of food hypersensitivity?
- Where diagnosed?
  - Medical, Complementary & Alternative health,
     Parental concern
- What allergens are involved? Food or non food.
- Does the child have any other allergy: asthma or eczema?

# **Managing Risk**

What you should capture on your admission form.

Adapt according to local policy and review in a defined time

Guideline basic information required for each child with a food sensitivity
Diagnosing health care professional details:
Diagnosis food allergy or food intolerance:
Food(s) implicated:
Total exclusion required or can have small amount/cooked amount of
Any non food allergy triggers e.g. asthma/heat/dust/scratchy fabric
At risk of severe allergic reaction (anaphylaxis): yes/no/other?
Emergency allergic reaction management <u>plan</u> required/provided by parent?
Medication prescribed?



Lactose intolerance is not a food allergy.

Lactose intolerance will usually resolve in 2-4 weeks.

Special diet/formula might be needed but only temporarily.

### Eczema





Strawberry, citrus, tomato

# What does the start of an allergic reaction look like?









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# What do these children have in common?



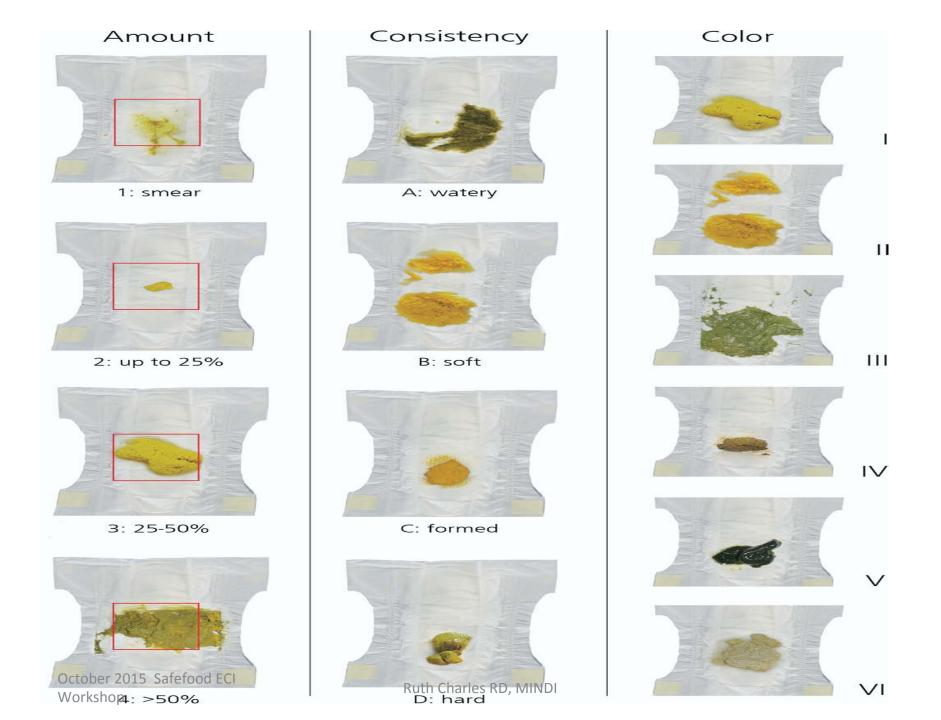






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# How can it develop





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Airway

**Hoarse Cry** 

Cough

Wheeze

Circulation

Butterflies

Pale

Dizzy

"Impending doom"

BARRELAND CARPAIGN



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# Substances or products causing allergies or intolerances (Annex II of regulation (eU) no 1169/2011)

- Milk
- Egg
- Gluten
- Soy
- Peanut
- Lupin
- Tree nut

- Sesame seed
- Crustaceans
- Fish
- Molluscs
- Celery
- Mustard
- Sulphur dioxide

# **Managing risk**

# Practical reality

- You already have policies and procedures in place to help minimise risk e.g.
  - Handwashing
  - Spillages
  - Healthy eating
  - Storage and administration of Medicines

# Managing risk Practical reality

- Food "Ban"
  - needs to be policed/enforced
  - might make for more complacency?
  - Where do you draw the line-Nut? Milk? Wheat?

Would a "no food sharing" policy be more practical (including an individual place mat, coloured plate and spoon etc)?

# Managing risk

		PRE- MEAL HAZAR	D CHECK LIST *YOU MUST C	OMPLETE THIS EACH TIME YOU	J SERVE ANY FOOD	
Meal	Time	Have you read Special Diet/Allergies/ Medical Conditions in "Day Folder" for this room before completing this form?	Name of child/children with Special dietary /Allergic or Medical Condition present in the room for this meal? (write full name of child)	Have you checked each child's food is correct with their Special diet/Allergies or Medical Condition? (please tick yes when done)	Have you taken steps to ensure the child does not eat other food during the meal?  (please tick yes when done)	*Please Print your name after each section!
Breakfast		1. Yes  2. Yes  3. Yes  4. Yes  5. Yes	1	2. Yes □ 3. Yes □	1. Yes  2. Yes  3. Yes  4. Yes  5. Yes	
AM Snack		1. Yes □ 2. Yes □	1 2 3.	1. Yes □ 2. Yes □	1. Yes □ 2. Yes □	
Dinner		1. Yes □ 2. Yes □ 3. Yes □	1 2 3	1. Yes □ 2. Yes □ 3. Yes □	1. Yes □ 2. Yes □ 3. Yes □	
PM Snack		1. Yes □ 2. Yes □ 3. Yes □	1 2 3	1. Yes  2. Yes  3. Yes	1. Yes □ 2. Yes □ 3. Yes □	

# **Managing Risk**

# Developing a policy

## Role of the parent:

- 1. Inform school of diagnosis and any update.
- 2. Provide and update an allergy management plan
- Provide and ensure in date relevant medication.
- Instruct on the indications for and use of medication.

### Role of EC:

- 1. Manager is responsible for policy and planning for children with allergy.
- 2. Seek allergy training for staff.
- 3. There should be a mechanism by which temporary or new staff can identify the allergic child.
- 5 Identify food and non food allergens and high risk scenarios
- 6. Have a child specific written allergy management plan.
- 7. Ensure that emergency and relieving medication is stored appropriately and always available.
- 8. Ensure prevention and treatment continues on school trips/holidays.
- 9. Aim to maintain healthy indoor and outdoor air quality.

# **Managing Risk**

### Adapt for your environment. Date it. Review it.

#### SAMPLE FOOD SENSITIVITY POLICY for CHILDREN WITH FOOD ALLERGY & INTOLERANCE

Statement of Intent

XXXX provides a supportive environment that is inclusive and favourable to children who have food sensitivities.

XXXX are compliant with Food Information for Consumers (FIC) Regulation (EU) No 1169/2011 and S.I. No. 489 of 2014) in which we control allergens in the foods we provide. Since December 13th 2014 we provide information to parents on the allergen status of the main meal dishes we offer.

Procedure for parents who will

On application for admission inform staff of their child's food sensitivity and provide relevant information in the relevant section of the application form.

Be responsible at all times for informing staff of any change in their child's food sensitivity and health needs.

Provide confirmation in writing of the food sensitivity by a qualified health care professional in order that XXXX can undertake a risk assessment specific to the needs of the food sensitive child.

Attend and meet with staff to develop a written management plan to meet the child's specific needs.

Provide any medication that is indicated and be responsible for ensuring it in date.

With staff, review their child's plan at least once a year.

Maintain open communication with staff.

Procedure for staff who will

Maintain open communication with parents

Undertake a risk assessment specific to the needs of the od sensitive child in conjunction with parents.

Comply with legislative requirements in declaring food allergens in the food we provide.

Store and serve food in compliance with existing food and nutrition policy.

Ensure that staff are fully informed about food sensitivity, allergy triggers and the associated risks.

Minimize risk of exposure to food allergens by:

- -reinforcing hand washing before and after eating, ensure that spillages are swiftly dealt with and that all surfaces and floors are checked and cleared of food waste in accordance with existing hygiene policy.
- -reviewing group activities, supplies and materials to ensure they are allergen free for example home made "play dough", cooking and baking ingredients, nature tables, bird feed, skin cream.
- -discouraging all children from sharing or trading food.
- -providing children with their own individual place mat for meal times.
- -completing a pre meal check before all eating episodes.

Store and administer medication in accordance with existing medication policy.

## Managing risk

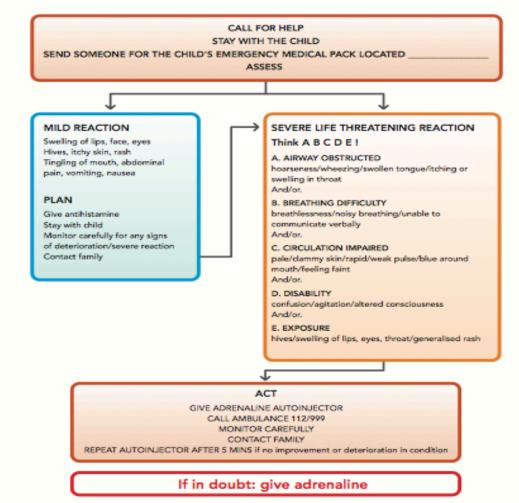
Visit ifan.ie to print more of these plans





## Managing an Allergic Reaction

Because allergy matters visit www.ifan.ie



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# High risk scenarios







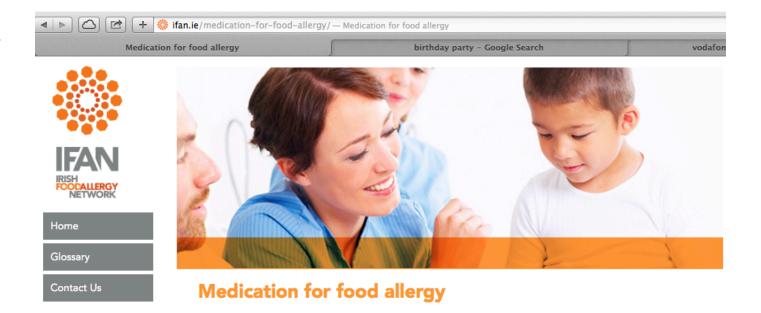




Workshop

## Managing risk





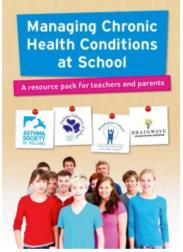
### Visit this page at ifan.ie to view training videos





# Allergy training resources







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# Resources

Allergy

### POSITION PAPER

## The management of the allergic child at school: EAACI/ GA<sup>2</sup>LEN Task Force on the allergic child at school

A. Muraro<sup>1</sup>, A. Clark<sup>2</sup>, K. Beyer<sup>3</sup>, L. M. Borrego<sup>4</sup>, M. Borres<sup>5</sup>, K. C. Lødrup Carlsen<sup>6</sup>, P. Carrer<sup>7</sup>, A. Mazon<sup>8</sup>, F. Rancè<sup>9</sup>, E. Valovirta<sup>10</sup>, M. Wickman<sup>11</sup> & M. Zanchetti<sup>12</sup>

http://www.eaaci.org/images/files/Pdf\_MsWord/2010/Position\_Papers/the\_management\_of\_the\_allergic\_child\_at\_school.pdf