

Anaphylaxis Risk Assessment

Risk Assessment				
Scope	First Aid management of Anaphylaxis on Imperial College premises			
Persons to whom this applies:	Employees	Students	Visitors	Residential guests
Hazard	Allergen exposure - food, laboratory animals, latex, stinging insects, other environmental allergens			
Mode of exposure	Ingestion		Direct contact	Indirect contact
Location	Catering facilities		College departments	Student accommodation
Likelihood	Medium			
Severity	High			
Mitigation	<p>Individual Risk assessment</p> <p>Staff who develop symptoms of work-related allergy or have confirmed work related allergies can be referred to Occupational Health for advice.</p> <p>Individual Risk Assessment and Awareness training is recommended. However many people do not make a declaration.</p> <p>Arrangements for students disclosing Anaphylaxis are managed by their department. Storage of Adrenaline Auto Injectors (AAIs) is discouraged as it requires a high level of local oversight, and the AAI might not be accessible if kept in a locked cabinet or the student is in a different location to their AAI.</p> <p>When staff join Imperial College London, they are encouraged to advise First Aiders in their department (the Day One Induction checklist flags this) if they have a condition which may require emergency assistance. They should complete the Adult Allergy Action Plan ¹and download the Safezone App and Security telephone number to their mobile phone.</p> <p>School age children attending Outreach events /activities are requested to notify the Outreach team if any allergies exist.</p> <p>People may be unaware that they are allergic to a substance or food.</p> <p>Food: it is a legal requirement for UK food businesses to provide information about 14 major allergens when they are used as ingredients in the food and drink, they provide. The way the information is communicated to the customer depends on what kind of business they are (e.g. retail or catering), and how the food is presented. The rules differ depending on whether the food they sell is:</p> <ul style="list-style-type: none"> • Prepacked (for example, labelled food sold at retail) • Prepacked for direct sale (for example, sandwiches prepared and wrapped on-site before the customer has selected/ordered) • Non-prepacked/loose food (for example food sold in restaurants and takeaways, or packed at the customer's request, such as at in-store bakery and delicatessen counters) 			

¹ Appendix 1 (available as an editable document on the First Aid web page)

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	<p>Food Allergy is included in the Hazard Analysis and Critical Control Point (HACCP) assessments for all catering operations.</p> <p>All catering staff (including agency) are required to complete the Food Standards Agency online Allergy Awareness training prior to commencement. Mandatory training will be completed within the first 3 months of starting in the role. Refresher training is in place and is conducted every three years. Line Managers are responsible for ensuring training takes place. There is a role specific training program for all catering staff. The Campus Services Health & Safety Compliance Manager oversees arrangements and follows up on incidents arising from all reports of catering and contract catering.</p> <p>In student accommodation students store and prepare food in communal kitchens takeaway food is also consumed in this environment.</p> <p>Rodents: Work involving exposure to Laboratory Animals is risk assessed and controls are implemented to limit exposure to aeroallergens. Individuals who work with laboratory animals are enrolled on the LAA Health Surveillance program. Individuals who are known to have symptomatic sensitisation to a particular species are restricted from working with this species and are monitored on a six-monthly basis. People who develop asymptomatic sensitisation are monitored on a six-monthly basis.</p> <p>Biting/ stinging Insects: Insect work risk assessments are undertaken to control the release of biting insects and to train individuals who work on insect projects on risk mitigation. Individuals with existing allergy to these species can be referred to Occupational Health.</p> <p>Latex: Latex gloves are not routinely used in laboratory or workshop environments. A risk assessment must be undertaken if latex is considered the most appropriate glove material for a particular material/ process.</p> <p>People may develop allergies or contact dermatitis to other materials if any such issue arise they must be referred to Occupational Health assessment and advice on management.</p> <p>Individuals may experience a first episode of Anaphylaxis if exposed to a substance material which they have been asymptotically sensitised to – they may not know what the allergen is without medical investigation and need to be referred for specialist assessment following an incident.</p>
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Training		
Position	Training	Within
First Aiders	Management of Anaphylaxis is incorporated into the First Aid training syllabus for both FAW(Q) and Emergency FAW courses.	
Catering staff	There is an incremental requirement, dependant on roles and responsibilities	
All Staff, including Agency	Essential Food Hygiene FSA Allergen Training https://allergytraining.food.gov.uk/	Before Commencing work

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Team Leaders, Porters, Catering Assistants		Level 2 Award in Food Safety in Catering	Within 3 Months			
Sous Chefs, Head Chefs Supervisors and Managers		Level 3 Award in Food Safety in Catering	Within 6 months			
Executive Chef		Level 4 Award in Food Safety in Catering	Within 6 months			
Those responsible for the development and maintenance of the food safety management system		Level 3 HACCP Training	Within 6 months			
Researchers	Individuals are alerted to the risk of Lab Animal Allergy at the CBS induction training and again at the OH Health Surveillance enrolment consultation.					
First Aid Management of Anaphylaxis						
First Aid assessment	<ul style="list-style-type: none"> • Danger • Response • Airway • Breathing • Circulation • Symptom check 					
Treatment	If there are signs of Anaphylaxis assist the person to the floor, elevate legs, assist them to administer their Adrenaline Auto Injector if available.					
Transfer	Request Community Safety call an ambulance, all cases of anaphylaxis must be transferred to A+E via an ambulance					
Record Keeping and Incident reporting	All instances of suspected anaphylaxis whether work related or not must be recorded on Corestream - https://imperial.corestream.co.uk/home Incidents managed by Community Safety colleagues are also included in the daily Community Safety Report.					
Incident investigation	All incidents must be reviewed to identify root cause and review mitigations as appropriate					
First Aid Training						
First Aid at Work (Qual),	Security Officers, Departmental First Aiders					
Emergency First Aid at Work	Departmental First Aiders					
Training Records						
First Aid at Work Training records are maintained on the POD Learning Management System						

University Stakeholders	
Occupational Health	Safety Department
Community Safety	Catering Services
People and Organisational Development, Safety training team	Property Services
First Aiders	Outreach

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Appendix 1 (available as an editable document on the First Aid web page)

Adult Allergy Action Plan



Name:	Mild to Moderate Symptoms
Date of birth:	<ul style="list-style-type: none">nettle rash (known as hives or urticaria) anywhere on the bodya tingling or itchy feeling in the mouthswelling of lips, face or eyesstomach pain or vomiting.
Emergency contact:	ACTION:
Allergic to:	<ul style="list-style-type: none">stay where you are and call for help if necessarylocate adrenaline auto-injectorstake antihistaminewatch for any of the ABC symptoms below.

Watch for signs of **ANAPHYLAXIS** (life-threatening allergic reaction). Anaphylaxis may occur without skin symptoms. Always consider anaphylaxis in someone who has a known allergy and has **SUDDEN BREATHING DIFFICULTY**.

Airways swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).	Breathing <ul style="list-style-type: none">sudden onset wheezingbreathing difficultynoisy breathing.	Circulation <ul style="list-style-type: none">dizzinessfeeling faintsudden sleepinesstirednessconfusionpale clammy skinloss of consciousness.
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If ANY ONE (or more) of these signs are present:

1. Lie flat with legs raised (if breathing is difficult, can sit up).
2. Administer an adrenaline auto-injector **without delay** (e.g. EpiPen, Jext, Emerade).
3. **On Campus** Contact Imperial Security **444** or **02075891000** or from the **Safe Zone App** on your phone.
Off Campus Dial **999** for an ambulance and say "**ANAPHYLAXIS (ANA-FIL-AXIS)**".

IF IN DOUBT, give adrenaline
After giving adrenaline:

1. Stay where you are until ambulance arrives, **do NOT stand up**.
2. Phone emergency contact.
3. **If no improvement after 5 minutes, a second adrenaline auto-injector should be used.**
4. Commence CPR if there are no signs of life.

There are three different brands of adrenaline auto-injectors in the UK



How to administer each device varies by brand, please follow the instructions on the device

Anaphylaxis UK, a charity registered in England and Wales (1085527) and a registered company limited by guarantee in England and Wales (04133242). Registered office address: 1 Alexandra Road, Farnborough, Hampshire, GU14 6BU. www.anaphylaxis.org.uk

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