

## **SUPPLY OF SPARE ADRENALINE AUTO-INJECTORS (AAIs) IN SCHOOLS**

From 1st October 2017, the [Human Medicines \(Amendment\) Regulations 2017](#) allowed schools in the UK to buy adrenaline auto-injector devices (AAIs) without a prescription to use in an emergency on children who are at risk of a severe allergic reaction (anaphylaxis) but whose own device is not available or not working. This could be because their AAIs are broken, or out-of-date, for example.

### **Who does the change in legislation apply to?**

- local authority maintained nurseries,
- primary, secondary and special schools, academies, pupil referral units and independent schools in England, Scotland and Wales.
- Northern Ireland: grant aided and independent schools as defined in the Education and Libraries (NI) Order 1986.

The Department of Health has released non-statutory guidance called '[Guidance on the use of adrenaline auto-injectors in schools](#)' which explains good practice which schools in England should observe when using spare AAIs and can use to develop their own protocol or policies.

Any policies developed in reference to '[Guidance on the use of adrenaline auto-injectors in schools](#)' must also be in line with statutory guidance which sets out what schools and local authorities must do to comply with the law.

### **Who can the AAI(s) be administered to?**

- pupils known to be at risk of anaphylaxis and for whom both medical authorisation and written parental consent for use of the spare AAI has been provided.
- pupils whose own prescribed AAI cannot be administered correctly without delay.
- "If a child is having anaphylaxis but does not have a management plan with medical authorisation and parental consent, schools should immediately call 999 and seek advice. If spare AAIs are available, mention this to the call handler/emergency medical dispatcher, as they can authorise use of the spare AAI if appropriate"

In line with good clinical practice all pupils who are prescribed an AAI should have an appropriate management plan. The pupil's allergy management plan should incorporate both medical authorisation and parental consent for the use of the school's spare AAIs and a copy should be shared with the pupil's school. Templates available here [www.sparepensinschools.uk](http://www.sparepensinschools.uk).

### **What needs to be updated in schools medicines policy?**

Those facilities choosing to hold spare AAIs, should establish a policy or protocol for their use in line with '[Supporting pupils at school with medical conditions](#)':

This protocol could be incorporated into the wider medical conditions policy required by the Supporting Pupils document. An effective protocol should include the following:

- arrangements for the supply, storage, care, and disposal of spare AAIs
- a register of pupils who have been prescribed an AAI (or where a doctor has provided a written plan recommending AAIs to be used in the event of anaphylaxis).
- written consent from the pupil's parent/legal guardian for use of the spare AAIs, as part of a pupil's individual healthcare plan.
- provision of any spare AAIs is used only in pupils where both medical authorisation and written parental consent has been provided.
- appropriate support and training for staff in the use of an AAI in line with the schools wider policy on supporting pupils with medical conditions.
- keeping a record of use of any AAIs, be it the school's spare or the pupils own and informing parents/carers.

**Does the legislation change mean pupils don't have to bring their own AAI(s) to school? Answer NO!**

- Children at risk of anaphylaxis should continue to get their prescribed AAIs supply from their GP for use in an emergency, as normal.
- The MHRA recommends that those prescribed AAIs should carry TWO devices at all times, as some people can require more than one dose of adrenaline and the AAI device can be used wrongly, occasionally misfire or a second injection is needed before emergency help arrives.
- Depending on their level of understanding and competence, children and particularly teenagers should carry their AAIs on their person at all times or they should be quickly and easily accessible at all times.
- If the AAIs are not carried by the pupil, then they should be kept in a central place in a box marked clearly with the pupil's name but **NOT** locked in a cupboard or an office where access is restricted.

**Who can administer the AAI(s)?**

**Any member of staff may volunteer to take on this role. Schools should ensure multiple members of staff have appropriate training and support, relevant to their level of responsibility.**

The [Department of Health](#) has indicated it would be reasonable for **ALL** staff to:

- be trained to recognise the range of signs and symptoms of anaphylaxis
- understand the rapidity with which anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis may occur with prior mild (e.g. skin) symptoms
- appreciate the need to administer adrenaline without delay as soon as anaphylaxis occurs, before the patient might reach a state of collapse (after which it may be too late for the adrenaline to be effective)
- be aware of the anaphylaxis policy
- be aware of how to check if a pupil is on the register of pupils at risk of anaphylaxis
- be aware of how to access the stored AAI
- be aware of who the trained designated members of staff are, and the policy on how to access their help

Schools must arrange specialist anaphylaxis training for staff where a pupil in the school has been diagnosed as being at risk of anaphylaxis. The specialist training should include practical instruction on how to use the different AAI devices available. Online resources and introductory e-learning modules can be found at <http://www.sparepensinschools.uk>, although this is **NOT** a substitute for face-to-face training.

**Strength of AAI(s) recommended by the Resuscitation Council (UK)**

Schools should be aware of the different strengths and brands of AAIs that are available. The strength required will depend on the patient's age and bodyweight.

For children age under 6 years:	For children age 6-12 years:	For teenagers age 12+ years:
<ul style="list-style-type: none"> <li>• EpiPen® Junior 150 microgram</li> <li>• Emerade® 150 microgram</li> <li>• Jext® 150 microgram</li> </ul>	<ul style="list-style-type: none"> <li>• EpiPen® 300 microgram</li> <li>• Emerade® 300 microgram</li> <li>• Jext® 300 microgram</li> </ul>	<ul style="list-style-type: none"> <li>• EpiPen® 300 microgram</li> <li>• Emerade® 300 microgram</li> <li>• Emerade® 500 microgram</li> <li>• Jext® 300 microgram</li> </ul>

[Department of Health guidance](#) advises:

*“Where all pupils are prescribed the same device, the school should obtain the same brand for the spare AAI. If two or more brands are currently held by the school, the school may wish to purchase the brand most commonly prescribed to its pupils.”*

The injection site for all three injectors is into the muscle in the front quarter of the outer thigh. However, there is some variation in operating each AAI and training on each device should be given to all school staff who might be required to administer adrenaline in an emergency. See links for training videos for [Emerade®](#), [EpiPen®](#) and [Jext®](#).

There is online anaphylaxis awareness training through a FREE [AllergyWise for Schools](#) course and a “train the trainer” [AllergyWise for Healthcare Professionals](#) course.

### **How much will the AAI(s) cost the school?**

AAIs are not free of charge to schools. The schools can buy them from a Community pharmacy as a retail item with a possible handling charge, **costing around £45 per pen.**

Haringey Clinical Commissioning Group (CCG) Medicines Management team (MMT) did not want cost to be the constraint for schools not possessing "spare pens".

**Haringey CCG MMT will provide the schools in Haringey with the Emerade® brand of AAIs free of charge to facilitate the roll out of spare pens in schools. These will be replaced annually or when they expire.**

### **How schools can purchase AAI(s) (just for information)**

If the school had to purchase AAIs, they would have to do so from a local community pharmacy. The order would be on appropriately headed paper (if possible) and must be signed by the principal or head teacher at the school concerned and state the following:

- the name of the school
- the purpose or why the AAIs is/are required
- the total number of AAIs required

A suggested letter template can be found here [www.sparepensinschools.uk](http://www.sparepensinschools.uk).

**Please note** : In Haringey the school will be supplied the pens free of charge.

### **How many AAIs can a school obtain?**

Schools will be able to purchase AAIs from a pharmacy in small quantities provided this takes place on an occasional basis and is not for profit.

**Haringey CCG Medicines management team has agreed to purchase and provide schools in Haringey with the spare AAI's.**

The AAIs available in the UK at present are Emerade®, EpiPen® and Jext®. The decision as to how many AAIs and what brands to purchase will depend on the individual circumstances within each school.

**In North Central London, the Joint Formulary group, choice of adrenaline auto-injector (AAI) is Emerade®. This will be the brand supplied to the schools in Haringey.**

### **Where should the spare AAI(s) be stored?**

Schools should ensure that all AAI devices - including those belonging to a younger child, and any spare AAIs in the Emergency kit - are kept in a safe and suitably central location, for example the school office or staffroom to which all staff have access at all times, but in which the AAI is out of the reach and sight of children.

**They must not, be locked away in a cupboard or an office where access is restricted. AAIs must be accessible and available for use at all times, and not located more than 5 minutes away from where they may be needed.** In larger schools, it may be prudent to locate a kit near the central dining area and another near the playground as more than one kit may be needed.

### **How should a school dispose of AAI(s)?**

Once an AAI has been used it cannot be reused.

- Used AAIs can be given to the ambulance paramedics on arrival or
- can be disposed of in a pre-ordered sharps bin for collection by the local council.

### **What should happen when a pupil who is at risk of anaphylaxis goes on a school trip or attends a different school to take part in a sporting activity?**

Schools should conduct a risk-assessment for any pupil at risk of anaphylaxis taking part in a school trip off school premises, in much the same way as they already do so with regards to safe-guarding. Pupils at risk of anaphylaxis should have their AAIs with them, and there should be staff trained to administer AAIs in an emergency. Schools may wish to consider whether it may be appropriate, under some circumstances, to take spare AAIs obtained for emergency use on some trips.

## **Reference sources**

1. Department of Health (2017). [Guidance on the use of adrenaline auto-injectors in schools.](#)
2. Department for Education (2014). [Supporting pupils at school with medical conditions](#)
3. British Society for Allergy & Clinical Immunology (Paediatric Allergy Group)
4. British Paediatric Allergy, Immunity and Infection Group
5. Royal College of Paediatrics and Child Health
6. Allergy UK
7. Anaphylaxis Campaign FAQs
8. The Spare pens in schools <https://www.sparepensinschools.uk/>
9. The electronic Medicines Compendium (eMC). Summary of Product Characteristics and Patient Information Leaflets for each AAI.