

## Allergy and Anaphylaxis Policy

### Policy Review and Approval

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|------------------|------------------------|
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|                 |               |
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*A copy of this policy and other related policies can be obtained from the School Office.*

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## 1. Aims

This policy outlines the school's approach to allergy management, including how the whole school community works to reduce the risk of an allergic reaction happening and the procedures in place to respond if one does. It also sets out how we support our students with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy aware school.

## 2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s guidance on [allergies in schools](#) and [supporting students with medical conditions at school](#), the Department of Health and Social Care's guidance on [using emergency adrenaline auto-injectors in schools](#), and the following legislation:

- [The Food Information Regulations 2014](#)
- [The Food Information \(Amendment\) \(England\) Regulations 2019](#)

## 3. Roles and responsibilities

We take a whole-school approach to allergy awareness.

### 3.1 Allergy Lead

The nominated Allergy Lead is the Deputy Head - Behaviour, Attitudes, and Safeguarding (DSL).

The Allergy Lead is responsible for:

- Promoting and maintaining allergy awareness across our school community.
- Ensuring that allergy and special dietary information is recorded and collated for all relevant students (the information collection is delegated to the Lead First Aider).
- Ensuring:
  - All allergy information is up-to-date and readily available to relevant members of staff.
  - All students with allergies have an allergy action plan completed by a medical professional.
  - All staff receive an appropriate level of allergy training.
  - All staff are aware of the school's policy and procedures regarding allergies.
- Relevant staff are aware of what activities need an allergy risk assessment.
- Regularly reviewing and updating this policy.

### 3.2 Lead First Aider

The school's Lead First Aider is responsible for:

- Co-ordinating the paperwork and information with families.
- Co-ordinating medication with families including monitoring of expiration dates.
- Checking spare adrenaline auto-injectors (AAls) are in date.
- Ensuring spare AAls are ordered.
- Keeping stock of the school's AAls.
- Any other appropriate tasks delegated by the Allergy Lead.
- Ensuring all staff are provided with information on students with allergies at the beginning of every half term, and as new information arises.

### 3.3 All Staff

All staff are responsible for:

- Promoting and maintaining allergy awareness among students.
- Maintaining awareness of this policy.

- Being able to recognise the signs of severe allergic reactions and anaphylaxis.
- Attending appropriate allergy training as required.
- Being aware of specific students in their care with allergies.
- Carefully considering the use of food or other potential allergens in lessons and activity planning.
- Ensuring the wellbeing and inclusion of students with allergies.

### 3.4 Parents/carers

Parents/carers are responsible for:

- Being aware of this policy.
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis.
- If required, providing their child with two in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner.
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included.
- Refraining from telling the school that their child has an allergy or intolerance if this is a preference or dietary choice.
- Following the school's guidance on food brought in to be shared.
- Updating the school on any changes to their child's condition.
- Encouraging their child to be allergy aware.

### 3.5 Parents/carers of children with allergies

In addition to point 3.4, the parents/carers of children with allergies should:

- Provide the school with appropriate medical evidence of the allergy, such as a doctor's note or allergy testing results.
- Work with the school to fill out an Individual Healthcare Plan, and be responsible for reviewing this annually, or sooner as necessary.
- Provide the school with an accompanying Allergy Action Plan.
- If applicable, provide the school or their child with two labelled adrenaline auto-injectors and any other medication, for example antihistamine (with a dispenser, i.e. spoon or syringe), inhalers or creams.
- Ensure medication is in-date and replaced at the appropriate time.
- Update school with any changes to their child's condition and ensure the relevant paperwork is also updated.
- Provide the school with an up-to-date photograph of their child and sign the associated permission for it to be shared appropriately as part of their allergy management.
- Support their child to understand their allergy diagnosis and advocate for themselves to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food they are allergic to.

### 3.6 All students

All students are responsible for:

- Being allergy aware.
- Understanding the risks allergens might pose to their peers.
- Learning how they can support their peers and be alert to allergy-related bullying.
- Learning how to recognise and respond to an allergic reaction and to support their peers and staff in case of an emergency. (Older students).
- Adhering to food restrictions or guidance when bringing food in from outside school.

### 3.7 Students with allergies

In addition to point 3.6, students with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk (this will depend on age and may not be appropriate with very young children).
- Avoiding their allergen as best as they can.
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction.
- If age-appropriate, carrying two adrenaline auto-injectors with them at all times. They must only use them for their intended purpose.
- Understanding how and when to use their adrenaline auto-injector.
- Talking to the designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy.
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies.

### 4. Assessing risk

The school will conduct a risk assessment for any student with an allergy taking part in:

- Lessons such as food technology.
- Science experiments involving foods.
- Crafts using food packaging.
- Off-site events and school trips.
- Any other activities involving animals or food, such as animal handling experiences or baking.
- Activities or clubs where they might hand out snacks or food “treats”.
- Special events, such as cultural days and celebrations.

A risk assessment for any student at risk of an allergic reaction will also be carried out where a visitor requires a guide dog, or for approved visits of animals to school.

### 5. Managing risk

#### 5.1 Hygiene procedures

- Students are reminded to wash their hands before and after eating.
- Students have their own named water bottles.

#### 5.2 Catering

The school is committed to working with its external caterers to provide safe food options to meet the dietary needs of students with allergies.

- Catering staff receive appropriate training.
- Catering staff can identify students with allergies in the Primary phase using the coloured lanyards which identify the allergy they have.
- Secondary phase students have access to direct food labelling showing the ingredients used and seek the assistance of the catering staff if they are unsure or need to know the ingredients of any non-packaged food.
- Parents/carers discuss meals changes required as appropriate to their child’s allergies direct with the catering provider.
- School menus are available for parents/carers to view, with ingredients clearly labelled.
- Where changes are made to school menus, the school will make sure these continue to meet any special dietary needs of students.
- Food allergen information relating to the ‘top 14’ allergens is displayed on the packaging of all food products, allowing students and staff to make safer choices.

- Allergen information labelling will follow all [legal requirements](#) that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA).
- The allergy awareness documentation for the catering provider is available to view on the school website.
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination.

### 5.3 Food restrictions

The school acknowledges that it is impractical to enforce an allergen-free school. However, we would like to encourage students and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction. These foods include:

- Packaged nuts.
- Cereal, granola or chocolate bars containing nuts.
- Peanut butter or chocolate spreads containing nuts.
- Peanut-based sauces, such as satay.
- Sesame seeds and foods containing sesame seeds.

If a student brings these foods into school, these may be confiscated/disposed of.

### 5.4 Insect bites/stings

Students with a known insect venom allergy should:

- Avoid walking around in bare feet or sandals when outside and when possible, keep arms and legs covered.
- Avoid wearing strong perfumes or cosmetics.
- Keep food and drink covered.

### 5.5 Animals

It is normally the dander that causes a person with an animal allergy to react. Precautions to limit the risk of an allergic reaction include:

- A student with a known animal allergy should avoid the animal they are allergic to.
- If an animal comes onto the school site, a risk assessment will be done prior to the visit.
- Areas visited by animals will be cleaned thoroughly.
- Anyone in contact with an animal will wash their hands after contact.
- School trips that include visits to animals will be carefully risk assessed.

### 5.6 Allergic Rhinitis and hay fever

Parents/carers will be expected to administer a dose of antihistamine to their child before school for the treatment of hay fever. The school will only administer antihistamine for symptoms of allergic reaction and not as a precautionary measure. If symptoms such as running eyes persist throughout the school day, students can attend the Medical Room for an eye wash to be administered.

### 5.7 Inclusion and mental health

Allergies can have a significant impact on mental health and wellbeing. Students may experience anxiety and depression and are more susceptible to bullying. Students with allergies will have additional support through:

- Pastoral care.
- Regular check-ins with their Class Teacher/Form Tutor.

## 5.8 Events and school trips

For events, including ones that take place outside of the school, and for school trips, no students with allergies will be excluded from taking part.

The school will plan accordingly for all events and school trips and arrange for the staff members involved to be aware of students' allergies and to have received adequate training.

Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips.

## 6. Procedures for handling an allergic reaction

### 6.1 Register of students with AAls

The school maintains a register of students who have been prescribed AAls or where a doctor has provided a written plan recommending AAls to be used in the event of anaphylaxis. The register includes:

- Known allergens and risk factors for anaphylaxis.
- Whether a student has been prescribed AAI(s) and if so, what type and dose.
- Where a student has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the student.
- A photograph of each student to allow a visual check to be made.

The register is kept in an easily accessible location, in the All Staff Team, and can be checked quickly by any member of staff as part of initiating an emergency response.

The school allows all students to keep their AAls with them to reduce delays and allow for confirmation of consent without the need to check the register.

### 6.2 Allergic reaction procedures

As part of the whole-school awareness approach to allergies, all staff are trained in the school's allergic reaction procedure, and to recognise the signs of anaphylaxis and respond appropriately.

- This will be administered by the student themselves, if age appropriate, or by a member of staff. Ideally the member of staff will be trained, but in an emergency, anyone will administer adrenaline.
- If a student has an allergic reaction, the staff member will initiate the school's emergency response plan, following the student's IHCP.
- If an AAI needs to be administered, a member of staff will use the student's own AAI, or if it is not available, the spare school AAI.
- If anaphylaxis is suspected but the student does not have a prescribed adrenaline pen or Allergy Action Plan, a member of staff will ensure they are lying down with their legs raised, call 999, and explain anaphylaxis is suspected. They will inform the operator that spare adrenaline pens are available and follow all instructions from the operator.
- Under Regulation 238, the Medicines and Healthcare products Regulatory Agency (MHRA) confirms that, in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life.
- The student will not be moved until a medical professional/paramedic has arrived, even if they are feeling better.
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff will accompany the student in an ambulance and stay until a parent/carer arrives.
- A school AAI device will be used instead of the student's own AAI device if:
  - Medical authorisation and written parental consent have been provided, or

- The student's own prescribed AAI(s) are not immediately available, for example, because they are broken, out-of-date, have misfired or been wrongly administered.
- If a student needs to be taken to hospital, staff will stay with the student until the parent/carer arrives or accompany the student to hospital by ambulance.
- If the allergic reaction is mild e.g. skin rash, itching or sneezing, the student will be monitored and the parents/carers informed.

## 7. Adrenaline auto-injectors (AAIs)

Following the Department of Health and Social Care's guidance on using [emergency adrenaline auto-injectors in schools](#), the school's procedures for AAIs cover the following areas:

### 7.1 Purchasing of spare AAIs

The Lead First Aider is responsible for buying AAIs and ensuring they are stored according to the guidance.

The AAIs will be sourced from either a local pharmacy or an online provider i.e. Eureka.

The Lead First Aider will ensure the correct quantity of AAIs are bought, and the correct brand is bought.

### 7.2 Storage (of both spare and prescribed AAIs)

The Lead First Aider will make sure all AAIs are:

- Stored at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extremes of temperature.
- Kept in a safe and suitably central location to which all staff have access at all times.
- **Not** locked away, but accessible and available for use at all times.
- **Not** located more than 5 minutes away from where they may be needed.

Spare AAIs will be kept separate from any student's own prescribed AAI, and clearly labelled to avoid confusion.

### 7.3 Maintenance (of spare AAIs)

The Lead First Aider and Allergy Lead are responsible for checking monthly that:

- The AAIs are present and in date.
- Replacement AAIs are obtained when the expiry date is near.

### 7.4 Disposal

AAIs can only be used once. Once an AAI has been used, it will be disposed of in line with the manufacturer's instructions.

### 7.5 Use of AAIs off school premises

Students at risk of anaphylaxis who are able to administer their own AAIs should carry their own AAI with them on school trips and off-site events. See Section 5.8 for further guidance.

### 7.6 Emergency anaphylaxis kit

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAIs.
- Instructions for the use of AAIs.
- Instructions on storage.
- Manufacturer's information.



- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded.
- A note of arrangements for replacing injectors.
- A list of students to whom the AAI can be administered.
- A record of when AAls have been administered.

## 8. Training

### 8.1 Staff training

The school is committed to training all staff in allergy response. This includes:

- How to reduce and prevent the risk of allergic reactions.
- How to spot the signs of allergic reactions (including anaphylaxis).
- The importance of acting quickly in the case of anaphylaxis.
- Where AAls are kept on the school site, and how to access them.
- How to administer AAls.
- The wellbeing and inclusion implications of allergies.

Training will be carried out annually by the allergy lead.

### 8.2 Anaphylaxis drills

The school will carry out an anaphylaxis drill annually. This includes an exercise simulating an event where a student or member of staff has an allergic reaction and testing the whole school response.

## 9. Links to other policies

This policy applies to all staff, students, parents and visitors to the school and should be read alongside these other policies:

- Supporting Students with Medical Conditions Policy
- Child Protection and Safeguarding Policy and Procedure
- Health and Safety Policy and Procedures
- EYFS and Primary Administration of Medication Policy