

Allergy and Anaphylaxis Policy

Contents

1. [The Policy](#)
2. [What is an allergy?](#)
3. [Definitions](#)
4. [Roles and responsibilities](#)
5. [Assessing risk](#)
6. [Catering in School](#)
7. [Setting specific procedures](#)
8. [School trips and sports fixtures](#)
9. [Insect stings](#)
10. [Animals](#)
11. [Allergic rhinitis / hay fever](#)
12. [Inclusion and mental health](#)
13. [Adrenaline Pens](#)
14. [Responding to an allergic reaction](#)
15. [Training](#)
16. [Asthma](#)
17. [Related policies](#)

[Annex 1: Responding to an allergic reaction / anaphylaxis](#)

[Annex 2: Nut Poster](#)

1. The Policy

- 1.1. This policy is applicable to The Stephen Perse Foundation (the **School**). It is applicable to the whole nursery, school and boarding community including the Early Years Foundation Stage (**EYFS**). This policy applies to all staff, students, parents and visitors to the School.
- 1.2. 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 whilst at the School or whilst attending any School-related activity.
- 1.3. Information about the School's policy and procedures for responding to an incident of anaphylaxis is contained in the School's First Aid Policy, Medicines Policy and Supporting Pupils with Medical Conditions Policy.
- 1.4. This policy 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. What is an allergy?

- 2.1. Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.
- 2.2. Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.
- 2.3. People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

3. Definitions

- **Anaphylaxis:** Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency. It can occur within minutes of exposure to an allergen.
- **Allergen:** A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

Most severe allergic reactions to food are caused by just 9 foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc), sesame, fish, shellfish, soya and wheat.

There are 14 allergens required by law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame.

- **Adrenaline auto-injector (AAI):** Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAIs, adrenaline pens or by the brand name EpiPen. There are three brands licensed for use in the UK: EpiPen, Jext Pen and Emerade. Emerade is

currently not available as it has been recalled due to misfiring incidents. For the purposes of this Policy we will refer to them as Adrenaline Pens.

- **Individual Healthcare Plan (IHCP):** A detailed document outlining an individual student's condition, history, treatment, risks and action plan. This document should be created by schools in collaboration with parents/carers and, where appropriate, students. All students with an allergy with Adrenaline Pen/medication will have an Individual Healthcare Plan. Any student with an allergy will be noted on the School's management information system which can be accessed by all staff.
- **Risk Assessment:** A detailed document outlining an activity, the risks it poses and any actions taken to mitigate those risks. Allergy information is included on risk assessments for events on and off the school site. Those students with allergies will also be individually noted on the trip medical risk assessment.
- **Spare Adrenaline Pens:** From 2017 schools have been able to purchase spare Adrenaline Pens. Each School site, including Latham Close, has a spare Adrenaline Pen, in case students' own Adrenaline Pens are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

4. Roles and responsibilities

The School takes a whole-school approach to allergy management.

4.1. Designated Allergy Leads

4.1.1. The First Aid Appointed Person, with the support of the Pastoral Deputy Heads, is the Designated Allergy Lead for each school site. As part of their first aid appointed person role they are responsible for:

- Preparing, reviewing and updating, where necessary, the IHCPs of all students with allergies at least annually (or when informed by parents of any changes) and sending to parents for approval including checking medicine expiration dates;
- Ensuring that, for students who have been prescribed emergency medication for their allergy and who travel to school independently (including by the School's Home to School Transport (HTST) service), the student's IHCP specifies whether they carry their emergency medication with them on the journey to/from school. Parents of pupils who have been prescribed an AAI and/or inhaler and travel independently, including on public transport and on Home-to-School transport, are strongly recommended to ensure that their child takes a prescribed AAI/inhaler with them for the journey to/from school each day;
- Ensuring that IHCPs are accessible to all staff on the School's management information system (MIS) and students' specific allergies are noted with a flag in our MIS system;
- Taking decisions on allergy management across the school site;
- Championing and practising allergy awareness across the school site;
- Being the overarching point of contact for staff, students and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff;

- Keeping an Adrenaline Pen register to include Adrenaline Pens prescribed to students and Spare Pens, including dose and expiry date;
- Checking and documenting the expiry date and location of the Spare Adrenaline Pens on the Adrenaline Pen register;
- Reporting any allergy-related issues to the relevant Head of School or Health and Safety Manager;
- Disseminating updates to all school staff, including the Catering Team, occasional staff and staff running clubs;
- Liaising with the Trips Leaders or Team, parents and school staff to ensure all allergy information is up to date and disseminated to the relevant people and a child's medication is in date ahead of a trip taking place.

4.2. Line Managers

4.2.1. Each Line Manager is responsible for:

- Ensuring their line reports complete and maintain up-to-date the iHASCO Anaphylaxis & Allergy training module, to give them good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment):
- Ensuring their line reports, students and parents, as relevant, have a good awareness of the School's Allergy and Anaphylaxis Policy, and other related procedures;
- Ensuring their line reports know the location of the School's Spare Pens;
- Keeping a record of any allergic reactions or near-misses using the IRF reporting procedures, ensuring an investigation is conducted to identify the cause and any corrective actions required and ensuring that any such actions are completed within the specified timeframes.
- Notifying their team where there are specific allergies which are relevant to that team, for example where a student is allergic to a cleaning product, the cleaning team will be notified.

4.3. Admissions and School Admin Teams - pre-admission

4.3.1. The Admissions Team is likely to be the first to learn of a student or visitor's allergy and this should be highlighted to the relevant school office. The School office and/or the First Aid Appointed Person on the relevant site will then ensure that:

- Any allergy information or special dietary information is captured before an unsupervised school visit e.g. a Taster Days or assessment days;
- Any relevant allergy or medical information is communicated to the relevant staff e.g. catering teams, teaching staff;
- Visitors (for example at Open Days and events) are aware of any catering provided and, if food is to be offered to children and/or other visitors, will be advised that children will be supervised (EYFS - Year 6) or signage will be clear in dining areas for children in Year 7 and above and adults.

4.4. School Admin Teams - allergy information on entry to the School

4.4.1. Each school Admin Team is responsible for:

- inputting information received about allergies from families and the Admissions Team in our School MIS.

4.5. Allergy champion from external catering provider

4.5.1. The School's external catering company appoints an Allergy Champion at each setting. They are responsible for:

- Reviewing the ingredients used in all food served and ensuring that they have access to the ingredients list if required;
- Reviewing and consulting where necessary the list identifying those students with food allergies;
- Being at service points throughout the dining service;
- Supporting students with allergies and their questions;
- Wearing an allergy champion badge to identify themselves;
- Ensuring that signage is in place to clearly identify the 14 major food allergens in the food served;
- Preventing, as far as possible, the risk of cross-contamination by ensuring that each dish has its own serving utensil.

4.6. All staff

4.6.1. All school staff, including teaching staff, support staff, catering staff, occasional staff (for example sports coaches, music teachers and those running breakfast and afterschool clubs) are responsible for:

- Championing and practising allergy awareness across the school;
- Understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed;
- Being aware of students in their care with allergies and what they are allergic to;
- Considering the risk to students with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate;
- Checking that students have access to their medication, or carry it on their behalf, when not on a school site where centrally held emergency medication can easily be reached;
- Being able to recognise and respond to an allergic reaction, including anaphylaxis;
- Completing the iHASCO training at induction and updating every three years;
- Considering the safety, inclusion and wellbeing of students with allergies at all times;
- Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy;
- Ensuring that any contractors and/or any other visitors they have engaged or invited onto the school premises do not knowingly bring or consume or use any tree nuts, peanuts or pinenuts and any associated nuts as an ingredient.

4.7. All parents/carers/guardians

4.7.1. All parents and carers (whether their child has an allergy or not) are responsible for:

- Being aware of and understanding the School's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of students with allergies;

- Providing the School, via the First Aid Appointed Persons, school offices or boarding house staff (if appropriate), with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, and any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema;
- Providing full details of any new, or changes to, allergies that they become aware of during their child's time at the School as soon as possible;
- Considering and adhering to the School's policy to restrict the bringing, consumption or use of nuts and peanuts on the School site or offsite School activities as far as possible when providing food, for example in packed lunches, as snacks or for fundraising events;
- Refraining from telling the School their child has an allergy or intolerance if this is a preference or dietary choice;
- Encouraging their child to be allergy aware.

4.8. Parents of children with allergies

4.8.1. In addition to the responsibilities set out in paragraph 4.7 above, the parents and carers of children with allergies should:

- Work with the School to complete an IHCP where required;
- Where possible, provide the School or their child with two labelled Adrenaline Pens 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 the School with any changes to their child's condition and ensure the relevant paperwork is updated too;
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring (see paragraph 4.11 below).

4.9. All students

4.9.1. The School will work with all students, in an age appropriate way, to support them in:

- 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;
- recognising and responding to an allergic reaction and supporting their peers and staff in case of an emergency (older students).

4.10. Students with allergies

4.10.1. In addition to point 4.10 above, students with allergies (taking into account that this will depend on age and may not be appropriate with very young children) are responsible for:

- Knowing what their allergies are and how to mitigate personal risk where possible;
- Avoiding their allergen(s) 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;
- Letting friends and staff know about their allergy, in case of emergency;
- For students in the Sixth Form and Senior School (where appropriate), carrying their emergency medication, with them at all times and only using them for their intended purpose;
- Asking catering staff about the ingredients of dishes if they are unsure;
- Consulting with catering staff if they think that food has been cross-contaminated (e.g. asking for a freshly prepared meal if possible);
- Understanding how and when to use their adrenaline auto-injector;
- Talking to the First Aid Appointed Person or any 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;
- Where appropriate, knowing what to do, including how to treat themselves and raise the alarm to get help, if they have an allergic reaction off school premises (for example those with permission to leave the school site during the school day or boarding students).

5. Assessing risk

5.1. Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning and include it in risk assessments. Some examples include:

- Classroom activities, for example craft using food packaging, science experiments where allergens are present, food tech or cooking;
- Bringing animals into the school, for example a dog or hatching chick eggs can pose a risk;
- Running activities or clubs where they might hand out snacks or food “treats”;
- Ensure safe food is provided or consider an alternative non-food treat for all students;
- Planning special events, such as cultural days and celebrations, including parental donated birthday treats.

5.2. Inclusion of students with allergies must be considered alongside safety and they should not be excluded. If necessary and where possible, the activity will be adapted.

6. Catering in School

6.1. The School is committed to providing a safe meal for all students, including those with food allergies. Catering in School is provided by a third party specialist catering company. By agreement, the catering company is responsible for ensuring:

- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training;
- All catering staff follow good hygiene practices, food safety and allergen management procedures in accordance with Best Industry Practice;
- The on-site catering team endeavours to get to know the students with allergies and what their allergies are, supported by all School staff;
- All catering staff understand the robust and effective procedures put in place by the School to identify students with food allergies, such as the wearing of yellow lanyards to show allergies or dietary needs in EYFS to Year 6;
- Catering staff do not knowingly bring, consume or use any tree nuts, peanuts or pinenuts and any associated nuts as an ingredient;

- That items which the supplier indicates 'may contain' Allergens are labelled accordingly;
- That all food and catering suppliers are aware of the School's policy for managing all food allergies;
- Clear identification of food containing the main 14 Allergens (see Allergens definition at paragraph 3 above) for students, staff and visitors to see, for example on the daily menus and at service points;
- That support is provided to students whose allergies fall outside of these 14 Allergens as notified by the School;
- That all pre-packaged foods are labelled in accordance with legislation;
- That catering staff serving in the kitchens are briefed each day of which dishes contain the main 14 Allergens and any additional Allergens for staff and students with allergies to food other than the main 14;
- That any unpublished, or unsigned, changes that are made to the ingredients are communicated to students with dietary needs by the catering staff.

7. Setting specific procedures

The School has robust procedures in place to identify students with food allergies, these are set out below by setting.

7.1. Nursery and Kindergarten

- 7.1.1. Prior to the start of each week, allergy information for named children is shared via the School's MIS with the Catering Team. In addition, the Early Years SLT shares the attendance pattern for children with allergies for the coming week. The Catering Team cross references the received information with each child's photograph and allergy information in the MIS.
- 7.1.2. Meals for children with dietary preferences are served on blue plates. Meals for children with allergies or medical dietary requirements are served on red plates. All other meals are served on green plates. Meals for children with complex dietary needs are plated, wrapped, named and labelled with the allergens food label by the chef. Within the Nursery, at the point of serving, the FS13 form details the allergens contained in the food. Nursery staff cross check the FS13 form with their dietary requirements sheets before giving the food to the child.
- 7.1.3. When parents inform the School of changes, this is updated immediately in the MIS and an updated allergy report from the MIS is shared with the Catering Team. The EYFS Admin Team updates the Nursery dietary sheet and re-shares this with the Nursery staff.
- 7.1.4. All Nursery and Kindergarten children with a dietary need have a place mat detailing their needs and a photograph to ensure complete communication and identification of a child if the Nursery staff and Catering team are not able to communicate with each other.
- 7.1.5. The Early Years menus in Cambridge are designed to reduce the risk of allergens present in the food entering the Nurseries. The menus at Dame Bradbury's School are catering for a wider age range of pupils and can not be adjusted to eliminate common allergens for young children. For this reason meals for all children at Dame Bradbury's who have a dietary preference or allergy/ medical dietary requirement will be plated by the chef and named. Within the Nursery, at the point of serving, the FS13 form details the allergens contained in the food and Nursery staff cross

reference the FS13 with their dietary requirements sheets before giving the named plate to the child as set out above.

7.2. Reception - Year 6

- 7.2.1. All pupils in Reception to Year 6 who have a food allergy are given a yellow lanyard. This is worn prior to the child joining the lunch queue and acts as a visual reminder for the catering team to check the allergen records (from the MIS system) that are stored for each child in the kitchen area. Year 3-6 pupils with food allergies are introduced to the Allergy Champion by their class teacher. Our Year 3 to 6 pupils are empowered to speak to the catering team about their allergies and the food they take.

7.3. Year 7- Year 13

- 7.3.1. Information about those students with food allergies is communicated to the catering team at the Senior School and Sixth Form from MIS at the start of the academic year, and as and when information has been updated. Students with food allergies are introduced to the Allergy Champion at the start of each academic year. Where specific measures are identified in a student's IHCP, plated meals are available.
- 7.3.2. Students are encouraged to speak to the catering team about their allergies and the food they take. Where this is not possible, or not yet possible (for example if a student has additional needs or lacks in confidence), measures to support the student will be identified in their IHCP and implemented.

7.4. Boarding

- 7.4.1. The Matron meets all boarding students individually when they arrive at the start of the academic year to discuss any medical issues/dietary requirements and informs the boarding staff of any concerns/needs. The Matron meets the catering manager to discuss specific needs using this information together with any additional information recorded on the School's MIS. Boarders are encouraged to speak to the catering staff about any allergies they have and whether the food that is on offer at mealtimes is suitable for them to eat. The boarding staff check student rooms and common areas regularly and confiscate any items that are not allowed, such as those containing nuts/traces of nuts. As needed, boarders are reminded to not bring in snacks containing nuts/traces of nuts into the boarding houses at the weekly boarding meetings.

7.5. Food brought into School

- 7.5.1. This school is an Allergen Aware school. We have students with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food. Posters are displayed on entrances to school sites as a reminder to the school community and visitors that nuts must not be brought into school ([see Annex 2](#)). Regular reminders are given to the school community that this is the case via written and spoken reminders.
- 7.5.2. We try to restrict peanuts and tree nuts as much as possible on the site and check all foods coming into the kitchen. Peanuts and tree nuts are not used in the School kitchens or permitted to be brought into school or the boarding houses in any form.

7.5.3. Parents and students should check the packaging labels of any food before bringing them into school (for example for birthdays or snacks) to ensure peanuts and tree nuts are not an ingredient in another product. Common foods that contain these goods as an ingredient include: packaged nuts, cereal bars, chocolate bars, nut butters, chocolate spread, sauces.

7.5.4. Students should be reminded by both parents and staff, where appropriate, not to share food brought into School.

7.6. Food hygiene for students

7.6.1. Younger pupils will wash their hands before and after eating. Older students will be encouraged to do so.

7.6.2. Sharing, swapping or throwing food is not allowed.

7.6.3. Water bottles and snack boxes should be clearly labelled.

7.6.4. In the boarding houses the boarding staff check student rooms and common areas regularly and confiscate any items that are not allowed such as those containing nuts/traces of nuts. The fridges in the common rooms are checked daily and any out of date food, raw meat or left over takeaways are removed.

8. School Trips and Sports Fixtures

8.1. Staff leading day and residential trips will have a register of students with allergies with medication details included in each risk assessment. Where necessary, appropriate catering provision will be put in place.

8.2. For any overnight stay the trip leader will communicate with any parents of students who have allergies to ensure that provision is in place. Trip leaders will also ensure that information is shared with trip location staff and catering suppliers to ensure that allergy requirements can, and will, be met.

8.3. All staff accompanying the trip will already be trained to recognise and respond to an allergic reaction through their induction, and ongoing, training.

8.4. Allergens will be clearly labelled on catered packed lunches.

8.5. If attending Match Tea at another school, staff will ensure that those students with dietary needs are catered for and food consumed is checked.

8.6. See also paragraph 13 below regarding Adrenaline Pens for School Trips and Sports Fixtures.

9. Insect stings

9.1. Staff are alert to students with known insect venom allergies and will seek to minimise risks where possible in their planning. Risk assessments will identify any identified risks and mitigations.

9.2. 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.

9.3. The School will monitor the grounds for wasp or bee nests. Students (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid them.

10. Animals

10.1. Most often, an allergic reaction is triggered by exposure to the dead flakes of skin (dander) an animal sheds. 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 on 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.

11. Allergic rhinitis/hay fever

11.1. The School seeks to:

- Be open with students and ask for ways in which they can be supported;
- Enable all students to take part in outdoor activities by using preventative measures to support them in case of high pollen counts such as sunglasses or pre doses of antihistamine as advised by parents;
- Ventilate indoor areas well;
- Reduce window opening at times of high pollen count or if mowing is occurring locally;
- Carry antihistamine to administer with permission to reduce hayfever symptoms;
- Keep surfaces in school clean including regular vacuuming;
- Use air conditioning (where available) where possible in warmer weather.

12. Inclusion and mental health

12.1. Allergies can have a significant impact on mental health and wellbeing. Students may experience anxiety and depression and are more susceptible to bullying. The School will ensure that:

- No child with an allergy is excluded from taking part in a school activity, whether on the school premises or a school trip;
- Students with allergies who require additional pastoral support receive it, including regular check- ins from their Tutor/ boarding staff etc;
- Affected students are given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives;
- Bullying related to allergy is treated in accordance with the School's Anti-Bullying Policy.

13. Adrenaline Pens

The School has regard to the "[Guidance on the use of adrenaline auto-injectors in schools](#)" (Department of Health, 2017).

13.1. Storage of Adrenaline Pens

- 13.1.1. Students prescribed with an Adrenaline Pen will have easy access to two, in-date Pens at all times. This may be their own and a School Spare Pen.
- 13.1.2. Individually prescribed Adrenaline Pens are stored centrally for EYFS to Year 6 and carried independently by students in Year 7 - Year 13. Those stored centrally are labelled and held with a copy of the pupil's IHCP in a named wallet with a photo. In the Sixth Form an Adrenaline Pen for each individual with an IHCP is held centrally, as well as the student carrying their own, as their second option.
- 13.1.3. A Spare Pen is stored on each school site including one at Latham Road (the sports ground). On most sites this is held in the main reception area with the exception of the Senior School where it is kept in the staff room - see full list of locations below.
- 13.1.4. Checks will be made to ensure Adrenaline Pens are where they should be and in date.
- 13.1.5. Adrenaline Pens must not be kept locked away.
- 13.1.6. Adrenaline Pens should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator).
- 13.1.7. Used or out-of-date pens will be disposed of as sharps.

13.2. Spare Pens

- 13.2.1. The School has multiple Spare Pens to be used in accordance with government guidance. The Spare Pens are clearly signposted and stored at the following School sites:
 - Dame Bradbury's School (Main reception)
 - Madingley (Medical room)
 - Salisbury Villas (Main reception)
 - Shaftesbury House (Front Office)
 - Stephen Perse Cambridge Junior School (Main reception)
 - Stephen Perse Cambridge Senior School (Staff Room)
 - Latham Road pavilion (Staff Office) and
 - Visual Arts Centre (the **VAC**) (accessible facilities)
 - Stephen Perse Cambridge Sixth Form (Bateman Street Reception)
 - Scholars House (Staff Office)
 - St Barnabas (Room 1)
- 13.2.2. The First Aid Appointed person is responsible for:
 - Ensuring there is a Spare Pen on their site according to the list at paragraph 13.3.1 above;
 - Identifying what dosage is required, based on the government [guidance](#) (see page 14/15)

- Ensuring the Spare Pens are stored at the locations set out above and with clear signage.

13.3. Adrenaline Pens on school trips and match days

- 13.3.1. No child with a prescribed Adrenaline Pen will be able to go on a school trip or fixture without their pen.
- 13.3.2. Adrenaline Pens will be kept close to the students at all times i.e. not stored in the hold of the coach when travelling or left in changing rooms.
- 13.3.3. Adrenaline Pens will be protected from extreme temperatures.
- 13.3.4. Staff accompanying the students will be aware of students with allergies and be trained to recognise and respond to an allergic reaction.

14. Responding to an allergic reaction

14.1. See Annex 1 for details of how to recognise and respond to an allergic reaction.

- If a student has an allergic reaction they will be treated in accordance with their IHCP and a member of staff will follow the School's guidance on when to access urgent and emergency care services, as set out in the [First Aid policy](#).
- If anaphylaxis is suspected, adrenaline will be administered without delay, lying the student down with their legs raised as described in Annex 1. They will be treated where they are and medication brought to them.
- A student's own prescribed medication will be used to treat allergic reactions if immediately available.
- 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 the student's own adrenaline pen is not available or misfires, then a Spare Pen will be used if on the school site.
- If anaphylaxis is suspected but the student does not have a prescribed Adrenaline Pen or IHCP, a member of staff will ensure they are lying down with their legs raised, call 999 and explain that anaphylaxis is suspected. If on site, they will inform the operator that Spare Pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a Spare Pen can be administered to anyone for the purposes of saving their life.
- The student will be made comfortable 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.

15. Training

15.1. The School is committed to training all staff on induction, and then every 3 years, to give them a good understanding of allergy. This includes:

- Understanding what an allergy is;
- How to reduce the risk of an allergic reaction occurring;
- How to recognise and treat an allergic reaction, including anaphylaxis;
- How allergies are managed, for example Emergency Response Plans and IHCPs;

- The importance of inclusion of students with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying; and
- Understanding food labelling.

15.2. At induction staff are also shown where emergency medication and individual medications are held.

16. Asthma

16.1. It is vital that students with allergies take appropriate doses of their asthma medications to minimise asthma flare-ups because asthma can exacerbate allergic reactions.

17. Related Policies:

- First Aid Policy
- Special Educational Needs and Disabilities (SEND) Policy
- Anti-Bullying Policy
- Medicine Policy
- Supporting Pupils with Medical Conditions Policy

Version Control

Date of adoption of this policy	10 June 2025
Date of last review of this policy	New policy
Date for next review of this policy	Summer Term 2026
Policy owner	Director of Educational Strategy
Authorised by	Health and Safety Committee on behalf of Governing Body

ANNEX 1

RESPONDING TO AN ALLERGIC REACTION /ANAPHYLAXIS

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.

Mild-moderate symptoms are usually responsive to an antihistamine. The pupil does not normally need to be sent home from school, or require urgent medical attention. However, mild reactions can develop into anaphylaxis: children having a mild-moderate (non-anaphylactic) reaction should therefore be monitored for any progression in symptoms.

What to do if any symptoms of anaphylaxis are present

Anaphylaxis commonly occurs together with mild symptoms or signs of allergy, such as an itchy mouth or skin rash. Anaphylaxis can also occur on its own without any mild-moderate signs. In the presence of any of the severe symptoms listed in the red box on page 1, it is vital that an adrenaline auto-injector is administered without delay, regardless of what other symptoms or signs may be present.

Always give an adrenaline auto-injector if there are ANY signs of anaphylaxis present.

You should administer the pupil's own AAI if available, if not use the spare AAI. The AAI can be administered through clothes and should be injected into the upper outer thigh in line with the instructions issued for each brand of injector.

IF IN DOUBT, GIVE ADRENALINE

After giving adrenaline **do NOT move the pupil**. Standing someone up with anaphylaxis can trigger cardiac arrest. Provide reassurance. The pupil should lie down with their legs raised.¹¹
If breathing is difficult, allow the pupil to sit.

If someone appears to be having a severe allergic reaction, it is vital to call the emergency services without delay – even if they have already self-administered their own adrenaline injection and this has made them better. A person receiving an adrenaline injection should always be taken to hospital for monitoring afterwards.

ALWAYS DIAL 999 AND REQUEST AN AMBULANCE IF AN AAI IS USED.

Practical points:

- Try to ensure that a person suffering an allergic reaction remains as still as possible, and does not get up or rush around. Bring the AAI to the pupil, not the other way round.
- When dialling 999, say that the person is suffering from anaphylaxis ("ANA-FIL-AX-IS").
- Give clear and precise directions to the emergency operator, including the postcode of your location.
- If the pupil's condition does not improve 5 to 10 minutes after the initial injection you should administer a second dose. If this is done, make a second call to the emergency services to confirm that an ambulance has been dispatched.
- Send someone outside to direct the ambulance paramedics when they arrive.
- Arrange to phone parents/carers.

- Tell the paramedics:
 - if the child is known to have an allergy;
 - what might have caused this reaction e.g. recent food;
 - the time the AAI was given.

Recording use of the AAI and informing parents/carers

In line with *Supporting Pupils*, use of any AAI device should be recorded. This should include:

- Where and when the REACTION took place (e.g. PE lesson, playground, classroom).
- How much medication was given, and by whom.
- Any person who has been given an AAI must be transferred to hospital for further monitoring. The pupil's parents should be contacted at the earliest opportunity. The hospital discharge documentation will be sent to the pupil's GP informing them of the reaction.

Department of Health: Guidance on the use of adrenaline auto-injectors in schools

Stephen Perse

Foundation

**THIS SCHOOL IS A
NO NUT
SCHOOL**



THANK YOU
for keeping our school safe!

Stephen Perse

Foundation

No food items containing nuts are permitted in school or during any off-site school activities



THANK YOU
for keeping our school safe!