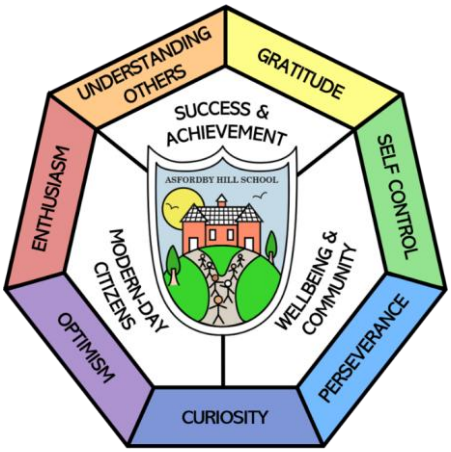
The Asfordby Hill School



Individual Value; Valuing Individuals

Anaphylaxis and Allergy Policy

This Policy Links With: **Medication and management procedures and policy** **Health and Safety Policy**	
Recommended:	
Statutory:	Y
Date Reviewed:	Autumn 2026
Date of Next Review:	Autumn 2027
Committee Responsible for Review:	FTB
Date FTB agreed	29.9.2026

1. Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation).

It is possible to be allergic to anything which contains a protein; however, most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but are not limited to):- Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

This policy sets out how Asfordby Hill Primary School will support pupils with allergies as well as staff, volunteers and visitors, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

2. Role and responsibilities

Parent Responsibilities

On entry to the school, it is the parent's responsibility to inform reception staff of any allergies. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication.

Parents are to supply a copy of their child's Allergy Action Plan (BSACI plans preferred) to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. nurse/GP/allergy specialist.

Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.

Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.

Staff Responsibilities

All staff will complete anaphylaxis training. Training is provided for all staff on a yearly basis and on an ad-hoc basis for any new members of staff.

Staff must be aware of the pupils in their care (regular or cover classes) who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

Allergy Leads (Nicola Bailey and Mel Brown) will ensure that the up-to-date Allergy Action Plan is kept with the pupil's medication.

It is the parent's responsibility to ensure all medication in in date however the Allergy Leads (Nicola Bailey and Mel Brown) will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Allergy Leads (Nicola Bailey and Mel Brown) keeps a register of pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of use of any AAI(s) and emergency treatment given.

Pupil Responsibilities

Pupils are encouraged to have a good awareness of their symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.

3. Allergy Action Plans

Allergy action plans are designed to function as individual healthcare plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline auto injector.

Asfordby Hill Primary School recommends using the British Society of Allergy and Clinical Immunology (BSACI) Allergy Action Plans to ensure continuity. This is a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK.

It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/Nurse/Allergy Specialist) and provide this to the school.

4. Emergency Treatment and Management of Anaphylaxis

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.

Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

More serious symptoms are often referred to as the ABC symptoms and can include:

- AIRWAY - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- BREATHING - sudden onset wheezing, breathing difficulty, noisy breathing.
- CIRCULATION - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more serious reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. Adrenaline is the mainstay of treatment, and it starts to work within seconds.

What does adrenaline do?

• It opens up the airways

• It stops swelling

• It raises the blood pressure

As soon as anaphylaxis is suspected, adrenaline must be administered without delay.

Action:

• Keep the child where they are, call for help and do not leave them unattended.

• LIE CHILD FLAT WITH LEGS RAISED – they can be propped up if struggling to breathe but this should be for as short a time as possible.

• USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY and note the time given. AAIs should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.

• CALL 999 and state ANAPHYLAXIS (ana-fil-axis).

• If no improvement after 5 minutes, administer second AAI.

• If no signs of life commence CPR.

• Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

5. Supply, storage and care of medication

For younger children or those not ready to take responsibility for their own medication, there is an anaphylaxis kit which is kept safely in a name labelled PE style bag and moves with the child, not locked away and accessible to all staff.

As children become older and depending on their level of understanding and competence, pupils will be encouraged to take responsibility for and to carry their own two AAIs on them at all times (in a suitable bag/container).

Medication should be stored in a suitable container and clearly labelled with the pupil's name.

The pupil's medication storage container should contain:

• Two AAIs i.e. EpiPen® or Jext® or Emerade®

• An up-to-date allergy action plan

• Antihistamine as tablets or syrup (if included on allergy action plan)

• Spoon if required

• Asthma inhaler (if included on allergy action plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the Allergy Leads (Nicola Bailey and Mel Brown) will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

Storage: AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes.

Disposal: AAIs are single use only and must be disposed of as sharps. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin. Sharps bins to be obtained from and disposed of by a clinical waste contractor/specialist collection service.

6. 'Spare' adrenaline auto-injectors in school

Asfordby Hill Primary School has purchased spare AAIs for emergency use in children who are risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date).

These are stored in a green container, clearly labelled 'Anaphylaxis Kit', kept safely, not locked away and accessible and known to all staff.

Asfordby Hill Primary School holds 2 spare pens which are kept in the following location: SCHOOL OFFICE DIRECTLY INFRONT OF YOU AS YOU GO IN ON A HOOK which is less than 5 minutes away from any point in the school.

The Allergy Leads (Nicola Bailey and Mel Brown) are responsible for checking the spare medication is in date on a monthly basis and to replace as needed.

Written parental permission for use of the spare AAIs is included in the pupil's allergy action plan.

Commented [NB1]: to do -update appendix on the medical consent form (policy)

If anaphylaxis is suspected in an undiagnosed individual call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

7. Staff Training

The named staff members (at least 2) responsible for co-ordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis and allergy policy are:-

Nicola Bailey

Mel Brown

All staff, including temporary staff, supply staff, regular volunteers, catering, wrap around care, sports coaches, peripatetic will complete online anaphylaxis training at the start of every new academic year. Training is also available on an ad-hoc basis for any new members of staff.

Training includes:

• Knowing the common allergens and triggers of allergy

• Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services

• Administering emergency treatment (including AAIs) in the event of anaphylaxis – knowing how and when to administer the medication/device

• Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance, knowing who is responsible for what

• Managing allergy action plans and ensuring these are up to date

• A practical session using trainer devices (these can be obtained from the manufacturers' websites: www.epipen.co.uk and www.jext.co.uk and www.emerade-bausch.co.uk)

8.Inclusion and safeguarding

Asfordby Hill Primary School is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Asfordby Hill Primary School recognises that pupils with allergies may be vulnerable to bullying, teasing, intimidation or discriminatory behaviour related to their medical condition. This may include verbal comments, exclusion from activities, deliberate exposure or threats involving allergens, or inappropriate sharing of food. Such behaviour is taken seriously as both a safeguarding and inclusion matter. All staff are expected to remain vigilant to signs of bullying or harassment linked to medical needs and respond promptly in accordance with the school's Behaviour, Anti-Bullying and Safeguarding Policies.

Any incident involving the bullying, teasing or deliberate endangerment of a pupil because of their allergy will be recorded and investigated by the school. Parents/carers will be informed, and appropriate support provided to all pupils involved. Where actions place a pupil at risk of harm, the incident may be treated as a safeguarding concern and escalated accordingly. Through its curriculum, assemblies and wider personal development programme, the school promotes understanding, respect and inclusion, helping all pupils to recognise the seriousness of allergies and their shared responsibility in maintaining a safe environment for everyone.

9. Catering

All food businesses (including school caterers-Innovate) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

The school menu is available for parents to view in monthly advance on the school website at https://www.asfordbyhill.leics.sch.uk/page/?title=School+Dinners&pid=55, with all ingredients listed and allergens highlighted on the Kanapla Food APP.

The Allergy Leads (Nicola Bailey and Mel Brown) will inform the Catering Manager and Cook of pupils with food allergies. This includes a list with photographs–for identifying pupils and Kanpla App information as well as AAIs.

Parents/carers are encouraged to meet with the Catering Manager/Cook/ to discuss their child's needs.

The school adheres to the following Department of Health guidance recommendations:

• Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.

• If food is purchased from the school canteen, parents should check the appropriateness of foods by speaking directly to the catering manager.

• The pupil should be taught to also check with catering staff, before purchasing food or selecting their lunch choice.

• Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the Catering Manager.

• Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).

• Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

Asfordby Hill Primary School recognises that allergens may be present not only in food intended for consumption but also in materials and resources used across the curriculum. Potential sources of allergen exposure may include, but are not limited to, play dough containing wheat, papier-mâché made with flour, milk-based paints or glues, bird seed and animal feed, egg boxes and eggshells, yoghurt pots, milk containers, food packaging used for junk modelling, and ingredients used in science, art, sensory play, cooking and design technology activities.

When planning activities, staff must consider whether any materials contain known allergens that could present a risk to pupils or staff with allergies. Where necessary, alternative materials should be used, and individual risk assessments completed for pupils with identified allergies. Staff should check product ingredients where appropriate and seek guidance from parents/carers if there is any uncertainty regarding the suitability of a resource. Allergens associated with curriculum materials should be included within relevant risk assessments and communicated to staff working with affected pupils.

Asfordby Hill Primary School will take reasonable steps to minimise unnecessary exposure to allergenic materials and ensure that all pupils can participate safely and inclusively in learning experiences. Any concerns, incidents or near misses involving allergen-containing materials must be reported and recorded in accordance with the procedures outlined in this policy.

10. Staff Volunteers and Visitors

The school recognises that staff, volunteers and regular visitors may also have severe allergies that require medical management.

- All staff are required to declare any known severe allergies, including those requiring emergency medication such as an adrenaline auto-injector (AAI), during the induction process and whenever there is a change to their medical needs.
- Volunteers and regular visitors who have a known severe allergy are encouraged to notify the school office or the member of staff responsible for their visit before attending the school site.
- Details of staff, regular volunteers and visitors with severe allergies will be recorded confidentially by the school, including:
    - The nature of the allergy.
    - Known triggers.
    - The location of any emergency medication.

    - Whether the individual carries an adrenaline auto-injector (e.g. EpiPen, Jext or Emerade).
    - Emergency contact details where appropriate.
- Individuals prescribed an adrenaline auto-injector are expected to carry their medication with them at all times or ensure it is readily accessible while on the school site.
- The Headteacher, School Business Manager, administrator Officer and designated first aid staff will be informed of any staff members with severe allergies and the location of their emergency medication.
- Where appropriate and with the individual's consent, relevant colleagues will be made aware of the allergy and the action required in an emergency.
- Temporary visitors attending school events are responsible for carrying and managing their own prescribed allergy medication. Any concerns regarding a visitor's medical needs should be shared with the school prior to the visit.
- Information relating to staff, volunteers and visitors will be managed in accordance with data protection requirements and will only be shared on a need-to-know basis to ensure safety and effective emergency response.

Communicating Allergy Information to Adults Working with Pupils

Asfordby Hill Primary School will ensure that all adults who work with or supervise pupils, including student placements, supply staff, peripatetic music teachers, sports coaches, external instructors, therapists and regular volunteers, are made aware of any pupils with severe allergies before they begin working with them. As part of their induction or first-day briefing, they will be informed of relevant allergies, potential triggers, the signs and symptoms of an allergic reaction, the location of emergency medication and the school's emergency response procedures. Allergy information will be included in class medical information, risk assessments and healthcare plans that are accessible to relevant staff. This briefing will emphasise that any suspected anaphylactic reaction must be treated as a medical emergency, with immediate assistance sought and emergency procedures followed, rather than delaying treatment by escorting the pupil elsewhere. The school will maintain a record of inductions and briefings to ensure all adults working with pupils have received the necessary information to keep children with allergies safe.

11. School trips

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.

Overnight school trips should be possible with careful planning and a meeting for parents with the lead member of staff planning the trip should be arranged. Staff at the venue for an overnight school trip should be briefed early on that an allergic child is attending and will need appropriate food (if provided by the venue).

Sporting Excursions Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the P.E. teacher/s are fully aware of the situation. The school being visited will be notified that a member of the team has an allergy when arranging the fixture. A member of staff trained in administering adrenaline will accompany

the team. If another school feels that they are not equipped to cater for any food-allergic child, the school will arrange for the child to take alternative/their own food.

Most parents are keen that their children should be included in the full life of the school where possible, and the school will need their co-operation with any special arrangements required.

12. **Allergy awareness and nut bans**

Asfordby Hill Primary School supports the approach advocated by Anaphylaxis UK towards nut bans/nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment, including in schools. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergy. They advocate instead for schools to adopt a culture of allergy awareness and education.

A 'whole school awareness of allergies' is a much better approach, as it ensures teachers, pupils and all other staff are aware of what allergies are, the importance of avoiding the pupils' allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

13. Serious Incidents and Near Misses

Asfordby Hill Primary School is committed to learning from all allergy-related incidents to minimise risk and continually improve the safety of pupils, staff and visitors. Any allergy-related incident, including a **near miss** (an event that had the potential to cause harm but was identified before exposure occurred), must be reported immediately to the Headteacher or designated senior leader. Examples of near misses include a child being offered food that contains a known allergen, a pupil being provided with the wrong meal, or an allergen-containing product being used in a classroom activity before being identified and removed.

All serious incidents and near misses will be recorded using the school's incident reporting system and logged in the accident or medical incident record as appropriate. The record will include details of the event, those involved, actions taken, outcomes, and recommendations for preventing a recurrence. Parents/carers will be informed of any allergy-related incident or near miss involving their child, even where no exposure or harm occurred, so that risks and preventative measures can be discussed collaboratively.

Following any serious incident or significant near miss, Asfordby Hill Primary School will undertake a review to identify lessons learned and determine whether changes are required to practice, risk assessments, staff training or this policy. The review will be led by the Headteacher or designated member of staff and the findings will be shared with relevant staff. Where necessary, procedures will be updated and additional control measures implemented to reduce future risk. The governing body will be informed of serious incidents where appropriate as part of the school's safeguarding and health and safety monitoring processes.

14. Risk Assessment

Asfordby Hill Primary School will conduct a detailed individual risk assessment for all new joining pupils with allergies and any pupils newly diagnosed, to help identify any gaps in our systems and processes for keeping allergic children safe.

Asfordby Hill Primary School will use:

Wiltshire Children Trust - Anaphylaxis Risk Assessment Example Template

15. Useful Links

Anaphylaxis UK - https://www.anaphylaxis.org.uk/

• Safer Schools Programme - https://www.anaphylaxis.org.uk/education/safer schools-programme/

• AllergyWise for Schools online training - https://www.allergywise.org.uk/p/allergywise-for-schools1 Allergy UK - https://www.allergyuk.org

• Resources for managing allergies at school - https://www.allergyuk.org/living-with an-allergy/at-school/

BSACI Allergy Action Plans - https://www.bsaci.org/professional resources/resources/paediatric-allergy-action-plans/

Spare Pens in Schools - http://www.sparepensinschools.uk

Department for Education Supporting pupils at school with medical conditions - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf

Department of Health Guidance on the use of adrenaline auto-injectors in schools - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf

Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016)

https://www.nice.org.uk/guidance/qs118 Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020)

https://www.nice.org.uk/guidance/cg134?unlid=22904150420167115834