Excellence, Aspiration and Care in Partnership

Allergy & Anaphylaxis Policy

Ratified – September 2026

Review Date – September 2027

Osidge School

A member of Ashmole Trust

Allergy and Anaphylaxis Policy

Purpose: To minimise the risk of any pupil suffering a serious allergic reaction whilst at school or attending any school related activity. To ensure staff are properly prepared to recognise and manage serious allergic reactions should they arise.

Linked with other policies: Supporting Pupils with Medical Conditions Policy

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

Mrs Teresa Owen - School Welfare Officer

Mrs Chrisanthy Dyer - Head Teacher

Contents

1. Introduction
2. Roles and responsibilities
3. Allergy action plans
4. Emergency treatment and management of anaphylaxis
5. Supply, storage and care of medication
6. 'Spare' adrenaline auto-injectors in school
7. Staff training
8. Inclusion and safeguarding
9. Catering
10. School trips
11. External clubs and activities
12. Allergy awareness and nut bans
13. Risk assessment
14. Useful links
15. Anaphylaxis Emergency Action Flow Chart

1.0 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 severe reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. 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, Kiwi, Fish, Latex, Insect venom, Pollen and Animal Dander.

This policy sets out how Osidge School will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

2.0 Roles and responsibilities

Parent Responsibilities

- On entry to the school, it is the parent's responsibility to inform the School Welfare Officer in writing of any allergies. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication. This information is also requested in the Osidge School new starter information pack.
- 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 and provided to the School Welfare Officer.

- Parents are responsible for ensuring any required medication is supplied, is 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, including practical instruction using training adrenaline auto-injectors (AAIs). Training is provided annually for all staff, with additional training offered as required for new members of staff and when individual needs arise.
- Staff (regular or cover classes) must be aware of the pupils in their care 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.
- The School Office admissions team must inform the School Welfare Officer of any new starters or any information received from parents with regards to updates on any medical information or updates.
- 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. Parents of pupils unable to produce their required medication for an overnight residential will not be able to attend the excursion.
- The School Welfare Officer will ensure that the up-to-date Allergy Action Plan is kept with the pupil's medication and a copy provided for all school excursions.
- It is the parent's responsibility to ensure all medication is in date, however the School Welfare Officer will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
- The School Welfare Officer keeps a register of pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of the use of any AAI(s) and emergency treatment given. This should be logged on Arbor and any other system in place within the school.

- The School Welfare Officer ensures that any reaction or near-reaction is recorded and reported internally or in accordance with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 2013).

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.

3.0 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.

British Society of Allergy and Clinical Immunology (BSACI) Allergy Action Plans are produced by a medical professional and should not be created by school. These are a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK. The allergy action plans are designed to function as an individual healthcare plan.

4.0 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, 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 severe 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.

5.0 Supply, storage and care of medication

For younger children or those not ready to take responsibility for their own medication, there should be an anaphylaxis kit which is kept within 5 minutes of them, and accessible to all staff. At Osidge School this medication is located in the Welfare Room and held within a cabinet (accessible to all adults)

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®
- 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 School Welfare Officer 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. The sharps bin is kept in the Welfare Room.

6.0 'Spare' adrenaline auto-injectors in school

Osidge School has purchased spare AAIs for emergency use for children who are at risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date), or for children are experiencing anaphylaxis for the first time if directed to do so by the ambulance control centre in the case of an emergency.

These spare AAIs are in the Welfare Room.

The School Welfare Officer is responsible for checking the spare medication is in date and is replaced as needed.

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

7.0 Staff training

All staff will complete allergy and anaphylaxis training annually, and on an ad-hoc basis during induction of new 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
- Practical instruction using training AAIs

Osidge School ensures that staff undertake a practical session using trainer devices (these can be obtained from the manufacturers' websites: www.epipen.co.uk and www.jext.co.uk). This is carried out in the September INSET each year.

The Barnet School Nursing team also deliver centralised online training sessions on the administration of the emergency medication for asthma, epilepsy and anaphylaxis. These sessions also include updated guidance on Benedict's Law and the administration of nasal adrenaline. The School Welfare Officer attends training updates and reports back to all staff.

8.0 Inclusion and Safeguarding

Osidge 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.

9.0 Catering

All food businesses (including school caterers) 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's menu is available for parents to view weekly on the school website.

The School Welfare Officer will inform the Chef of pupils with food allergies.

Systems are in place to ensure catering staff can identify children with allergies; this includes a list with photographs and details of the individual pupils' allergies. The School Welfare Officer is responsible for identifying children and has responsibility for keeping this up to date.

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.
- 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 School Welfare Officer.
- 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.

10.0 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.
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 or venues. The school will ensure that the P.E. teacher/s or Sports coaches are fully aware of the situation. The school/venue being visited will be notified that a pupil 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.

11.0 External Clubs and Activities

External providers operating clubs and activities on the school site are responsible for ensuring that suitably trained staff are available at all times to respond to medical emergencies and administer emergency medication, including AAIs, where required. Providers must ensure that their staff are familiar with the needs of participating pupils, the school's emergency procedures and the location of emergency medication. The provider is responsible for the care, welfare and medical needs of pupils attending the activity.

12.0 Allergy awareness and nut bans

Osidge School is a 'Nut Free' school - no nuts in our lunch menus, food activities or special events. Pupils should not bring nuts or food containing nuts to school as snacks or in packed lunches.

Osidge also has a culture of allergy awareness - for staff, pupils and parents. A 'whole school awareness of allergies' ensures staff and pupils are aware of what allergies are, the importance of avoiding the allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk. Age-appropriate discussions are had with pupils in cooking lessons and PSHE lessons regarding allergies, intolerances and dietary preferences. Furthermore, pupils are reminded in assemblies and in class that food in school (whether from home or provided by school) should not be shared.

13.0 Risk Assessment

Osidge School will conduct a detailed allergy care plan and if appropriate an 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 children with allergies safe.

14.0 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

Whole school allergy and awareness management - https://www.allergyuk.org/schools/whole-school-allergy-awareness-andmanagement

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

School and individual risk assessments can be downloaded for free from: https://www.anaphylaxis.org.uk/downloads-form/safer-schools-download/

15. Anaphylaxis Emergency Action Flow Chart

