Peel Park
Primary School
and Nursery
The Path to Success

# Allergy and Anaphylaxis Policy

Date: September 2026

Ratified by Governors:……..

Review Date: September 2027

## AIMS AND OBJECTIVES

This policy outlines Peel Park Primary 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 pupils with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy aware school.

This policy meets statutory duties under relevant legislation:

**1. Children and Families Act 2014, Section 100**

Schools must make arrangements to support pupils with medical conditions, including severe allergies and anaphylaxis.

**2. Allergy Safety in Schools Statutory Guidance (DfE, July 2026)**

This is the most recent statutory guidance for schools in England. It requires schools to:

- Have a published allergy safety policy.
- Identify pupils with allergies.
- Put Individual Healthcare Plans (IHPs) in place where required.
- Ensure staff receive appropriate allergy and anaphylaxis training.
- Maintain arrangements for emergency response.
- Record, review and learn from serious incidents and near misses.
- Support inclusion and participation in all aspects of school life.

**3. Human Medicines (Amendment) Regulations 2017**

Allows schools to purchase and hold spare adrenaline auto-injectors (AAIs) for emergency use in pupils at risk of anaphylaxis (subject to parental consent and appropriate arrangements).

**4. Equality Act 2010**

Schools must make reasonable adjustments for pupils whose allergy may constitute a disability and must prevent discrimination.

**5. Health and Safety at Work etc. Act 1974**

Requires schools to take reasonable steps to protect pupils, staff and visitors from foreseeable risks.

**6. Food Information Regulations 2014 (as amended)**

Require allergen information to be available for food provided by school catering services

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

- Supporting Pupils with Medical Conditions in School Policy
- Administration of Medication Policy
- Asthma Policy
- Anti-Bullying Policy
- Equality and Inclusion Policy
- EYFS Policy
- Attendance Policy
- Child Protection and Safeguarding Policy
- Special Educational Needs Policy

## What is an allergy?

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.

Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.

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.

## Definitions

**ANAPHYLAXIS:** Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.

**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 UK 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:** 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 two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this policy, we will refer to them as Adrenaline Pens.

**ALLERGY ACTION PLAN:** This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan.

**DESIGNATED ALLERGY LEAD**: The member of staff responsible for overseeing allergy management across the school and acting as the main point of contact for pupils, parents and staff. At Peel Park Primary School, the Designated Allergy Lead is the Assistant Headteacher for SEND.

**NEFFY:** Neffy (official name in the UK is EURNeffy) is a nasal spray which delivers adrenaline. It is a needle-free alternative to an adrenaline auto-injector approved.

**INDIVIDUAL HEALTHCARE PLAN:** A detailed document outlining an individual pupil's medical conditions, history, treatment, risks and action plan. This document is created by the school in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.

**RISK ASSESSMENT:** A detailed document outlining an activity, the risks it poses and any actions taken to mitigate those risks. Allergy should be included on all risk assessments for events on and off the school site.

**SPARE ADRENALINE PENS:** Schools are able to purchase spare adrenaline pens. These should be held as a back-up, in case pupils' prescribed 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.

Peel Park Primary School has 4 adrenaline pens for younger pupils and 4 adrenaline pens for older pupils in primary education. This will ensure that two pens can be taken on a school excursion and that two pens can always remain in school.

## Roles and responsibilities

Peel Park Primary School takes a whole-school approach to allergy management.

**The Governing Body:**

The Governing Body will:

- Ensure the school complies with the requirements of the Children and Families Act 2014, relevant equality legislation and the DfE Allergy Safety in Schools Statutory Guidance (2026).
- Adopt, monitor and review the school's Allergy and Anaphylaxis Policy at least annually and following any significant incident or legislative change.
- Ensure effective arrangements are in place to support pupils with allergies and those at risk of anaphylaxis.
- Ensure sufficient resources are available to implement the policy, including staff training, emergency medication arrangements and appropriate record-keeping systems.
- Monitor the effectiveness of the school's arrangements for managing allergies, including training, risk assessments, Individual Healthcare Plans (IHPs), incident reporting and emergency procedures.
- Ensure there is a named member of the senior leadership team with responsibility for overseeing allergy management within the school.
- Seek assurance that pupils with allergies are able to access all aspects of school life safely and are not disadvantaged or discriminated against.
- Ensure appropriate systems are in place for recording, monitoring and reviewing allergic reactions, anaphylaxis incidents and near misses.
- Promote a whole-school culture of allergy awareness, inclusion and safeguarding.

**The Headteacher:**

The Headteacher is responsible for ensuring that the school fulfils its duties under the Children and Families Act 2014 and the DfE Allergy Safety in Schools Statutory Guidance (2026).

The Headteacher has overall responsibility for the day-to-day implementation of the school's Allergy and Anaphylaxis Policy.

The Headteacher will ensure that appropriate procedures, training, risk assessments, healthcare planning and emergency arrangements are in place to safeguard pupils with allergies and to enable them to participate fully and safely in school life

**Designated Allergy Lead**

The Designated Allergy Lead is the Assistant Headteacher for SEND who reports to the Headteacher. The Designated Allergy Lead is responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy;
- Taking decisions on allergy management across the school;
- Championing and practising allergy awareness across the school;
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff;
- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
- Ensuring staff, pupils and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures. Staff will confirm that they have read the school's policy.
- Reviewing the school's stock of spare adrenaline pens and ensuring staff know where they are;

- Keeping a record of any allergic reactions or near-misses, reporting these to the appropriate authority (e.g. under RIDDOR) where necessary and ensuring the circumstances are investigated and learnings shared;
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy;
- Ensuring there is an anaphylaxis drill once a year.
- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families;
- Ensuring the information from families is up-to-date, and reviewed annually (at a minimum), co-ordinating medication with families and ensuring medication is in date.
- Keeping an adrenaline pen register to include adrenaline pens prescribed to pupils and the school's stock of spare adrenaline pens, including brand, dose and expiry date. The location of spare adrenaline pens should also be documented;
- Regularly checking spare adrenaline pens are where they should be, and that they are in date;
- Replacing the spare adrenaline pens when necessary;
- Providing on-site adrenaline pen training for staff and pupils and refresher training as required. This may be reminders on a termly basis.

**Admissions Team (Office staff):**

The office staff will generally be the first to learn of a pupil or visitor's allergy. They will work with the Designated Allergy Lead to ensure that:

- Allergy information or special dietary information is communicated to the Designated Allergy Lead and relevant staff, who will work with the child, at the earliest opportunity;
- The catering/ kitchen staff are alerted also.

**All staff**

All school staff, including teaching staff, support 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;
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed;
- Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to;
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate;
- Ensuring pupils always have access to their medication or carrying it on their behalf;
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;
- Taking part in training and anaphylaxis drills as required (at least once a year). Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager;
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy;
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the School Nurse/ Designated Allergy Lead;
- Ensuring that pupils have their medication and their Allergy Action Plan or Individual Health Care Plan with them when leaving school site, for a match or trip.

**All parents**

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 pupils with allergies;

- Providing Peel Park Primary School with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema;
- Considering and adhering to any food restrictions or guidance the school has in place 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; and
- Encouraging their child to be allergy aware.

**Parents of children with allergies**

In addition to the information above, the parents and carers of children with allergies should:

- Work with the school to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan;
- If applicable, provide the school or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, ie. spoon or syringe), inhalers or creams;
- Ensure medication is in-date and replaced at the appropriate time;
- Ensure their child has access to their allergy medication, including two adrenaline pens if prescribed, on the journey to and from school;
- Update school with any changes to their child's condition and ensure the relevant paperwork is updated too;
- 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; and
- 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 eg. not eating the food to which they are allergic.

**All pupils**

All pupils at the school should:

- Be allergy aware;
- Understand the risks allergens might pose to their peers and respect measures to support them;
- Learn how they can support their peers and be alert to allergy-related bullying;
- Older pupils will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency; and
- Adhere to food restrictions where the child is old enough to be aware of these.

**Pupils with allergies**

In addition to the information above, pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk, depending upon their age and comprehension;
- Avoiding their allergen as best as they can;
- Understanding the importance of following the school specific processes of lunch and snack services and how that mitigates risk;
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction;
- Carrying two adrenaline auto-injectors with them at all times, if age and capability appropriate. 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;
- If age and capability appropriate, ensuring they have their medication with them on the journey to and from school.

## Information and documentation

### Register of pupils with an allergy

The school has a register of pupils who have a diagnosed allergy. This includes children who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed.

### Individual Healthcare Plans

Each pupil with an allergy has an Individual Healthcare Plan. The information on this plan includes:

- Known allergens and risk factors for allergic reactions;
- A history of their allergic reactions;
- Detail of the medication the pupil has been prescribed including dose, this should include adrenaline pens, antihistamine etc;
- A copy of parental consent to administer medication, including the use of spare adrenaline pens in case of suspected anaphylaxis;
- A photograph of each pupil; and
- A copy of their Allergy Action Plan.

## Assessing risk

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 lessons 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 pupils; and
- Planning special events, such as cultural days and celebrations.

Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, adapt the activity. Peel Park Primary School will ensure compliance with the Equality Act 2010.

## Food, including mealtimes and snacks

### Catering in school

The school is committed to providing a safe meal for all students, staff and visitors, including those with food allergies.

- Due diligence is carried out with regard to allergen management when appointing catering staff;
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training;
- Peel Park Primary School’s Nursery and Reception classrooms will adhere to the Early Years Foundation Stage statutory guidance where the ‘Safer Eating’ section contains relevant information for allergies: The school will ensure that all children are supervised appropriately during meals and snacks and remain within sight and hearing of staff at all times. A member of staff, holding a current

Paediatric First Aid qualification, will be present whenever children are eating. Information regarding food allergies, intolerances, medical conditions and dietary requirements will be obtained prior to admission, shared with relevant staff and reviewed regularly. Food will be prepared and presented in a manner appropriate to the child's age and stage of development to reduce the risk of choking. Staff will receive training to recognise and respond to choking incidents, allergic reactions and anaphylaxis. Safe eating practices will be embedded across the setting in accordance with the EYFS Statutory Framework and associated nutrition guidance.

- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;
- The catering team will endeavour to get to know the pupils with allergies and what their allergies are, supported by school staff;
- The catering team will endeavour to provide varied meal options to students and staff with allergies;
- The school has robust procedures in place to identify pupils with food allergies. These will include ensuring there is a member of staff familiar with pupils who have allergies. Photos of pupils with allergies are available. There are healthcare plans in place for all pupils with allergies.
- Food containing the main 14 allergens (see Allergens definition) will be clearly labelled. Other ingredient information will be available on request.
- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging;
- Where changes are made to the ingredients this will be communicated to pupils with dietary needs by the catering team liaising with The Designated Allergy Lead or with the SBM;
- [State what the school's policy is on products with Precautionary Allergen Labelling or "May Contain' labelling];
- Food provided at breakfast club and in after school clubs will follow these procedures
- All staff will avoid inclusion of foods where nuts are listed as an ingredient. This includes spaces occupied only by staff such as the staffroom.

## Food brought into school

### Birthdays and celebrations

Parents/carers must check with the class teacher that any food, sweets, cakes or confectionery brought into school to celebrate birthdays or other personal events will not compromise the health and safety of any pupil, particularly those with food allergies.

Home-made treats should not be brought into school by parents/ carers.

### School Events, Parties and Fundraising Activities

All food provided for school-organised events must:

- Have a full list of ingredients available.
- Be checked for known allergens affecting pupils attending the event.
- Be risk assessed where appropriate.
- Be approved by a member of staff responsible for allergy management.

Where food is provided as part of a curriculum activity, celebration, fundraising event or reward system, consideration must be given to pupils with allergies to ensure they can participate safely and inclusively.

### Packed Lunches

Parents/carers are responsible for ensuring packed lunches do not contain foods that present a significant risk to others.

The school may implement restrictions on specific allergens where a risk assessment indicates this is necessary to protect pupils with severe allergies. Such restrictions will be communicated clearly to families.

Pupils must:

- Eat only food provided by their parent/carer.
- Not share food, drinks, utensils or lunchbox items with others.

**Food for Curriculum Activities**

Where food is used within lessons, cooking activities, sensory play, reward systems or enrichment experiences:

- Allergies and dietary requirements must be checked beforehand.
- Alternative resources or activities must be provided where necessary.
- Ingredient labels must be retained and available for inspection.

**Appropriate cleaning procedures must be followed before and after activities**

## Food bans or restrictions

- 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;
- We try to restrict peanuts and tree nuts as much as possible on the site and check all foods coming into the kitchen; and
- All food coming onto school premises or taken on a school trip or to a match should be checked to ensure peanuts and tree nuts are not an ingredient in another product. Please check the label on all foods brought in. Common foods that contain these goods as an ingredient include: packaged nuts, cereal bars, chocolate bars, nut butters, chocolate spread, sauces.

## Food hygiene for pupils

- Pupils will wash their hands before and after eating;
- Sharing, swapping or throwing food is not allowed;
- Water bottles and packed lunches should be clearly labelled; and
- Cross contamination of foods will follow appropriate guidelines for the safe storage and use of food items.

## Educational visits and sports fixtures

- Staff leading the trip will have a register of pupils with allergies and details of their medication. Staff should notify the trip leader of any allergies;
- Allergies will be considered on the risk assessment and catering provision put in place;
- Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
- Staff (and some pupils, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction;
- Allergens will be clearly labelled on catered packed lunches.
- If attending a meal at another school, details of the children’s dietary requirements will be sent ahead to ensure they have a safe meal; and
- See Adrenaline Pens section for School Trips and Sports Fixtures.

## Safe Meal Provision for Individuals with Non-Major Allergen Allergies

The school recognises that some pupils, staff and visitors may have allergies to foods and substances that are not included within the UK's 14 legally declarable allergens. The school is committed to ensuring that all individuals with medically diagnosed allergies receive a safe meal and are able to participate fully in school life.

To achieve this, the school will:

- Maintain an up-to-date register of all known food allergies and intolerances, including allergens that fall outside the statutory list of 14 major allergens.
- Obtain detailed information from parents/carers, staff members and relevant healthcare professionals regarding any non-major allergens that require avoidance.
- Ensure that individual Allergy Action Plans and/or Healthcare Plans clearly identify specific allergens and any necessary dietary controls.
- Implement a clear communication system between parents/carers, school staff, catering providers and the allergy lead to ensure dietary information is shared accurately and promptly.
- Require the catering provider to assess ingredients, recipes and manufacturing information when preparing meals for individuals with allergies outside the main 14 allergens.
- Ensure that meals prepared for individuals with identified allergies are subject to additional checking procedures before service.
- Clearly identify and verify special meals at the point of service to prevent errors or meal exchanges.
- Put reasonable measures in place to reduce the risk of cross-contamination during food preparation, storage and serving.
- Review individual dietary requirements whenever menus change, following an allergic reaction, or when updated medical information is received.
- Encourage pupils and staff to raise concerns immediately if they are uncertain whether a meal is safe for them to consume.

## Insect stings

Those 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; and
- Keep food and drink covered.

The school site managers will monitor the grounds for wasp or bee nests. Pupils (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.

## Animals

It's normally the dander (flakes of skin) saliva or urine that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupil with a known animal allergy should avoid the animal to which they are allergic;
- 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.

## Allergic rhinitis/ hayfever

Peel Park Primary School recognises that allergic rhinitis (hay fever) is a medical condition that can significantly affect a pupil's health, wellbeing, attendance, concentration and participation in learning. Symptoms may include sneezing, nasal congestion, itchy or watery eyes, coughing, headaches, fatigue and disrupted sleep. For some individuals, hay fever may also worsen asthma symptoms

The school will take reasonable steps to minimise exposure to known seasonal allergens and support pupils and staff affected by allergic rhinitis by:

- Maintaining accurate records of pupils and staff with significant allergic rhinitis where medical information has been provided.
- Recording any required medication within the individual's Healthcare Plan where appropriate.
- Allowing prescribed medication, including antihistamines, to be administered in accordance with the school's medicines policy.
- Considering environmental adjustments during periods of high pollen levels, such as keeping windows closed where practical, using alternative entrances or routes, and modifying outdoor activities where symptoms are severe.
- Ensuring pupils have access to drinking water and tissues throughout the school day.
- Supporting pupils who experience difficulties with concentration, fatigue or discomfort as a result of allergy symptoms.
- Taking account of severe hay fever and pollen allergies when undertaking risk assessments for outdoor learning, sports events, educational visits and residential activities.
- Ensuring staff are aware of any pupil whose hay fever may exacerbate asthma symptoms and know how to respond if symptoms worsen.

During periods of high pollen count, the Designated Allergy Lead will ensure that relevant staff are informed of pupils known to experience significant symptoms. Consideration will be given to adaptations such as indoor lunchtime provision, alternative sporting arrangements, classroom ventilation management and increased opportunities for hand and face washing following outdoor activities.

## Inclusion and mental health

Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying.

- No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip;
- Pupils with allergies may require additional pastoral support including regular check-ins from their class teacher and supporting LSAs;
- Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives; and
- Bullying related to allergy will be treated in line with the school's anti-bullying policy

## Adrenaline pens

Under Regulation 238 of the Human Medicines Regulations 2012, anyone—including school staff—can administer adrenaline in an emergency to save a life, even without formal medical training.

**Storage of adrenaline pens**

- Pupils prescribed with adrenaline pens will have easy access to two, in-date pens at all times;
- Both adrenaline pens will be kept with the child so that there is always ease of access to both. This will include:
    - When the child is in the classroom;
    - When the child is accessing provision elsewhere in school;
    - When the child is on the playground/ lunch hall, the adrenaline pens will be kept in the class First Aid box in the dining room and will be clearly labelled.
- Spot checks will be made to ensure adrenaline pens are where they should be and in date;

- Adrenaline pens must not be kept locked away;
- 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); and
- Used or out of date pens will be disposed of as sharps.

**Spare adrenaline pens**

This school has 8 spare adrenaline pens to be used in accordance with government guidance. 4 pens are for younger children. These are 150mg Epi-pens and are for children weighing between 7.5kg-25kg. 4 are 300mg Epi-pens and are for children over 25kg.

Peel Park Primary School has purchased 4 Epi-pens per weight range so that 2 Epi-pens can always remain on site and 2 Epi-pens can accompany children on school visits off-site.

The locations of spare adrenaline pens are in the school office.

The Allergy Lead is responsible for:

- What dosage is required, based on the Resuscitation Council UK's age-based guidance
- Which brand(s) to buy. Peel Park Primary School has purchased Epi-pens.
- The purchasing of spare adrenaline pens;
- Distribution around the site and clear signage.

**Adrenaline pens on off-site activities**

- No child with a prescribed adrenaline pen will be able to go on a school trip without two of their own devices. It is the trip leader's responsibility to check they have them;
- Adrenaline pens will be kept close to the pupils at all times e.g. not stored in the hold of the coach when travelling or left in changing rooms;
- Adrenaline pens will be protected from extreme temperatures;
- Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction; and
- Two Epi-pens must accompany a school visit and be appropriate to the children's weight range.

## Responding to an allergic reaction/ anaphylaxis

See appendix on recognising and responding to an allergic reaction

If a pupil has an allergic reaction:

- Treat the pupil in accordance with their Allergy Action Plan;
- Instigate the school's Emergency Response Plan (see Appendix);
- If anaphylaxis is suspected administer adrenaline without delay;
- Treat the pupil where they are. Lie them down with their legs raised and bring medication to them;
- Use pupil's own prescribed medication if immediately available;
- Pupil can administer the adrenaline pen themselves [if able to] or a member of staff can administer pen. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline;
- If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen;
- If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, lie the pupil down with their legs raised, call 999 and explain anaphylaxis is suspected. Inform the operator that spare adrenaline pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life;

- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services again and inform them that a second dose of adrenaline has been given;
- Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better; and
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff should accompany them in an ambulance until a parent or guardian arrives.

## Training

The school is committed to training all staff annually 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 the school manages allergy, for exaAmple Emergency Response Plan, documentation, communication etc;
- Where adrenaline pens are kept (both prescribed pens and spare pens) and how to access them;
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying;
- Understanding food labelling; and
- Taking part in an anaphylaxis drill.

**The school will carry out an anaphylaxis drill once a year.**

This includes:

An exercise simulating an event where a pupil or member of staff has an allergic reaction and testing the whole school response.

## Asthma

It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions. See relevant Asthma Policy.

## Reporting allergic reactions

The school will log allergic reaction incidents and near-misses. See the ‘Supporting Pupils with Medical Conditions’ Policy with regards to the school’s procedures.

## Appendix 1

## Managing Allergic Reactions:

### ALLERGIC REACTIONS VARY

Allergic reactions are unpredictable and can be affected by factors such as illness or hormonal fluctuations.

You cannot assume someone will react the same way twice, even to the same allergen.

Reactions are not always linear. They don't always progress from mild to moderate to more serious; sometimes they are life-threatening within minutes.

### MILD TO MODERATE ALLERGIC REACTIONS

Symptoms include:

- Swollen lips, face or eyes
- Itchy or tingling mouth
- Hives or itchy rash on skin
- Abdominal pain
- Vomiting
- Change in behaviour

Response:

- Stay with pupil
- Call for help
- Locate adrenaline pens
- Give antihistamine
- Make a note of the time
- Phone parent or guardian
- Continue to monitor the pupil

### SERIOUS ALLERGIC REACTIONS / ANAPHYLAXIS

The most serious type of reaction is called **ANAPHYLAXIS**. Anaphylaxis is uncommon, and children experiencing it almost always fully recover.

**In rare cases, anaphylaxis can be fatal. It should always be treated as a time-critical medical emergency.**

Anaphylaxis usually occurs within 20 minutes of eating a food but can begin 2-3 hours later.

People who have never had an allergic reaction before, or who have only had mild to moderate allergic reactions previously, can experience anaphylaxis.

**Appendix 2**

**Responding to Anaphylaxis**

## SYMPTOMS OF ANAPHYLAXIS

### A – Airway

- Persistent cough
- Hoarse voice
- Difficulty swallowing
- Swollen Tongue

### B – Breathing

- Difficult or noisy breathing
- Wheeze or cough

### C - Circulation

- Persistent dizziness
- Pale or floppy
- Sleepy
- Collapse or unconscious

**IF YOU SUSPECT ANAPHYLAXIS, GIVE ADRENALINE FIRST BEFORE YOU DO ANYTHING ELSE.**

## DELIVERING ADRENALINE

1. Take the medication to the patient, rather than moving them.
2. The patient should be lying down with legs raised. If they are having trouble breathing, they can sit with legs outstretched.
3. It is not necessary to remove clothing but make sure you're not injecting into thick seams, buttons, zips or even a mobile phone in a pocket.
4. Inject adrenaline into the upper outer thigh according to the manufacturer's instructions.
5. Make a note of the time you gave the first dose and call 999 (or get someone else to do this while you give adrenaline). Tell them you have given adrenaline for anaphylaxis.
6. Stay with the patient and do not let them get up or move, even if they are feeling better (this can cause cardiac arrest).
7. Call the pupil's emergency contact.
8. If their condition has not improved or symptoms have got worse, give a second dose of adrenaline after 5 minutes, using a second device. Call 999 again and tell them you have given a second dose and to check that help is on the way.
9. Start CPR if necessary.
10. Hand over used devices to paramedics and remember to get replacements.

**For more information see the Government's Guidance for the use of adrenaline auto-injectors in schools.**

## Appendix 3

## Peel Park Primary School's Emergency Response Plan

The current statutory guidance for schools requires staff to be able to recognise and respond promptly to allergic reactions and anaphylaxis, with clear emergency procedures understood by all staff.

## Emergency Response Plan for Anaphylaxis

### 1. Recognise the Signs of Anaphylaxis

Anaphylaxis is a medical emergency. Staff must be alert to symptoms that may include:

- Difficulty breathing or wheezing.
- Persistent cough.
- Swelling of the lips, tongue or throat.
- Difficulty swallowing or speaking.
- Sudden hoarse voice.
- Dizziness, collapse or loss of consciousness.
- Pale or floppy appearance.
- Rapid progression of symptoms following exposure to a known or suspected allergen.

### 2. Immediate Action

If anaphylaxis is suspected:

- **Administer the individual's prescribed adrenaline auto-injector immediately.**
- If no prescribed device is available, administer a spare school adrenaline auto-injector in accordance with current legislation and the pupil's Individual Healthcare Plan where appropriate.
- Do not wait for symptoms to worsen before administering adrenaline.
- Send an adult to summon additional assistance.

### 3. Call Emergency Services

A member of staff must immediately call **999** and state:

- "Anaphylaxis. Adrenaline has been administered."
- The caller should provide:
- School name and address.
- Exact location of the casualty.
- Time adrenaline was administered.
- Current symptoms and condition of the individual.

### 4. Monitor and Reassure

- While awaiting emergency services:
- Keep the individual lying flat where possible.
- Do not allow them to stand or walk.
- If breathing is difficult, they may sit up with support.
- If unconscious, place in the recovery position.
- Remain with the individual at all times.
- Continuously monitor breathing and responsiveness.

### 5. Administer a Second Adrenaline Auto-Injector if Required

If symptoms continue, worsen, or return before emergency services arrive, a second adrenaline auto-injector should be administered in accordance with current clinical guidance and the individual's Allergy Action Plan.

**6. Inform Parents or Carers**

As soon as reasonably practicable:

- Contact the parent/carer.
- Inform them that adrenaline has been administered and emergency services have been called.
- Advise them which hospital the pupil will be taken to if known.

**7. Handover to Ambulance Personnel**

The member of staff accompanying the pupil should provide:

- The individual's Allergy Action Plan and/or Healthcare Plan.
- Details of the suspected allergen.
- Time(s) adrenaline was administered.
- Details of any additional medication given.
- Information about the incident and observed symptoms.

**8. Post-Incident Procedures**

Following any anaphylaxis incident, the school will:

- Complete an incident report.
- Inform the Headteacher and Designated Allergy Lead.
- Review the circumstances that led to the reaction.
- Identify any lessons learned or additional control measures required.
- Review the pupil's Individual Healthcare Plan and risk assessments where appropriate.
- Arrange replacement adrenaline auto-injectors where used.