

Greenvale Primary School



ALLERGY AND ANAPHYLAXIS POLICY

Policy Date	June 2025
Signed by Head Teacher	Mrs A Allnutt
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This policy is based on the model policy for allergy management at school

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Glossary of terms

Allergy Action Plan

These plans have been designed to facilitate first aid treatment of anaphylaxis, to be delivered by people without any special medical training nor equipment apart from access to an adrenaline auto-injector (AAI). The plans are medical documents, and should be completed by a child's health professional (and not by parents or teachers). The plans are now designed to function as Individual Healthcare Plans for children with food allergies.

Individual Healthcare Plan

These plans are drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school nurse, specialist or children's community nurse or paediatrician, who can best advise on the particular healthcare needs of a child. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which a school should take to help the child manage their specific condition and overcome any potential barriers to getting the most from their education.

Foreword

The Anaphylaxis Campaign and Allergy UK have worked with the British Society for Allergy and Clinical Immunology (BSACI) and the Medical Conditions in Schools Alliance, supported by the Department for Education (DfE), to develop this model policy guide.

1. Government legislation

Schools have a legal duty to support pupils with medical conditions, including allergy. Schools must adhere to legislation and statutory guidance on caring for pupils with medical conditions, including the administration of allergy medication and adrenaline auto-injectors (AAIs).

The English Government's guidance on supporting pupils at school with medical conditions, published in December 2015 is available from [this link](#).

These allergy guidelines are designed to be included within your school's medical conditions policy. It is recommended that they should be made available on your school's website.

2. First Aid Policy

An allergy policy must be read in conjunction with the schools' First Aid policy as anaphylaxis is an integral within the management of First Aid. Designated first aiders have specific training on anaphylaxis and understand their responsibilities in this regard:

Roles and responsibilities

The **governing body** are required to ensure that relevant policies are in place to cover their own school. This should be based on a suitable and sufficient risk assessment carried out by a competent person. The governing body has general responsibility for all the school's policies, even when it is not the employer. In practice, most of the day to day functions of managing health and safety are delegated to the headteacher.

The **headteacher** is the delegated person responsible for putting the governing body's policy into practice and for developing detailed procedures. The headteacher should also make sure that parents are aware of the school's first aid and allergy policies, including arrangements for managing children with allergies and at risk of anaphylaxis.

Teachers' conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Teachers and other staff in charge of pupils are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils at the school in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency. The employer must arrange adequate and appropriate training and guidance for staff who volunteer to be first aiders. The employer must ensure that there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff on annual/sick leave or off-site.

3. Introduction

Allergy is the response of the body's immune system to normally harmless substances such as foods, pollen and house dust mites. Whilst these substances (allergens) may not cause any problems in most people, in allergic individuals their immune system identifies them as a 'threat' and produces an inappropriate response. This can be relatively minor, such as localised itching, but it can be much more severe causing anaphylaxis which can lead to upper respiratory obstruction and collapse. Common triggers are nuts and other foods, venom (bee and wasp stings), drugs, latex and hair dye. Symptoms often appear quickly and the 'first line' emergency treatment for anaphylaxis is adrenaline which is administered with an Adrenaline Auto-Injector (AAI).

Action to be taken:

- Give adrenaline – **WITHOUT DELAY**- if an AAI is available
- Call an ambulance (999) and tell the operator it is anaphylaxis
- Position is important -lie the person flat (or sit them up if having breathing problems)
- Avoid standing or moving someone having anaphylaxis
- Stay with the person until medical help arrives
- If symptoms do not improve within five minutes of a first dose of adrenaline, give a second dose using another AAI
- A person who has a severe allergic reaction and/ or is given adrenaline should always be taken to hospital for further observation and treatment
- Sometimes anaphylaxis symptoms can re-occur after the first episode has been treated and appeared to have settled. This is called biphasic anaphylaxis.

Spare pens in schools

Since 2017, schools have been legally able to directly purchase AAI from a pharmaceutical supplier, such as a local pharmacy, without a prescription. Guidance from the UK Departments of Health (and equivalent guidance for the Devolved Nations) provide further details.

www.gov.uk/government/publications/usingemergency-adrenaline-auto-injectors-in-schools

A supplier e.g. pharmacy, will need a request signed by the Headteacher (ideally on appropriate headed paper) stating:

- The name of the school for which the product is required
- The purpose for which that product is required
- The dose and make required

Allergy Action Plans

Allergy Action Plans have been designed to facilitate first aid treatment of anaphylaxis, by either the food-allergic person or someone else (e.g. parent, teacher, friend) without any special medical training nor equipment apart from access to an AAI. They have been developed following an extensive consultation period with health professionals, support organisations, parents of food-allergic children and teachers, through the BSACI.

[Please click here to see the sample Allergy Action Plans.](#)

The plans are medical documents, and should be completed by a child's health professional (and not by parents or teachers). Although parents should be involved.

The plans can either be printed out and completed by hand, or completed and signed by the healthcare professional online.

4. Staff allergy training

It is good practice to have a named member(s) of staff at school responsible for coordinating allergy management including the development and upkeep of the school's allergy policy. However, an allergic reaction could occur at any time at school, so all staff should be trained on what to do in the event of an allergic reaction, as a student may be under their

supervision when this happens. Allergy training should be refreshed yearly (at a minimum) and new and temporary staff should be trained as soon as they join the school to ensure confidence and competence. Acting fast is key in reducing the risk of a severe allergic reaction.

Allergy training should include a practical session (trainer AAI's are available to order through the manufacturer's website.) Training should include:

- 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 AAI's) 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
- Associated conditions e.g. asthma
- Managing emergency care plans and ensuring these are up to date

5. Storage of AAI's

Students should carry two AAI's with them at all times. If the student is unable to carry pens/medication/inhalers themselves (e.g. primary school aged pupils) this medication should be stored safely but should be easily accessible in the event of an emergency and not locked away. Ensure that these are labelled for identification of the pupil e.g. with their name and photograph and Allergy Action Plan.

All staff and the relevant student/staff member should know where the spare AAI is kept and this must be labelled for identification of the pupil e.g. with their name and photograph and Allergy Action Plan.

Ensure that students know where their medication, AAI's and inhalers are at all times.

6. Expiry dates

- It is the parents responsibility to ensure that the child's AAI's are within the expiry date. However it is good practice for schools to schedule their own regular checks of medication and that staff check the expiry dates of AAI's as these may need replacing
- Parents and schools can register AAI's on the manufacturer's websites to receive text alerts for expiry dates
- Schools should return expired medication to parents for safe disposal
- Any sharp items such as AAI's should be disposed of safely using a sharps disposal box
- Note that the dose of AAI can vary according to the child's weight, so as the child grows the correct dose required may change from a junior to adult

7. Managing insect sting allergy

Insect sting allergy causes a lot of anxiety and needs careful management. Children need to take special care outdoors, wearing shoes at all times and making sure any food or drink is covered.

Adults supervising activities must ensure that suitable medication, including AAls, is always on hand for the management of anaphylaxis. This is the same for school staff who have an allergy.

8. Allergies and bullying

By law, all state schools must have a behaviour policy in place that includes measures to prevent all forms of bullying among pupils, and this is a policy decided by the school. All teachers, pupils and parents must be told what it is, and allergy bullying should be treated seriously, like any other bullying. Schools must, under Section 100 of the Children and Families Act 2014, aim to ensure that all children with medical conditions, 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. Catering at school

As part of school's duty to support children with medical conditions, they must be able to provide safe food options to meet dietary needs including food allergy. Catering staff should be able to identify pupils with allergy and be able to provide them with safe meals. At Greenvale Primary School our children with allergies wear a yellow lanyard at lunch time so they are easily identified by the kitchen staff.

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. Schools can therefore identify whether a food product is safe for allergic pupils to eat.

School menus should be available for parents to view with the ingredients clearly labelled.

Handling allergens and preventing cross contamination

Ensure that catering staff keep in contact with food suppliers as ingredients may change.

Some product ingredient lists contain precautionary allergen labelling, i.e. "May contain". It is down to individual preference whether pupils consume products labelled as 'may contain', and this should be included on the Individual Healthcare Plan.

10. Risk assessments

A detailed risk assessment will enable schools to identify gaps in their systems and processes for keeping allergic children safe.

11. Sports

- **Activities at school**

All children with allergies and who have been prescribed AAls should take the adrenaline to the sports ground / hall with them. The teachers leading the sports sessions should all be first aid trained and this must include how to manage severe allergy and anaphylaxis.

- **Sports activities outside schools**

Children with allergies should have every opportunity to take part in out-of-school activities such as skiing trips and other foreign holidays, sports events hosted by other schools and educational visits to museums. Such activities will need careful planning and preparation, but there is no reason to exclude a child with allergies. A meeting with the child's parents will be necessary to ensure that everyone is happy with the arrangements. If the child is

allergic to a food, similar procedures need to be followed to those in operation at school to ensure that the child does not come into contact with the food.

If the child has been prescribed AAIs, at least one person trained in administering the device must accompany the school party. From the child's perspective, it is not advisable for a parent to accompany them on school trips. This should only happen as a last resort. It is a school's responsibility to have a staff member present who can support the child.

- **Sports events**

For sports events, it's advisable to ensure the PE teacher is fully aware of the situation and notifies the schools to be visited that a member of the team has an allergy when arranging the fixtures. Should another school feel they are not equipped to cater for the allergic child you could arrange for the child to take their own food.

12. Resources

The following resources designed by Allergy UK are aimed at school staff, parents and pupils with easy-to-understand information Factsheets and 'Top Tips' on managing allergies in school. Topics include Understanding Anxiety, Guidance for Early Years settings, Frequently Asked Questions and more.

- [Information for school staff](#)
- [Information for parents](#)
- [Information for older pupils](#)
- <https://www.anaphylaxis.org.uk/education/>

Allergy UK Resources

<https://www.allergyuk.org/back-to-school-campaign>

<https://www.allergyuk.org/information-and-advice/for-schools/school-allergy-action-group-resource-kit>

We're here to help

Allergy UK Helpline:

Providing support, advice and information for those living with allergic disease.

Monday - Friday, 9am-5pm

Call: 01322 619898 Email: info@allergyuk.org

www.anaphylaxis.org.uk

www.allergyuk.org

Anaphylaxis Campaign Helpline:

Supporting people at risk of severe allergies.

Monday to Friday 9am – 5pm

Call: 01252 542029 Email: info@anaphylaxis.org.uk





Schools Allergy Code

Allergic disease is the most common chronic condition in childhood. An allergic reaction occurs when a person's immune system is triggered by a substance that is usually considered harmless. Whilst most allergic reactions are mild, some can be very serious and cause anaphylaxis which is a life-threatening medical emergency.

The Code is not a set of rules and regulations but it is a guide to best practice in achieving a whole school approach to allergy safety and inclusion. It has been drawn up by the Benedict Blythe Foundation and The Allergy Team, with the backing of leading allergy clinicians and the Independent Schools' Bursars Association.

All schools are encouraged to use the Schools Allergy Code to ensure good allergy management in their setting. The Code and its accompanying Checklist are free resources.

Principles of good practice

1. **Take every allergy seriously** - allergic reactions are unpredictable and every child with a diagnosed allergy should be included in the measures outlined in the Code.
2. **Every child matters** - allergies are as unique as the children who have them. It is crucial that an individualised approach is adopted to implementing the Code, working with families and children to understand their experiences.
3. **Prioritise safety and inclusion over the 'status quo'** - responding to the needs of children with allergy can require finding new ways of doing things, with schools prioritising safety and inclusion every time.

Code guidance

1. **Take a whole-school approach**

Every member of the school community should understand allergy and their responsibility for reducing risk, from pupils and parents to staff members. Allergy management is not just the responsibility of the catering and medical team.

 - 1.1 Build the knowledge and skills of all staff through targeted training and education. This will include understanding risk reduction and the importance of inclusion, as well as first aid response to allergic reaction.
 - 1.2 Weave allergy awareness into classroom activities, for example lessons on nutrition and PSHE.



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