Allergen and Anaphylaxis Policy

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Document Author	Hannah Collier
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Contents

Introduction

Ruishton Church of England Primary School endeavours to ensure that all children with are treated fairly in school and not disadvantaged in any way. This policy sets out how we will support pupils with allergies to ensure they remain safe whilst taking part in school life.

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, Fish, Latex, Insect venom, Pollen and Animal Dander.

Aims

The purpose of this policy is to:

- Provide parents and carers with an overview of steps taken to minimise risk to pupils whilst at school or attending any school related activity
- To ensure staff are properly trained and prepared to recognise and manage serious allergic reactions should they arise
- Provide a consistent and coherent approach to allergen management across the school
- Align with the expectations of statutory guidance

Roles and Responsibilities

The named staff members responsible for coordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:

Hannah Collier (Headteacher)
Carly Anderson (SENCo)

Parent Responsibilities

- On entry to the school, it is the parent's responsibility to inform the school office staff/SENCo 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. 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. Individual pupil plans will be updated accordingly.

Staff Responsibilities

- **All staff** will complete anaphylaxis training. Training is provided on a yearly basis and on an ad-hoc basis for any new members of staff.
- 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.
- Staff designated to serve food (e.g. before and after school club, and lunch service) are expected to have completed training and be aware of ALL pupils in the school who have allergies.
- 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.
- SENCO will ensure that the up-to-date Allergy Individual Risk Assessment is kept with the pupil's medication and a copy will be held by the accompanying adults.
- It is the parent's responsibility to ensure all medication is in date however the School Designated First Aider will check medication kept at school on a termly basis and the school office will send a reminder to parents if medication is approaching expiry.
- The school 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.
- The Headteacher ensures that any reaction or near misses is recorded and reported internally or in accordance with RIDDOR.

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.
- Pupils who are trained and confident to administer their own AAIs will be encouraged to take responsibility for always carrying them on their person.

Allergy Action Plans

Allergy Individual Risk Assessments are designed to function as individual medical 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 not created by school. This is a national plan that has been agreed by the BSACI, Anaphylaxis UK and Allergy UK. T**he allergy action plans are designed to function as a medical care plan.**

Treatment

What to look for:
Symptoms usually come 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 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 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**
- 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.

Supply, Storage and Care of Medication

Depending on their level of understanding and competence, pupils will be encouraged to take responsibility for and to always carry their own two AAIs on them in a suitable bag/container.

The school will give pupils with allergies a red zip medical pouch marked 'Epi Pen'. This matches the school's epi-pen pouch and therefore makes it consistent for ease of identification for staff. Pupils can store this pouch inside a small, discrete bag if they wish. This will be noted on any individual care plan.

For younger children or those not ready to take responsibility for their own medication, this will be supported by class staff. Their anaphylaxis kit will kept within 5 minutes of them, not locked away and **accessible to all staff.**

Medication should be stored in a suitable container (Red Pouch) 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's Designated First Aider or class teacher 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.

Older children and medication
Older children, in UKS2, should, whenever possible, assume responsibility for their emergency kit under the guidance of their parents. However, symptoms of anaphylaxis can come on **very suddenly**, so school staff need to be prepared to administer medication if the young person cannot.

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 **First Aid** room.

School Auto-Adrenaline Injectors

Ruishton Primary School has purchased spare **AAI 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) or are experiencing anaphylaxis for the first time.

School holds **2** spare pens which are kept in the following location:

First Aid Room, Main Building

The pens are stored in a red, zipped pouch clearly marked 'Epi Pen' and mounted on the wall for ease of retrieval. It is **accessible and known to all staff.**

The Headteacher and Designated First Aider are responsible for checking the spare medication is in date on a half-termly basis and to replace as needed.

Written parental permission for use of the spare AAIs is included in the pupil's individual risk assessment.

In an emergency where a person is unresponsive, incapacitated, or unable to communicate, we will administer AAIs under the principle of implied consent, assuming a reasonable person would want life-saving medical intervention.

Training

The named staff members responsible for coordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:

Hannah Collier (Headteacher)
Carly Anderson (SENCo)

All staff will complete Allergy & Anaphylaxis Training for Schools 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

Ruishton School ensures that staff undertake a practical session using trainer devices through their First Aid training.

Inclusion and Safeguarding

Ruishton 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.

Catering

Ruishton Primary School is required to follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

School lunches are prepared and provided by The Oak Partnership Trust, using facilities at West Monkton C of E Primary School.

The school's menu is available for parents to view **3 weeks** in advance with all ingredients listed

The office administrator will inform the catering staff of pupils with food allergies. An annual report is provided (updated as necessary) and stored in the school kitchen, showing all photographs and details of all pupils with allergies. In addition to this, the school uses a colour coded wristband system for lunches, so that pupils with allergies can be clearly identified. Daily reports are also printed for staff supervising in the hall and serving lunch to list lunch choices.

Parents/carers are encouraged to liaise with the school office administrator and SENCo 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.
- The pupil or adult supporting are taught to check with catering staff, before serving food to ensure their lunch choice is safe.
- Where food is provided by the school, staff are trained about how to understand allergens and instructed about measures to prevent cross contamination during the handling,

preparation and serving of food.

- All other food given to pupils requires parents to provide permission on Arbor at the beginning of each academic year. This also includes use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events).

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 will be given every opportunity to attend sports trips to other schools or venues. The school will ensure that the teachers or staff supervisor are fully aware of the situation. The school/venue being visited will be notified that a member of the school 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.

The school will need parental co-operation with any special arrangements required.

Allergy Awareness

Ruishton Primary School supports the approach advocated by Anaphylaxis UK towards nut bans/nut free schools. We do 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. We therefore request that parents make themselves aware of the many allergens and support inclusivity by carefully managing what food items they send in with their child.

We believe this '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.

Risk Assessment

Ruishton 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.

Review Mechanisms

This policy will be reviewed annually by SLT, in consultation with the Local School Committee

Related Policies

- Equality and Diversity Policy

Legislation and Guidance

This policy is compliant with all relevant UK government legislation and guidance, including:

- Schools Allergy Safety Bill 2026
- The Equality Act 2010

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