



Allergen and Anaphylaxis Policy

Approved by: C. Scott
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Signed by: Roy Fisher (Chair of Governors) Signed by: Jonathan Clucas (Head Teacher)

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Statement of intent

Layton Primary School strives to ensure the safety and wellbeing of all members of the school community. For this reason, this policy is to be adhered to by all staff members, parents and pupils, with the intention of minimising the risk of allergic reactions and anaphylaxis occurring whilst at school.

In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the school in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The school does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

1. Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Children and Families Act 2014
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2023) 'Allergy guidance for schools'

2. Definitions

For the purpose of this policy:

Allergy – is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.

Allergen – is a normally harmless substance that triggers an allergic reaction for a susceptible person.

Allergic reaction – is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms: hives, generalised flushing of the skin, itching and tingling of the skin, tingling in and around the mouth, burning sensation in the mouth, swelling of the throat, mouth or face, feeling wheezy, abdominal pain, rising anxiety, nausea and vomiting, alterations in heart rate and feeling of weakness.

Anaphylaxis – is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction.

Roles and responsibilities

The governing board is responsible for:

- Ensuring that policies, plans, and procedures are in place to support pupils with allergies and those who are at risk of anaphylaxis and that these arrangements are sufficient to meet statutory responsibilities and minimise risks.
- Ensuring that the school's approach to allergies and anaphylaxis focusses on, and accounts for, the needs of each individual pupil and individual members of staff.
- Ensuring that staff are properly trained to provide the support that pupils need, and that they receive allergy and anaphylaxis training as per this policy.
- Monitoring the effectiveness of this policy and reviewing it on an 3 yearly basis, and after any incident where a pupil experiences an allergic reaction.

The headteacher is responsible for:

- The development, implementation and monitoring of this policy and related policies.
- Ensuring that parents are informed of their responsibilities in relation to their child's allergies.

- Ensuring that all relevant risk assessments, e.g. to do with food preparation, have been carried out and controls to mitigate risks are implemented.
- Ensuring that all designated first aiders are trained in the use of adrenaline auto-injectors (AAIs) and the management of anaphylaxis.
- Ensuring that all staff members are provided with information regarding allergic reactions and anaphylaxis, including the necessary precautions and how to respond.
- Ensuring that kitchen staff are aware of pupils' allergies and act in accordance with the school's policies regarding food and hygiene, including this policy.

The SENCO is responsible for:

- working alongside relevant staff members and parents in order to develop Health Care Plan(s) (HCP) for pupils with allergies, ensuring that any necessary support is provided and the required documentation is completed, including risk assessments being undertaken.
- Working alongside staff members with allergies to write risk assessments for anyone with known allergies, ensuring that any necessary support is provided within the workplace.
- Ensuring relevant staff members sign consent to use the spare AAI.
- overall responsibility for ensuring that Health Care Plan(s) are implemented, monitored and communicated to the relevant members of the school community.

The school nurse is responsible for:

- Providing guidance, and confirming, the content of an Health Care Plan (HCP).
- Accessing a child's medical information, on behalf of the school, in order to fulfil our safeguarding responsibilities (no permission required).
- Seeking up-to-date medical information about each pupil via their medical records (parental permission required).
- Contacting parents for required medical documentation regarding a pupil's allergy.

All staff members are responsible for:

- Attending relevant training regarding allergens and anaphylaxis.
- Being familiar with and implementing pupils' individual health care plans (and/or HCPs) as appropriate.
- Responding immediately and appropriately, in accordance with the HCP, in the event of a medical emergency.
- Reinforcing effective hygiene practices, including those in relation to the management of food.
- Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen.
- Informing parents of any use of food products that will take place in school, including curriculum and after-school events.
- Ensuring that items brought in from home, are not consumed on school premises but sent home such that it is parental responsibility to decide if the food is consumed.

All parents are responsible for:

- Notifying the school of their child's allergens, the nature of the allergic reaction, what medication to administer, specified control measures and what can be done to prevent the occurrence of an allergic reaction.
- Providing medical evidence of any of the above medical condition(s).
- Giving permission for the school nurse to access medical reference to gain medical evidence of allergies, allergens and required administration of prescribed medications.
- Providing the school with written medical documentation, including instructions for administering medication as directed by the child's doctor.
- Working with school, specifically SENDCO and/or school nurse to write the child's Health Care Plan. This will be signed by the parent and reviewed on an annual basis or when there is any change in medical condition and/or procedure.
- Signing permission for the use of a spare Auto adrenaline injector (AAI), as provided by school (these will be saved on the staff's Arbor profile).
- If a child is prescribed any medication, it is the parent's responsibility to provide evidence of the dosage and sign an 'Administering Medication Form' at the school office before this medicine can be administered.
- Keeping the school up-to-date with their child's medical information and provide medical proof of any changes regarding their child's medical needs.
- If the child is prescribed an AAI, it is the parent's responsibility to ensure that it is in date.
- Raising any concerns they may have about the management of their child's allergies with the classroom teacher and/or any member of staff.
- If their child attends a club, externally provided within the school grounds, it is parent's responsibility to inform the club provider e.g. Taekwondo and Holiday Club provision

All pupils are encouraged to, to the best of their ability:

- To avoid food which they know they are allergic to, as well as any food with unknown ingredients.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown, or have come into contact with an allergen.

3. Food allergies

Parents will provide the school with medical evidence of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication to be administered. Parents need to provide medical evidence from the child's GP, or the school nurse will check the child's medical records to confirm medical proof (see above for parent's responsibilities).

Information regarding all pupils' food allergies will be collated and this will be passed on to the school's catering service. A photograph of the child and their allergens are listed in the KS1 Hall cupboard and KS2 kitchen.

The school's catering service will ensure that there are always dairy-, nut- and gluten-free options available for pupils with allergies and intolerances.

Learning activities which involve the use of food, such as Design Technology lessons, will be planned in accordance with pupils' HCP/ACPs, taking into account any known allergies of the pupils involved. This is the class teacher's responsibility to provide an alternative product such that the child can be included in the activity.

4. Food allergen labelling

The school will adhere to allergen labelling rules for pre-packed food goods, in line with the Food Information (Amendment) (England) Regulations 2019, also known as Natasha's Law.

All Lancashire County Council kitchen staff follow procedures in accordance with Lancashire County Council.

Any abnormalities in labelling will be reported to the kitchen manager immediately, who will then contact the relevant supplier where necessary.

The kitchen manager will be responsible for monitoring food ingredients, packaging and labelling on a daily basis and will contact the supplier immediately in the event of any anomalies.

Changes to ingredients and food packaging

The school will ensure that communication with suppliers is robust and any changes to ingredients and/or food packaging are clearly communicated to kitchen staff and other relevant members of staff. This is the responsibility of LCC catering service.

Following any changes to ingredients and/or food packaging, all associated documentation will be reviewed and updated as soon as possible.

5. Medical attention and required support

Once a pupil's allergies have been identified, a meeting will be set up between the pupil's parents and the SENCO. The SENCO will send all Health Care Plans to the school nurse for verification before they are signed by the parent/carer.

All medical attention, including that in relation to administering medication, will be conducted in accordance with the Administering Medication Policy and the First Aid Policy.

Parents will provide the school with any necessary medication, ensuring that this is clearly labelled with the pupil's name, class, expiration date and instructions for administering it.

Pupils will not be able to attend school or educational visits without any life-saving medication that they may have, such as AAI's.

6. Adrenaline auto-injectors (AAIs)

Pupils who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.

Under The Human Medicines (Amendment) Regulations 2017 the school is able to purchase AAI devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working.

The school will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy.

The school will purchase AAIs in accordance with age-based criteria, relevant to the age of pupils at risk of anaphylaxis, to ensure the correct dosage requirements are adhered to. These are as follows:

- For pupils under age 6: 0.15 milligrams of adrenaline
- For pupils aged 6-12: 0.3 milligrams of adrenaline

Spare AAIs are stored:

- In KS1 corridor on the wall (next to the disabled toilet) and KS2 First Aid Room
- On the AAI, there are instructions on how to use the device(s).
- On the AAI, there are instructions on the storage of the device(s).
- On the AAI, there are manufacturer's information.

When AAIs are purchased, the school office record date of purchase, the batch number and expiry date, alongside a reminder of when they need replacing and office staff set a calendar reminder for replacing the injectors.

Alongside the spare AAIs, the signed permission of pupils to whom the AAI can be administered to will be stored.

Pupils who have prescribed AAI devices:

- ✓ When the child is in the classroom, the AAI is stored in an accessible location i.e. in the cupboard in a named green first aid bag.
- ✓ When the child is outside of the classroom, it is an adult's responsibility to carry the first aid bag containing the AAI. E.g. assembly, clubs, P.E. lessons, all playtimes.

Spare AAIs are not located more than five minutes away from where they may be required.

All staff have access to AAI devices, but these are out of reach and inaccessible to pupils – AAI devices are not locked away where access is restricted.

The SENCO is responsible for overseeing the use of spare AAIs, its monitoring and implementation, and for maintaining the Register of AAIs:

Any used or expired AAIs are disposed of after use in accordance with manufacturer's instructions.

Used AAIs may also be given to paramedics upon arrival, in the event of a severe allergic reaction, in accordance with this policy.

A sharps bin is utilised where used or expired AAIs are disposed of on the school premises.

Where any AAIs are used, the following information will be recorded on the AAI Record:

- Where and when the reaction took place
- How much medication was given and by whom

This is recorded on the 'Administration of Medication Form'. A paper copy of this is held in the school office.

7. Access to spare AAI

A spare AAI can be administered as a substitute for a pupil's own prescribed AAI, if this cannot be administered correctly, without delay.

Spare AAIs are only accessible to pupils for whom medical authorisation and written parental consent has been provided – this includes pupils at risk of anaphylaxis who have been provided with a medical plan confirming their risk, but who have not been prescribed an AAI.

Consent will be obtained as part of the introduction or amendment of a pupil's Health Care Plan and/or with the implementation of this policy.

If consent has been given to administer a spare AAI to a pupil or relevant staff member. This will be stored in the GoogleDrive shared drive, their Arbor profile and a paper copy will be stored with the AAI.

The school uses a register of pupils (Register of AAIs) to whom spare AAIs can be administered – this includes the following:

- Name of pupil
- Class
- Known allergens
- Risk factors for anaphylaxis
- Whether medical authorisation has been received
- Whether written parental consent has been received
- Dosage requirements

Parents are required to provide consent on an annual basis as per their signature provided on the review of the child's Health Care Plan.

Parents can withdraw their consent for school to administer an AAI at any time which would result in removal, or amendment, of the Health Care Plan. To do so, they must write to the headteacher.

SENCO checks the register is up-to-date on an annual basis.

SENCO will also update the register relevant to any changes in consent or a pupil's requirements.

Copies of the register is stored in Google Drive which is accessible to all staff members.

8. Extra-Curricular External Club Provision

It is the school's responsibility to ensure information regarding a child's medical needs is shared with external club provision via the club register. The SENCO will be responsible for keeping the medical records up to date and sharing this with office staff. There will always be a member of Layton Primary School staff present at the club.

9. School trips

The headteacher will ensure a risk assessment is conducted for each school trip to address pupils with known allergies attending. All activities on the school trip will be risk assessed to see if they pose a threat to any pupils with allergies and alternative activities will be planned where necessary to ensure the pupils, and staff, are included.

A designated risk assessment is written for any child with a Health Care Plan and signed by parents prior to the visit. This risk assessment is subject to the usual approval via Evolve.

A designated first aider will be available on all school trips.

If the pupil has been prescribed an AAI, at least one adult trained in administering the device will attend the trip. The pupil's medication will be taken on the trip and stored securely – if the pupil does not bring their medication, they will not be allowed to attend the trip.

A member of staff will be assigned responsibility for ensuring that the pupil's medication is carried at all times throughout the trip.

10. Staff training

Designated First Aiders will be trained in how to administer an AAI, and the sequence of events to follow when doing so. This is part of the first aid training qualification that is updated every 2 years.

Where possible, all school staff will have AAI refresher training annually.

In accordance with the First Aid Policy staff members will receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

Designated First Aiders will be taught to:

- Recognise the range of signs and symptoms of severe allergic reactions.
- Respond appropriately to a request for help from another member of staff.
- Recognise when emergency action is necessary.
- Administer AAIs according to the manufacturer's instructions.
- Locate the spare AAI as determined by the child's age.
- Make appropriate records of allergic reactions.

All staff members will:

- Be trained to recognise the range of signs and symptoms of an allergic reaction.
- Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild to moderate symptoms.
- Understand that AAIs should be administered without delay as soon as anaphylaxis occurs.
- Understand how to check if a pupil is on the Register of AAIs.
- Understand how to access AAIs and spare AAIs.
- Understand who the designated members of staff are, and how to access their help.

- Understand that it may be necessary for staff members other than designated staff members to administer AAIs, e.g. in the event of a delay in response from the designated staff members, or a life-threatening situation.
- Be aware of how to administer an AAI should it be necessary.
- Be aware of the provisions of this policy.

11. Dissemination of Information to Staff

The school will arrange to share the details of children with HCP on an annual basis or when they are admitted to school. This will be part of the September INSET and/or as and when they are admitted to Layton Primary School.

The relevant members of staff purchasing products will mitigate the risk by ensuring products containing certain allergens are not purchased. Substitutes for products will not be accepted.

12. Mild to moderate allergic reaction

Mild to moderate symptoms of an allergic reaction include the following:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

If any of the above symptoms occur in a pupil, the nearest adult will stay with the pupil and refer to their HCP to determine appropriate next steps.

The pupil's parents will be contacted immediately if a pupil suffers a mild to moderate allergic reaction, and **informed** if any medication has been administered.

13. Undiagnosed Reactions to Allergens

In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

For mild to moderate allergy symptoms, the pupil's parents will be contacted for permission to administer antihistamine. The pupil will be monitored closely by a designated First Aider to ensure the reaction does not progress into anaphylaxis.

14. Managing anaphylaxis according to a Child's Health Care Plan (HCP)

In the event of anaphylaxis, the nearest adult will lay the pupil flat on the floor and try to ensure the pupil suffering an allergic reaction remains as still as possible; if the pupil is feeling weak, dizzy, appears pale and is sweating their legs will be raised. A designated staff member will be called for help and the emergency services contacted immediately – clearly stating that the

case is anaphylaxis. The designated First Aider member will administer an AAI to the pupil, if the pupil is unable to do so themselves. After administering the prescribed AAI, the spare AAI will be retrieved from the designated area, (in case a second AAI dose after 5 minutes is required).

A designated staff member will contact the pupil's parents as soon as is possible.

Where there is any delay in contacting designated First Aider, the nearest staff member will administer the AAI.

If necessary, other staff members may assist the designated First Aiders with administering AAI's.

A member of staff will stay with the pupil until the emergency services arrive – the pupil will remain lying flat with legs raised. If the pupil's condition deteriorates after initially contacting the emergency services, a second call will be made to ensure an ambulance has been dispatched.

A member of SLT will be contacted immediately, as well as a suitably trained individual, such as a first aider.

The pupils' condition will continuously be monitored, and if the pupil stops breathing, a suitably trained member of staff will administer CPR.

If there is no improvement after five minutes, a further dose of adrenaline will be administered using the relevant spare AAI, if available.

Upon arrival of the emergency services, the following information will be provided:

- Any known allergens the pupil has
- The possible causes of the reaction, e.g. certain food
- The time the AAI was administered – including the time of the second dose, if this was administered

Any used AAI's will be given to paramedics.

Staff members will ensure that the pupil is given plenty of space, moving other pupils to a different room where necessary.

Staff members will remain calm, ensuring that the pupil feels comfortable and is appropriately supported & reassured.

A member of staff will accompany the pupil to hospital in the absence of their parents.

If a pupil is taken to hospital by ambulance, two members of staff will accompany them.

A copy of the Register of AAI's will be held on GoogleDrive & Arbor, Health Care Plans, Register of AAI's and a printed copy will be located in the same location as the AAI's.

Following the occurrence of a significant allergic reaction, the SLT, in conjunction with the school nurse, will review the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.

15. Monitoring and review

The headteacher is responsible for reviewing this policy every three years.

The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported to the headteacher immediately.

Following each occurrence of an allergic reaction, this policy and pupils' HCP will be updated and amended as necessary.

Signed: _____ (Headteacher)

Date: _1.9.24__

Policy review date: _September 2025

Appendix 1: Permission to administer spare AAI



Layton Primary School

Headteacher: Mr Jonathan Clucas
Deputy Headteacher: Mrs Clare Scott

Spare AAIs

I understand that the school may purchase spare AAIs to be used in the event of an emergency allergic reaction. I also understand that, in the event of my child's prescribed AAI not working, it may be necessary for the school to administer a spare AAI, but this is only possible with medical authorisation and my written consent.

In light of the above, I provide consent for the school to administer a spare AAI to my child.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Name of parent	
Relationship to child	
Contact details of parent	
Parental signature	



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