Forefield Community Infant & Nursery School



Pupil Allergy Policy

Approved by:	Beverley Roberts	**Date:** September 2026
Next review due by:	September 2027	

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1. Statement of Intent

Forefield Community Infant and Nursery School is committed to promoting a whole-school approach to health, wellbeing and the safe management of allergies. We strive to create an inclusive environment where pupils with allergies can participate fully and safely in all aspects of school life.

We recognise that allergies can pose significant health risks and therefore take all allergies seriously. Through effective procedures, staff training and partnership working with parents, carers and healthcare professionals, we will:

- minimise the risk of exposure to allergens within the school environment;
- promote age-appropriate self-management and independence;
- develop awareness and avoidance strategies;
- maintain effective emergency response procedures;
- ensure pupils with allergies are supported, safeguarded and fully included in school life.

School recognises its duties under the Equality Act 2010 and will make reasonable adjustments where required to support pupils whose allergy constitutes a disability.

2. Aims

This policy outlines Forefield Community Infant and Nursery School's approach to allergy management, including arrangements to reduce the risk of allergic reactions and the procedures to be followed in the event of an emergency. It also explains how the school supports pupils with allergies to ensure their safety, wellbeing and inclusion.

This policy applies to all staff, pupils, parents/carers, governors, volunteers and visitors and should be read alongside the school's Medical Needs Policy, Safeguarding Policy and First Aid Policy.

This policy aims to:

- establish a clear and consistent approach to allergy management across the school;
- outline procedures for preventing, identifying and responding to allergic reactions, including anaphylaxis;
- ensure pupils with allergies can participate safely and fully in school life;
- promote allergy awareness amongst the whole school community;
- ensure compliance with relevant health, safety and food information legislation;
- work collaboratively with catering providers to ensure robust systems for menu planning, food labelling, food storage and the prevention of cross-contamination;
- provide appropriate training to staff regarding allergy awareness, symptom recognition and emergency response procedures;
- develop pupils' understanding of allergies through the curriculum, including PSHE education;
- promote an inclusive approach that recognises and respects the diverse dietary and cultural needs of pupils and families.

3. Context

Food allergies are becoming increasingly common amongst children both in the UK and internationally. In some cases, allergic reactions can be severe and potentially life-threatening.

Approximately 5-8% of children in the UK are living with a food allergy, and it is likely that most classrooms will include at least one pupil with an allergy. Research indicates

that around 20% of severe allergic reactions to food occur whilst children are in school.

Anaphylaxis is a serious allergic reaction that can affect the airway, breathing and circulation. Without prompt treatment, it can become life-threatening. As reactions can occur unexpectedly, all staff must be able to recognise the signs of an allergic reaction and know how to respond appropriately.

The school has a legal duty to support pupils with medical conditions, including allergies, and to ensure that appropriate arrangements are in place to safeguard their health and wellbeing.

3.1 Legislation

This policy is based on the Department for Education (DfE)'s guidance on allergies in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

3.2 Allergy Awareness and Nut Bans

Forefield Community Infant and Nursery School adopts a whole-school allergy awareness approach rather than implementing a blanket ban on specific allergens.

Whilst nuts are a common trigger for allergic reactions, they are only one of many potential allergens. It is not possible to guarantee a completely allergen-free environment. Instead, the school focuses on developing a culture of awareness, education and shared responsibility to reduce risk and support pupils effectively.

This approach ensures that all members of the school community:

- understand the seriousness of allergies;
- recognise the signs and symptoms of allergic reactions;
- know how to reduce the risk of allergen exposure;
- understand emergency procedures;
- contribute to creating a safe and inclusive environment for all pupils.

3.3 What is an Allergy?

An allergy is an immune system response to a substance that is normally harmless. Exposure to an allergen can trigger the release of chemicals such as histamine, resulting in an allergic reaction.

Symptoms can range from mild reactions, such as itching, sneezing, rashes or swelling, to severe reactions known as anaphylaxis.

Anaphylaxis is a medical emergency that requires immediate treatment. Symptoms may include breathing difficulties, swelling of the throat or tongue, dizziness, collapse and loss of consciousness.

Forefield Community Infant and Nursery School recognises that allergic reactions are unpredictable and is committed to ensuring all allergies are treated seriously and managed appropriately.

4. 4. Roles and Responsibilities

Trustees and Governing Board

The trustees and governing board will:

- ensure there is a strategic approach to allergy management and emergency response;
- delegate operational responsibility for implementation of this policy to the Headteacher;
- monitor the effectiveness of allergy management arrangements;
- ensure adequate resources are available to support allergy management;
- ensure appropriate training is provided for staff;
- ensure suitable information regarding allergy management is available to parents and carers;
- ensure robust safeguarding arrangements are in place for pupils with allergies.

Headteacher

The Headteacher will:

- ensure, so far as is reasonably practicable, that pupils with allergies can participate safely and fully in all aspects of school life;

- promote an inclusive environment free from discrimination or bullying related to medical needs;
- ensure all staff receive appropriate information, training and updates regarding allergy management;
- maintain effective communication between school staff, healthcare professionals, catering providers and families;
- ensure allergy information is accurately recorded and reviewed annually or sooner if required;
- oversee the development and review of Individual Healthcare Plans and Allergy Action Plans;
- ensure sufficient trained staff are always available;
- ensure appropriate risk assessments are completed for visits, trips and activities;
- ensure emergency procedures are understood and implemented effectively;
- report to governors on the effectiveness of allergy management arrangements.

Allergy Leads

The nominated Allergy Leads are **Claire Gilroy** and **Alison Sim**.

The Allergy Leads will:

- Ensure compliance with all relevant legislation, guidance, best practice and school procedures relating to allergy management.
- Report to the Headteacher on matters relating to pupils with allergies and the implementation of this policy.
- Work closely with catering providers to support pupils with known allergies and facilitate meetings between parents/carers and catering staff where required.
- Liaise with parents/carers to develop appropriate risk assessments and ensure effective arrangements are in place for allergy management, risk reduction and emergency response.
- Ensure that pupils with diagnosed allergies have an up-to-date Allergy Action Plan (AAP), wherever possible, and that copies are accessible to relevant staff. Where a pupil's healthcare needs relate solely to allergy, the Allergy Action Plan may serve as the Individual Healthcare Plan where appropriate.

- Ensure prescribed medication is stored appropriately, in a clearly labelled bag and readily accessible in line with school procedures.
- Promote and maintain allergy awareness across the school community.
- Maintain accurate records of allergy and dietary information for relevant pupils.
- Ensure allergy information is shared with catering providers and that parents/carers are aware of procedures for updating dietary requirements.
- Be trained in the administration of Adrenaline Autoinjectors (AAIs) and competent in supporting pupils in accordance with their Individual Healthcare Plan (IHP) and/or AAP.
- Support staff in planning educational visits, extracurricular activities and school events to minimise the risk of allergen exposure.
- Inform the Estates Management and Operations Team when a spare or emergency AAI has been administered.
- Verify any reported changes to a pupil's allergy status before amending records.
- Ensure emergency medical information and anaphylaxis guidance are appropriately displayed and shared with staff where required.
- Review and update the Allergy Management Policy regularly.

Estates Manager/ Operations Team

The Estates Manager/ Operation Team will:

- Ensure the school maintains an adequate supply of in-date spare AAIs in accordance with current guidance.
- Ensure spare AAIs are stored securely, at room temperature, readily accessible and known to all staff.
- Monitor medication expiry dates and confirm that all AAIs held on site are within date and of the correct dosage.
- Arrange for the safe disposal of expired or used AAIs in accordance with relevant regulations.

All Staff

All staff are responsible for supporting the effective implementation of this policy and will:

- Follow all relevant legislation, guidance, best practice and school procedures relating to allergy management.
- Complete allergy and anaphylaxis training and maintain confidence in responding to allergy-related emergencies.
- Promote allergy awareness amongst pupils both in the classroom and throughout the wider school environment.
- Encourage pupils with allergies to develop age-appropriate independence and allergen avoidance strategies.
- Support pupils in understanding how they can help keep their peers safe (e.g. FAB Friend Alert Buddy).
- Be aware of pupils in their care with known allergies and understand the procedures to follow in an emergency.
- Exercise caution when planning and delivering activities involving food or other potential allergens.
- Consider the use of allergens carefully during lesson planning and enrichment activities.
- Ensure that pupils attending educational visits have access to required medication and that emergency procedures are in place.
- Carry relevant emergency medication and documentation during off-site activities. This is kept in a green pouch.
- Contact emergency services immediately where anaphylaxis is suspected, clearly stating that anaphylaxis is suspected, and follow emergency medical advice.
- Record and report all allergic incidents and the administration of any emergency medication in accordance with school procedures.

Parents/Carers

Parents/carers are responsible for:

- Informing the school of their child's allergies and any associated medical conditions.
- Providing accurate and up-to-date information regarding medical needs, dietary requirements, prescribed medication and previous allergic reactions.
- Inform the school promptly of any changes to their child's condition or allergy management arrangements.

- Supporting their child in developing age-appropriate allergy awareness and self-management skills.
- Providing an Allergy Action Plan (AAP) completed by an appropriate healthcare professional.
- Working with the school and healthcare professionals to develop an Individual Healthcare Plan (IHP), where required.
- Providing all prescribed medication and ensuring it is clearly labelled and in date.
- Supplying an anaphylaxis kit containing two in-date AAIs and any additional prescribed medication, including inhalers or antihistamines where appropriate.
- Replacing medication immediately following use or expiry.
- Providing suitable food, where necessary, to meet their child's dietary needs and following the school's guidance regarding food brought into school.
- Meeting with catering staff, where required, to discuss specific dietary requirements.
- Familiarising themselves with the school's Allergy Management Policy and procedures.
- Maintaining effective communication with the school to support the safe management of their child's allergies.

Pupils with Allergies

Where appropriate and in accordance with their age and understanding, pupils with allergies are encouraged to:

- Develop an awareness of their allergy and understand how to keep themselves safe.
- Understand their allergens, symptoms and prescribed medication.
- Avoid sharing food or drinks with others.
- Seek support from an adult when checking food ingredients or labels.
- Avoid consuming food with unknown ingredients.
- Carry their prescribed medication in line with their healthcare plan and school procedures.
- Develop an understanding of how and when their AAI should be used.

- Recognise the signs and symptoms of an allergic reaction.
- Inform a member of staff immediately if they believe they are experiencing an allergic reaction.

Pupils Without Allergies

Pupils without allergies are encouraged to:

- Develop an age-appropriate understanding of allergies and the potential risks they may pose to others.
- Demonstrate respect and consideration towards peers with allergies.
- Support the school's allergy-aware culture through learning in PSHE, assemblies and wider curriculum opportunities.
- Follow school expectations regarding food sharing and allergen safety.

5. Training

Forefield Community Infant and Nursery School is committed to ensuring that all staff have the knowledge, skills and confidence required to support pupils with allergies and respond effectively in an emergency.

All staff will receive appropriate allergy awareness training, including regular updates as required. Training will include practical instruction in the use of Adrenaline Autoinjectors (AAIs) using trainer devices where available.

Training will cover:

- common allergens and allergy triggers;
- recognising the signs and symptoms of allergic reactions and anaphylaxis;
- the importance of early intervention and when to call emergency services;
- the safe administration of emergency medication, including AAIs;
- strategies to reduce the risk of allergen exposure;
- roles and responsibilities in relation to allergy management;
- associated medical conditions, including asthma;
- the use and management of Allergy Action Plans (AAPs) and Individual Healthcare Plans (IHPs);
- recording and reporting procedures following an allergic reaction.

All new staff, volunteers and regular visitors will receive allergy awareness information as part of their induction programme.

6. Assessing Risk

The school recognises that effective risk assessment is essential in reducing the likelihood of exposure to allergens and ensuring the safety of pupils with allergies.

Individual risk assessments will be completed where appropriate for pupils at risk of allergic reactions or anaphylaxis. Risk assessments will consider the pupil's specific allergens, severity of reaction, emergency procedures and reasonable adjustments required to ensure full participation in school life.

Risk assessments will be undertaken for activities including, but not limited to:

- cooking and food preparation activities;
- science investigations involving food products;
- arts and crafts activities using food packaging or allergenic materials;
- educational visits and residential experiences;
- animal handling experiences;
- special events, celebrations and fundraising activities involving food;
- visits involving animals, including guide and assistance dogs.

Risk assessments will be reviewed regularly and whenever there is a significant change to the pupil's medical needs or school provision.

7. Managing Risk

7.1 Supply, Storage and Care of Medication

The school encourages pupils, where age and understanding allow, to develop independence in managing their allergy medication. However, the safety and accessibility of medication will always remain a priority.

For younger pupils and those who are unable to manage their own medication independently, staff will ensure medication is readily available and accompanies the pupil throughout the school day.

Each pupil's medication will be stored in a clearly labelled container and will typically contain:

- Two prescribed AAIs (e.g. EpiPen® or Jext®);

- an up-to-date Allergy Action Plan;
- prescribed antihistamine medication where indicated;
- prescribed asthma inhaler where indicated;
- any additional medication identified within the pupil's healthcare plan.

Medication Monitoring

Parents and carers are responsible for ensuring medication provided to school is clearly labelled, in date and replaced before expiry.

The school's designated Allergy Leads will undertake regular checks of all allergy medication and notify parents where replacement medication is required.

Storage

All AAIs will be stored:

- at room temperature;
- away from direct sunlight and temperature extremes;
- in locations that are secure, clearly identified and easily accessible to staff;
- in accordance with manufacturer guidance.

Used or expired AAIs will be given to the paramedics.

7.2 Spare Adrenaline Autoinjectors (AAIs)

The school maintains a supply of emergency spare AAIs in accordance with national guidance and legislation.

Spare AAIs are stored in designated locations within the school (dining hall and school office) and are accessible to members of staff within five minutes in an emergency. The location of spare AAIs is communicated to all staff as part of induction and ongoing training.

The availability of spare AAIs provides an additional safeguard but does not replace the requirement for pupils prescribed AAIs to have their own medication available.

7.3 Hygiene Procedures

To minimise the risk of allergen exposure, the school maintains high standards of hygiene.

The school will ensure that:

- pupils wash their hands before and after eating;
- food is not shared between pupils;
- pupils use their own clearly identifiable water bottles;
- tables and surfaces used for eating or food preparation are cleaned thoroughly after use;
- careful consideration is given to seating arrangements where necessary to minimise risk.

7.4 Catering Arrangements

The school works closely with its catering provider to ensure the safe provision of food for pupils with allergies.

The catering provider will:

- comply with current food information and allergen legislation;
- maintain accurate allergen information for all menu items;
- implement procedures to prevent cross-contamination;
- ensure staff receive appropriate allergy awareness training;
- identify pupils with allergies through established systems and processes.

Parents and carers are encouraged to meet with the Catering Manager to discuss individual dietary requirements where necessary.

The school menu is available for parents/carers to access via School Grid, enabling meals to be ordered in advance. Full ingredient information is provided, and allergens are clearly identified. The catering team is committed to providing safe and appropriate meal options that meet the dietary needs of pupils with allergies.

The Allergy Leads will ensure that parents/carers of pupils with food allergies have informed the Catering Manager of their child's dietary requirements.

Allergy, dietary and food intolerance information is recorded on each pupil's profile on the catering iPad. When a pupil selects their name on the dining hall system, their pre-ordered meal is displayed alongside any recorded allergies, dietary requirements or food intolerances and is colour coded so staff can see the difference between allergies and dietary requirements. Younger pupils are supported by an adult to ensure the correct profile is selected.

A separate school record of pupils with allergies, dietary requirements and food intolerances is maintained to ensure information remains accessible should the electronic system become unavailable.

Pupils with allergies are provided with a red tray at lunchtime. This enables catering and supervisory staff to readily identify pupils with dietary requirements and ensure appropriate meals are served.

Pupils with allergies meals are prepared with their allergies considered and plated onto red trays prior to children entering the dining hall. When the child gets to the server, the server will collect the meal and check the meal ingredients against the child's allergies listed on the iPad. Meals are prepared in separate containers and clearly labelled so that there is no cross contamination between foods before being served. 1 member of staff serves all of the meal to avoid any miscommunication between servers.

Parents/carers are encouraged to meet with the Catering Manager to discuss any specific dietary needs or concerns relating to their child.

Catering staff receive appropriate allergy awareness training and can identify and support pupils with allergies and special dietary requirements. They follow established food hygiene and allergy management procedures, including measures to prevent cross-contamination during food preparation, handling and service.

The school adheres to Department of Health guidance and best practice by ensuring that:

- Lunch boxes and drinks bottles provided by parents/carers for pupils with allergies are clearly labelled with the pupil's name.
- Staff involved in food preparation and service understand how to identify allergens and interpret food labelling information.
- Appropriate controls are in place to minimise the risk of cross-contamination.
- Food for pupils with allergies is prepared and served with particular care and, where appropriate, prepared separately from other meals.
- Food preparation areas, equipment and utensils are cleaned thoroughly using appropriate cleaning procedures before and after use.

Through close partnership working between parents/carers, school staff and the catering provider, the school seeks to ensure that all pupils can access safe and inclusive dining experiences.

7.5 Food Restrictions

Whilst the school cannot guarantee an allergen-free environment, reasonable measures are taken to reduce the risk of exposure to high-risk allergens.

Parents, carers and staff are asked to avoid sending foods containing high-risk allergens where possible, including:

- packaged nuts;
- peanut butter and nut-based spreads;
- nut-containing cereal or snack bars;
- nut-based sauces;
- foods containing sesame where identified as a significant risk.

The school reserves the right to take reasonable measures where food brought onto site presents a potential risk to pupils with severe allergies.

7.6 Insect Bites and Stings

Where pupils are known to be allergic to insect bites or stings, appropriate precautions will be taken.

When outdoors:

- pupils will be encouraged to wear suitable footwear and clothing;
- food and drinks will be covered where possible;
- staff will monitor identified risks within outdoor areas.

Any bites or stings will be managed in accordance with the school's First Aid procedures.

7.7 Animals

The school will consider the needs of pupils with animal allergies when planning activities involving animals.

Appropriate control measures may include:

- restricting direct contact with animals;
- adapting activities to ensure participation;
- ensuring thorough handwashing following animal contact;
- carrying out individual risk assessments where required.

7.8 Wellbeing and Emotional Support

The school recognises that living with a severe allergy can have an impact on a pupil's emotional wellbeing.

Pupils with allergies will be supported through:

- positive and inclusive classroom practice;
- regular pastoral support where appropriate;
- opportunities to discuss concerns with trusted adults;
- anti-bullying procedures.

Any behaviour relating to a pupil's allergy that may constitute bullying will be addressed in accordance with the school's Behaviour and Anti-Bullying Policies. Deliberate exposure of a pupil to an allergen, threatening behaviour relating to allergies, or intimidation concerning medical needs will be treated as a serious behavioural incident.

7.9 Educational Visits, Events and Off-Site Activities

No pupil will be excluded from an activity, visit or event solely because they have an allergy.

The school will ensure that:

- suitable risk assessments are completed;
- staff are aware of pupils' allergies and emergency procedures;
- medication and Allergy Action Plans always accompany pupils;
- sufficient trained staff are present;
- reasonable adjustments are made to enable full participation.

All educational visits and activities will be planned with due regard to the safety, wellbeing and inclusion of pupils with allergies.

7.10 Transition Arrangements

Allergy information, healthcare plans and risk assessments will be shared with relevant staff when pupils move between classes, year groups or educational settings to ensure continuity of support and safe management.

8. Procedures for Managing Allergic Reactions

8.1 Register of Pupils with Allergies

The school maintains an up-to-date register of pupils with diagnosed allergies and those prescribed AAIs.

The register includes:

- known allergens;
- identified risk factors;
- details of prescribed medication;
- emergency contact information;
- copies of relevant Allergy Action Plans;
- parental consent relating to emergency medication where applicable;
- pupil photographs to support rapid identification.

The register is stored securely but is readily accessible to staff responsible for responding to medical emergencies.

8.2 Responding to an Allergic Reaction

All staff are trained to recognise the signs and symptoms of allergic reactions and understand the school's emergency procedures.

Where an allergic reaction occurs, staff will:

1. Remain calm and reassure the pupil.
2. Assess the severity of the reaction.
3. Follow the pupil's Allergy Action Plan where available.
4. Administer prescribed medication as directed.
5. Seek support from a trained member of staff.
6. Contact parents/carers as appropriate.
7. Monitor the pupil closely until recovered or transferred to medical care.

Staff should not delay the administration of adrenaline if anaphylaxis is suspected. If in doubt, adrenaline should be administered and emergency services contacted immediately. If in doubt, give adrenaline.

Responding to Suspected Anaphylaxis

If anaphylaxis is suspected:

1. Administer the pupil's AAI without delay.

2. Call 999 immediately and state that **anaphylaxis is suspected**.
3. Follow emergency operator instructions.
4. If symptoms persist and medical advice supports it, administer a second AAI after the recommended interval.
5. Ensure the pupil is not left unattended.
6. Contact parents/carers as soon as possible.
7. Transfer care to attending paramedics upon arrival.

A member of staff will accompany the pupil until responsibility is transferred to a parent/carer or healthcare professional.

Any use of an AAI, whether prescribed or spare, will be recorded and reported in accordance with school procedures and sent with the paramedics.

8.3 Recording, Reporting and Learning from Incidents

The school will record all allergic reactions, anaphylaxis incidents, medication administration and allergy-related near misses (see appendix). Following any incident, the school will review circumstances, identify any lessons learned and implement appropriate changes to reduce future risk. Significant incidents will be reported and investigated in accordance with the school's health and safety procedures. These should be sent/ given to Claire Gilroy as Allergy Lead, and they will be saved onto the school's safeguarding system.

A **serious incident** is an event relating to an allergy where a person is harmed or placed at immediate and significant risk of harm. This may include an incident requiring the use of an adrenaline auto-injector, emergency medical treatment, urgent clinical intervention or attendance by emergency services.

A **near miss** is an event which did not result in harm but had the clear potential to do so. Examples may include:

- a pupil being given or coming into contact with a food containing a known allergen, but not developing symptoms;
- an allergen being present where it should have been excluded;
- a prescribed or spare adrenaline auto-injector not being immediately available when required;
- a pupil's allergy information not being communicated to a member of staff, catering staff or staff supervising an activity;
- an error in following a pupil's Individual Healthcare Plan or Allergy Action Plan.

Following a serious incident or near miss:

1. The immediate priority will be the safety and medical care of the pupil, including following their Allergy Action Plan/Individual Healthcare Plan and the school's emergency procedures.
2. The incident or near miss will be recorded as soon as reasonably practicable, including what happened, when and where it happened, the people involved, the allergen or suspected allergen, action taken and the outcome.
3. Parents/carers will be informed of the incident or near miss as soon as reasonably practicable.
4. The incident will be reported to the Headteacher and the member of the governing body with responsibility for allergy safety, in accordance with the school's reporting procedures.
5. Where required, the school will make any statutory or other required reports.
6. The Allergy Lead will review the incident with the relevant staff and consider whether changes are required to the pupil's Individual Healthcare Plan, risk assessment, allergy action plan, staff training, catering arrangements, communication arrangements or other school procedures.
7. Where changes are identified, these will be implemented and monitored to reduce the likelihood of a similar incident occurring again.
8. Significant incidents and near misses will be reviewed as part of the annual review of this policy.
9.

- The school will maintain an Allergy Incident and Near Miss Record. Records will be stored securely on CPOMS and within the allergy file, and handled in accordance with the school's data protection requirements. The record will be reviewed periodically by the Allergy Lead to identify recurring issues, trends and opportunities for improvement.
- The school will consider reports of allergy incidents or near misses made by parents/carers, including where symptoms or the impact of exposure become apparent after the pupil has left school.

Appendix I - First Aid for Anaphylaxis poster

FIRST AID FOR ANAPHYLAXIS

Recognise the Signs of Anaphylaxis...

A Airways

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

B Breathing

- Difficult or noisy breathing
- Wheeze or persistent cough

C Circulation

- Persistent dizziness
- Pale or floppy
- Suddenly sleepy
- Collapse/unconscious

An allergic reaction can escalate to anaphylaxis which is potentially life-threatening.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

ANAPHYLAXIS: ACTIONS TO TAKE

If any one or more of the above ABC symptoms are present, take these steps.

1. Administer an Adrenaline Auto Injector (AAI) without delay

Inject the AAI into the top of the outer thigh. If you're in doubt that it is anaphylaxis but one or more ABC symptoms are present, **give the AAI, it will not harm them.**



2. Dial 999 and say anaphylaxis ('ana-fill-axis')

Stay with the person until the ambulance arrives. **DO NOT let them stand up and walk around.**



3. The person should lie down immediately

If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.



4. Inject a second AAI into the outer thigh if there are no signs of improvement after 5 minutes

If there is no sign of life, start CPR immediately until help arrives.

Please learn these steps. This is life-saving information.
You never know when you will need to act in an anaphylaxis emergency.

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

Empower · Include · Protect
AllergySchool.org.uk

Registered charity England & Wales (1181098) Scotland (SC051630). Based on BSACI and 2023 MHRA guidance.

Appendix II - Epipen AAI and Jext AAI Instructions

ANAPHYLAXIS

HOW TO USE EPIPEN AAIS

If you think someone is have an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Remove the blue safety cap

Grasp the EpiPen in your dominant hand and remove the blue safety cap by pulling straight up. **Remember: Blue to the Sky, Orange to the Thigh!**

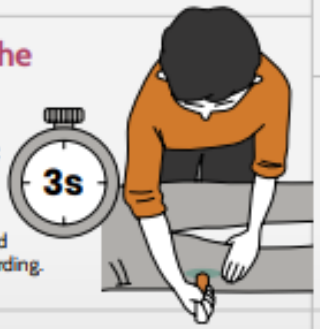


2. Position the orange tip

Hold the EpiPen at 90°, approximately 10cm away from the leg, with the orange tip pointing towards the outer thigh.

3. Administer the EpiPen AAI

Jab the EpiPen firmly into the outer thigh at a right angle. Hold firmly for 3 seconds, before removing and safely discarding.



4. Once the EpiPen AAI has been administered call 999

Ask for an ambulance and say **"ana-fill-axis".**



5. Lie the person down with legs raised immediately

If the person is not already lying down, they should do so, **with legs raised if possible.**

If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side .



6. If there are no signs of improvement after 5 minutes, use a second EpiPen AAI

The person should remain still and lying down until the ambulance arrives. **Don't try to get up, even if you start to feel better.**

7. Start CPR

If there are no signs of life, **start CPR immediately** until help arrives.



For more information on EpiPen AAIs >>

Sign up to the free expiry alert service and receive reminders by text or email when your EpiPen is about to expire >>

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Registered charity England & Wales (1161098) Scotland (SC051610). Based on BSACI and 2023 MHRA guidance. Source: EpiPen.

Appendix II - Epipen AAI and Jext AAI Instructions

ANAPHYLAXIS

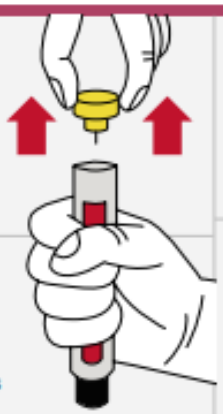
HOW TO USE JEXT AAIS

If you think someone is have an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Hold the Jext AAI in the hand you write with

Hold with your thumb closest to the yellow cap. **Pull off the yellow cap with your other hand.**



2. Place the black injector tip against the outer thigh

Hold the injector **at a right angles (approx. 90°) to the thigh.**

3. Push the black tip as hard as you can into the outer thigh

Wait until you **hear a 'click'** confirming the injection has started, then keep it pushed in. Hold the injector firmly in place against the thigh for **10 seconds (a slow count to 10)** then remove. The black tip will extend automatically and hide the needle.



4. Massage the injection area for 10 seconds

5. Once the Jext AAI has been administered call 999

Ask for an ambulance and say **"ana-fill-axis".**



6. Lie the person down with legs raised immediately

If the person is not already lying down, they should do so, **with legs raised if possible.**

If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.



7. If there are no signs of improvement after 5 minutes, use a second Jext AAI

The person should remain still and lying down until the ambulance arrives. **Don't try to get up, even if you start to feel better.**

8. Start CPR

If there are no signs of life, **start CPR immediately** until help arrives.



For more information on Jext AAIs >>

Sign up to the free expiry alert service and receive reminders by text or email when your Jext AAi is about to expire >>

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

Empower · Include · Protect

AllergySchool.org.uk

Registered charity England & Wales (1181098) Scotland (SC056410). Based on BSACI and 2023 MHRA guidance. Source: Jext.

Appendix III

Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector.

Refer to the child's BSACI Allergy Action Plan if they have one and call for other staff help if needed

Mild Reaction

- Itchy skin, rash, hives
- Swelling of lips, throat
- Sneezing, nasal congestion
- Water, red eyes

Give Antihistamine Dose

- Check correct dose as on pharmacy label

Contact Parent / Carer

- Notify them that their child has had an allergic reaction
- **Supervise child continually**

- If child vomits within 30 minutes of being ghiven first antihistamine dose

Administer another full dose

Regular dosing of antihistamine for 24 hours

- Dosage as directed on pharmacy label

If condition worsens move to Severe Reaction

Severe Reaction

- Hives (asthma or eczema worsen)
- Swollen tongue or difficulty swallowing
- Hoarse voice, coughing or wheezing
- Laboured breathing, gasping
- Stomach pain, bloating, vomiting
- Change in skin tone/colour - paler
- Feeling faint, clammy
- Dizziness, fainting, collapse

Where Airway / Breathing difficulty
ensure child sits upright

Where Feeling faint or drowsy,
lie down with legs raised

Dial 999 immediately

- Follow instructions given by ambulance control staff
- Inform ambulance control if you have spare in-date Adrenaline Auto-Injectors at the School
- Ensure parents/carers are contacted
- **DO NOT LEAVE THE CHILD**
- **If the child is asthmatic** but still alert, give inhaler via spacer - 2 puffs, additional puffs (1 per minute to max 8) can be given if needed.

Appendix IV

Flowchart for Allergic Reaction with use of Adrenaline Auto-Injector.

Refer to the child's BSACI Allergy Action Plan if they have one and call for other staff help if needed

Mild Reaction

- Itchy skin, rash, hives
- Swelling of lips, throat
- Sneezing, nasal congestion
- Water, red eyes

Give Antihistamine Dose

- Check correct dose as on pharmacy label

Contact Parent / Carer

- Notify them that their child has had an allergic reaction
- **Supervise child continually**

- If child vomits within 30 minutes of being ghiven first antihistamine dose

Administer another full dose

Regular dosing of antihistamine for 24 hours

- Dosage as directed on pharmacy label

If condition worsens move to Severe Reaction

Severe Reaction

- Hives (asthma or eczema worsen)
- Swollen tongue or difficulty swallowing
- Hoarse voice, coughing or wheezing
- Laboured breathing, gasping
- Stomach pain, bloating, vomiting
- Change in skin tone/ colour - paler
- Feeling faint, clammy
- Dizziness, fainting, collapse

Where Airway / Breathing difficulty

ensure child sits upright

Where Feeling faint or drowsy,

lie down with legs raised

Administer Auto-Injector (AAI)

- Check in-date, safety cap intact
- Remove safety cap
- Hold needle firmly, inject into thigh
- AAI clicks, hold for 3 seconds
- Remove AAI carefully
- Send for 2nd AAI

Dial 999 immediately

- Follow instructions given by ambulance control staff
- Where no improvement after 5 minutes, administer a second dose
- Ensure parents/carers are contacted
- **DO NOT LEAVE THE CHILD**
- **If the child is asthmatic** but still alert, give inhaler via spacer - 2 puffs, additional puffs (1 per minute to max 8) can be given if needed.
- Hand over AAIs to ambulance crew on arrival or ambulance

Appendix V

Information on allergies

The most common causes of food allergies relevant to this Policy are the fourteen food allergens:

- **Cereals containing Gluten**
- **Celery**
- **Crustaceans**
- **Eggs**
- **Fish**
- **Soya**
- **Milk**
- **Nuts**
- **Peanuts**
- **Mustard**
- **Sesame Seeds**
- **Sulphur dioxide/Sulphites**
- **Lupin**
- **Molluscs**

However, it is possible that any food has the potential to cause an allergic reaction. Contact with any food or materials containing a child's allergen has the potential to cause an allergic reaction for that child.

Latex, chemicals, medicines, grasses, pollen, weeds, trees, pets, insect venom and animal dander (shedded flakes of skin) can also cause allergic reactions.

Symptoms

Mild to moderate symptoms include:

- Swelling of the eyes, face and lips
- Runny or congested nose
- Raised itchy rash (hives), eczema flare, skin flushing
- Itchy mouth
- Stomach cramps, nausea, vomiting, diarrhoea

Severe symptoms include:

- Swollen tongue, hoarse voice or cry, difficulty swallowing and talking
- Chest tightness
- Breathing difficulties, persistent cough, wheeze
- Low blood pressure, feeling faint, collapse
- Pale and floppy (babies and small children)

Appendix VI

Forefield Community Infant and Nursery School
Allergy Incident and near miss report form

This form should be completed as soon as possible following any allergy-related incident or near miss. Near misses must be recorded even where no harm has occurred, as they may identify gaps in procedures, communication, supervision, or training and help prevent future incidents. Parents/carers and, where appropriate, the individual affected should be involved in reviewing the incident and identifying any lessons learned. The named allergy senior leader and governor should also review incidents to ensure that school policies, risk assessments, and Individual Healthcare Plans were appropriate, followed correctly, and updated where needed.

Date	Time	Incident Location	Child affected	Staff member present	Emergency Services Called Y/N

What happened/ allergen involved (if known?)

Why the incident happened (as far as is known?)

How staff and pupils responded?

What support was provided to the individual including any medication administered?

What immediate actions were taken afterwards?

Any lessons learned and recommended changes to any policies, procedures, training and supervision?

Reviewed by	Name	Signed	Date
School allergy governor:			
School allergy lead:			