

Allergy and Anaphylaxis Management Policy

Policy Statement

St Helen & St Katharine (the School) recognises that students, parents, visitors and staff may suffer from potentially life-threatening allergies or intolerances. The School believes that the safety and wellbeing of those members of the school community suffering from specific allergies and who are at risk of anaphylaxis is the responsibility of the whole school community.

The School recognises that it is not possible to guarantee a completely allergen free environment. We therefore seek to reduce and manage allergen risk as much as we can through hazard identification, instruction, information, training and encouraging personal responsibility. This is supported by planning for an effective response to potential emergencies.

The School recognises that nuts are one of the most common allergens and are likely to cause the most severe reaction and the school takes action to ensure all members of the school community are 'nut aware'. It is not permissible for anyone to bring products containing nuts into school. The School aims to prevent nuts coming into school, however it should be understood that, despite best endeavours, it cannot be considered to be a nut free environment.

Aims and Objectives

This policy outlines the Schools approach to allergy management, including how the whole-school community works to reduce the risk of an allergic reaction happening and the procedures in place to respond if one does. It also sets out how we support our students with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an Allergy Aware School.

Other related policies

Further detail on policy for specific matters can be found in the [Anti Bullying Policy](#), [Health & Safety Policy](#), [Trips and Visits Policy](#).

What is an Allergy

An allergy occurs when a person has the potential to react to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction, see Annex A.

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

People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication. For further definitions see Annex A.

Roles and Responsibilities

The school takes a whole-school approach to allergy management. Our designated governor, Mrs Jenny Mitchell, who is responsible for allergy safety, provides oversight to ensure that effective policies and practices are consistently implemented across the school.

Designated Allergy Lead – The Designated Allergy Lead is the Pastoral Deputy Head. The Lead is responsible for:

- Ensuring the safety, inclusion and wellbeing of students with allergy.

- Working with the Senior Nurse, advising Leadership and informing policy on allergy management across the school to ensure that there are robust procedures in place.
- Championing and practising allergy awareness across the school.
- Being the overarching point of contact for staff, students and parents with concerns or questions about allergy management.
- Ensuring allergy information is recorded, up-to-date and communicated to all staff, although the lead has ultimate responsibility, the collation of information has been delegated to the Senior Nurse.
- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment).
- Ensuring staff, students and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures.
- Reviewing the stock of the school's spare adrenaline pens (checking the school has enough and the locations are correct) and ensuring staff know where they are.
- Along with the H&S Manager keeping a record of any allergic reactions or near-misses and ensuring an investigation identifies the cause and any required changes in policy and/or practice.
- Working with the Senior Nurse, reviewing at least annually and updating the Allergen and Anaphylaxis Policy.

The Senior Nurse – The Senior Nurse is responsible for:

- Acting on behalf of the Designated Allergy Lead for all allergy and anaphylaxis matters.
- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families (this is likely to involve liaising with the Admissions Team for new joiners).
- Supporting the Leadership on how this information is disseminated to all school staff, including the catering team, occasional staff and staff overseeing clubs.
- Ensuring the information from families is up-to-date and reviewed annually (at a minimum).
- Coordinating medication with families. Whilst it is the parents and carers responsibility to ensure medication is up to date, the nursing team will also have systems in place to check this and notify the parents when they see the expiry date is approaching.
- Keeping an adrenaline pen register to include Adrenaline Pens prescribed to students and Spare Pens, including brand, dose and expiry date. The location of Spare Pens should also be documented.
- Regularly checking spare pens are where they should be, and that they are in date.
- Replacing the spare pens when necessary.
- Providing on-site adrenaline pen training for other members of staff and refresher training as required e.g. before school trips.

Admissions Team – The Admissions Team is likely to be the first to learn of a student or visitor's allergy. They should work with the Senior Nurse to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity.
- There is a clear structure in place to communicate this information to the relevant parties (i.e. Health Centre team, Catering team).
- Visitors (for example at Open Days and events) are aware of the catering provision and if food is to be offered and plans for medication if the child is to be left without parental supervision.

All staff – All school staff, to include teaching staff, support staff, self-employed staff (for example sports coaches, music teachers and those running clubs) and volunteers are responsible for:

- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed.
- Championing and practising allergy awareness across the school.
- Being able to recognise and respond to an allergic reaction, including anaphylaxis.

- Understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures and asking for support if needed.
- Being aware of students with allergies and what they are allergic to.
- Considering the risk to students with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and / or appropriate.
- Ensuring students always have access to their medication or carrying it on their behalf.
- Taking part in training and anaphylaxis drills as required. This includes attending the annual training in September. Staff unable to attend the training are required to watch the recorded session available on SharePoint.
- Considering the safety, inclusion and wellbeing of students with allergies at all times.
- Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy.
- Provide suitable, sufficient and up to date allergy information for anyone with an allergy when making catering requests.
- Checking the labelling of any foodstuffs they bring into school to ensure that they do not contain any of form of nut in the ingredients list.

All parents – All parents and carers (whether their child has an allergy or not) are responsible for (available on the parent portal):

- Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of students with allergies.
- Providing the school and school nurse with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema.
- Considering and adhering to any food restrictions or guidance the school has in place when providing food, for example in packed lunches, as snacks or for fundraising events.
- Encouraging their child to be allergy aware.
- Refraining from telling the school their child has an allergy or intolerance if this is a preference or dietary choice.

Parents of children with allergies – In addition to the points above, the parents and carers of children with allergies should:

- Work with the school to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan.
- If applicable, provide the school or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, ie. spoon or syringe), inhalers or creams .
- Ensure medication is in-date and replaced at the appropriate time.
- Ensure their child has access to their allergy medication, including two adrenaline pens if prescribed, on the journey to and from school .
- Update school with any changes to their child's condition and ensure the relevant paperwork is updated too.
- Provide the school with an up-to-date photograph of their child and sign the associated permission for it to be shared appropriately as part of their allergy management
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring eg. not eating the food to which they are allergic.

All students – All students at the school should:

- Be allergy aware.
- Understand the risks allergens might pose to other students and respect measures to support them.
- Learn how they can support their peers and be alert to allergy-related unkindness or bullying.

- Students who are buying or bringing in food from home **must** check the ingredients before they bring it to school. Any food that contains nuts must not be brought in to school.

Students with allergies – In addition to the above, students with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk.
- Avoiding their allergen as best they can.
- Understanding that they must notify a member of staff if they are not feeling well or suspect that they might be having an allergic reaction.
- For those at risk of anaphylaxis, always carrying two adrenaline auto-injectors with them. They must only use these for their intended purpose.
- Understanding how and when to use their adrenaline auto-injector.
- Talking to the Senior Nurse or a member of staff if they are concerned by any school processes or systems related to their allergy.
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction.
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies.
- Students who are permitted to leave the school site should know what to do if they have an allergic reaction off school premises. This should include how they treat themselves and raise the alarm to get help.

Information and Documentation

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

Individual Healthcare Plans

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

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

Assessing Risk

Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning and include it in risk assessments as required. Some examples include:

- Classroom activities, for example craft using food packaging, science experiments where allergens are present, food tech or cooking.
- Bringing animals into the school site.
- Running activities or clubs where they might hand out snacks or food “treats”. Ensuring safe food is provided or considering an alternative non-food treat for all students.
- Planning special events, such as cultural days and celebrations.

Inclusion of students with allergies must be considered alongside safety and they should not be excluded. If necessary, the member of staff leading the event should adapt the activity to be more inclusive.

Food, Including Mealtimes & Snacks

Catering in School – The school is committed to providing a safe meal for all students, including those with food allergies. The catering team will endeavour to get to know the students with allergies and what their allergies are, supported by all school staff.

The Executive Chef is responsible for:

- Ensuring that routines are embedded to address allergy management, reviewed and amended as appropriate.
- Ensuring that due diligence is carried out regarding allergen management when appointing catering staff.
- Ensuring that all catering staff and other staff preparing food receive relevant and appropriate allergen awareness training.
- Endeavour to provide varied meal options to students and staff with allergies.
- Ensuring that anyone preparing food for students with allergies will follow good hygiene practices, food safety and allergen management procedures.
- Ensuring that food containing the main 14 allergens is clearly identified for students, staff and visitors to see. Other ingredient information will be available on request.
- Ensuring any food packed on site e.g. in the café, complies with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging.
- Ensuring that products with Precautionary Allergen Labelling or "May Contain" labelling are used in a safe way.
- Ensuring that any food ingredients that arrive in school that are labelled 'Contains Nuts' will remain sealed, isolated and returned to supplier.
- Maintaining good communication with suppliers to ensure the correct foodstuffs are supplied, e.g. don't contain nuts.
- Ensuring Cafes and vending machines within the school follow the same robust procedures and our allergy management plan.
- Where changes are made to the ingredients this will be communicated to everyone if it has the potential to increase the risk to those with allergies.

Food Brought into School

Any food that is brought into school must be allergen friendly. Foodstuffs containing nuts must not be brought into school by anyone at any time. This includes eating food while being transported on a school bus. Guidance from staff should be sought if any member of the school community is unsure.

Food Bans or Restrictions

A ban on foods that contain any of the 14 allergens would be impossible to enforce and would not reflect the current real-world environment our students and staff face when they are away from school. We currently only ban food stuffs that contain nuts and actively encourage the below:

- This school is an Allergen Aware school. We have students with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food.
- We try to restrict peanuts and tree nuts (nuts) as much as possible on the site and check all foods coming into the kitchen.
- All food coming onto school premises, taken on a school trip or to a sports match should be checked to ensure nuts are not an ingredient within the product. Common foods that contain these as an ingredient include packaged nuts, cereal bars, chocolate bars, nut butters, chocolate spread, cakes and various sauces.
- Consideration for those who could be affected by the food staff bring in must be taken, i.e. students within a year group or colleagues that have an allergy.

School Trips and Sports Fixtures

- Staff leading the trip will have a register of students with allergies and medication details.
- Allergies will be considered on the risk assessment and catering provision put in place.

- The Group Leader should consult with the parents if the trip requires an overnight stay.
- Staff accompanying the trip will be trained to recognise and respond to an allergic reaction.
- Allergens will be clearly labelled on catered packed lunches. If there is a student with an allergy to a food outside the “main 14”, all relevant information must be put on the catering request.
- See Adrenaline Pens section for School Trips and Sports Fixtures

Insect Stings

Students with a known insect venom allergy should:

- Avoid walking around in bare feet or sandals when outside and, when possible, keep arms and legs covered.
- Avoid wearing strong perfumes or cosmetics.
- Keep food and drink covered.

The Estates Manager will monitor the grounds for wasp or bee nests. Staff and students (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid the area.

Animals

It is normally the flakes from skin/fur/coat/hair (dander) that causes a person with an animal allergy to react. Precautions to limit the risk of an allergic reaction include:

- A student with a known animal allergy should avoid the animal they are allergic to.
- If an animal comes on site a risk assessment will be done prior to the visit.
- Areas visited by animals will be cleaned thoroughly.
- Anyone in contact with an animal will wash their hands after contact.
- School trips that include visits to animals will be carefully risk assessed.

Allergic Rhinitis / Hay Fever

Allergic rhinitis is the medical term given for inflammation of the nasal lining caused by an allergic trigger. Commonly referred to as hay fever and normally flares up when the pollen count is high:

- Students should use NHS or GP recommended treatments if appropriate and make sure they have an adequate supply. The Medical Centre should be consulted when students bring hay fever medication into school.

Inclusion and Mental Health

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

- No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip.
- Students with allergies may require additional pastoral support including regular check-ins from their Form Tutor and School Nurse.
- Affected students will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives.
- Bullying related to allergy will be treated in line with the school’s anti-bullying policy.

Adrenaline Pens

[See the government guidance on Adrenaline Pens in Schools.](#)

Storage of adrenaline pens

- Students prescribed with adrenaline pens will have easy access to two, in-date pens at all times.
- Students will carry at least one adrenaline pen with them at all times. A spare is kept in the medical centre and with the lead staff member during any school trip or sports fixture.
- Spot checks will be made to ensure adrenaline pens are where they should be and in date.

- Adrenaline pens should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (e.g. a radiator).
- Used or out of date pens will be disposed of as sharps.

Spare adrenaline pens

The School has spare adrenaline pens in accordance with government guidance. The adrenaline pens are clearly signposted and are stored in the medical centre, reception, PE office and Church Farm.

The Allergy Lead is responsible for:

- Deciding how many spare pens are required for normal school routine and for any school trips.
- Deciding which brands to buy. Schools are recommended to buy a single brand if possible to avoid confusion.
- Distributing around the site as needed and providing clear signage.

Adrenaline pens on offsite activities

- No child with a prescribed adrenaline pen will be able to go on a school trip without two of their own pens.
- Adrenaline pens will be kept close to the students at all times, e.g. not stored in the hold of the coach when travelling or left in changing rooms.
- Adrenaline pens must be protected from extreme temperatures.
- Staff accompanying the students will be aware of students with allergies and be trained to recognise and respond to an allergic reaction.
- Staff must consider whether to take spare pens to sporting fixtures and on trips.

Responding to an Allergic Reaction / Anaphylaxis

See Annex B on recognising and responding to an allergic reaction

- If a student has an allergic reaction, they will be treated in accordance with their Allergy Action Plan and a member of staff will instigate the school's Emergency Response Plan if needed.
- If anaphylaxis is suspected adrenaline will be administered without delay, lying the student down with their legs raised as described in the Annex B. They will be treated where they are and medication brought to them.
- A student's own prescribed medication will be used to treat allergic reactions if immediately available.
- This will be administered by the student themselves if age appropriate or by a member of staff. Ideally the member of staff will be trained, but in an emergency **anyone** will administer adrenaline.
- If the student's own adrenaline pen is not available or misfires, then a spare adrenaline pen will be used.
- If anaphylaxis is suspected but the student does not have a prescribed adrenaline pen or Allergy Action Plan, a member of staff will ensure they are lying down with their legs raised, call 999 and explain anaphylaxis is suspected. They will inform the operator that spare adrenaline pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to **anyone** for the purposes of saving their life.
- The student will not be moved until a medical professional / paramedic has arrived, even if they are feeling better.
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff will accompany the student in an ambulance and stay until a parent or guardian arrives.

Training

The school is committed to training staff to give them a good understanding of allergy. This includes:

- Understanding what an allergy is.
- How to reduce the risk of an allergic reaction occurring, see Annex C.
- How to recognise and treat an allergic reaction, including anaphylaxis.
- How the school manages allergy, for example Emergency Response Plan, documentation, communication etc.
- Where adrenaline pens are kept (both prescribed pens and spare pens) and how to access them.

Asthma

It is vital that students with allergies keep their asthma well controlled because asthma can exacerbate allergic reactions.

Policy last reviewed:

Next review due:

Person responsible for review:

Audience:

Trinity 2026

Trinity 2027

Pastoral Deputy Head & Senior Nurse

Staff/Parents/Students

Annex A – Definitions

Anaphylaxis: Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency, see Annex B.

Allergen: A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

Most severe allergic reactions to food are caused by just 9 foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc), sesame, fish, shellfish, soya and wheat.

There are 14 allergens required by law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame.

Adrenaline Auto-Injector: Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAls, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK:

EpiPen and Jext Pen. For the purposes of this Policy we will refer to them as Adrenaline Pens.

Allergy Action Plan: This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan.

Individual Healthcare Plan: A detailed document outlining an individual student's condition, history, treatment, risks and action plan. This document should be created by schools in collaboration with parents / carers and, where appropriate, students. All students with an allergy should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.

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

Spare Pens: From 2017 schools have been able to purchase spare adrenaline pens. These are held as a back-up in case students' own adrenaline pens are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

Annex A – Allergic Reactions Vary

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

You cannot assume someone will react the same way twice, even to the same allergen. Reactions are not always linear. They don't always progress from mild to moderate to more serious; sometimes they are life-threatening within minutes.

Mild to Moderate Allergic Reactions

Symptoms include:

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

Response:

- Stay with student
- Call for help
- Locate adrenaline pens
- Give antihistamine
- Make a note of the time
- Phone parent or guardian
- Continue to monitor the student for 60 minutes.

Signs of Anaphylaxis

The most serious type of reaction is called ANAPHYLAXIS. Anaphylaxis usually occurs within 30 minutes of eating a food but can begin 4-6 hours later.

Symptoms include:

A: Airways: Swelling in the throat, tongue or upper airways (tightening in the throat, hoarse voice, difficulty swallowing)

B: Breathing: Sudden onset wheezing, breathing difficulty, noisy breathing.

C: Circulation: Dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

Anaphylaxis is uncommon, and children experiencing it almost always fully recover. In rare cases, anaphylaxis can be fatal. It should always be treated as a time-critical medical emergency.

People who have never had an allergic reaction before, or who have only had mild to moderate allergic reactions previously, can experience anaphylaxis. Therefore, anyone experiencing an allergic reaction should always be monitored for at least 60 minutes afterwards, just in case the reaction gets worse.

Annex B – Responding to Anaphylaxis

Symptoms of Anaphylaxis

A – Airway

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

B - Breathing

- Difficult or noisy breathing
- Wheeze or cough

C - Circulation

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

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

Delivering Adrenaline

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

For more information see the Government's [Guidance for the use of adrenaline auto-injectors in schools.](#)

Annex C – Allergen Avoidance

If a member of staff becomes aware of an allergen that has been brought into school by a student, e.g. peanut butter sandwich, chocolate bar, etc, they are to remove it from the student immediately.

If it is contained within a sealed container or packaging it can be stored in a safe place and returned to the student at the end of school to take home. The student must be informed that it has not to be unsealed or consumed until they are home or at their destination.

If it is not in a sealed container, e.g. wrapped up in clingfilm or tinfoil it is to be disposed of in a bin away from students. At no point is a student to be allowed to consume the item, even if they are isolated from other students.

If necessary or if there is evidence of allergen transfer to other surfaces all contact points are to be cleaned.

As a minimum everyone that came into contact with the allergen must wash their hands and check that there is no transfer to other items, clothes, bags, etc. Parents / Guardians must be contacted and reminded about our Allergen and Anaphylaxis Policy.