



Allergy and Anaphylaxis Policy

Approval Arrangements

All policies in the Trust are ultimately the responsibility of the Trust Board. To enable it to discharge this responsibility appropriately and in collaboration with the constituent schools, the Trust Board will

1. set a full Trust wide policy which applies in the same way to all schools,
2. require individual schools to 1 - adopt, 2 - amend or 3 - adapt policies set by the Trust

This is a level (2) policy against the Scheme of Delegation and supersedes any previous version.

Approval Body:	Board of Trustees
Amended/adapted by:	Becks Hood- Headteacher
Date Approved:	16/07/2026
Author:	Head of Governance and Compliance
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All TST policies are Board approved.

Some policies are uniform in their application, regardless of school context. For example, those relating to finance and people matters. These are adopted policies.

Some policies are for school level amendments. For example, where key school staff need to be named within policies. Heads are responsible for amended policies.

We have a few Board approved policies that are for schools to adapt. The policies set the framework, but schools need to adapt them for their context. Heads are responsible for adapted policies.

Trust Vision

Our policies support us in living our values and delivering our vision. [Our Vision and Values - Tenax Schools Trust](#)

Policy Aim

The Trust is committed to promoting a whole school approach to health, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies. We believe that all allergies should be taken seriously and dealt with in a professional and appropriate way. By our actions and through this policy, we will work proactively to:

- encourage a whole-school community work to reduce the risk of an allergic reaction happening
- minimise the risk of exposure within the school setting
- set out how we support our pupils/students with allergies to ensure wellbeing and inclusion
- encourage self-responsibility
- have robust plans for an effective response to possible emergencies

Our Trust is clear about the need to actively support pupils/students with medical conditions to participate in school life. We will consider what reasonable adjustments are needed to enable all pupils/students to participate fully and safely in all aspects of school life.

Legislation and Guidance

This policy applies to all staff, pupils/students, parents and visitors to the school and should be read alongside these other policies:

This policy should be read in conjunction with our other policies including our H&S Policy, first aid policy and, Supporting pupils with medical conditions Policy, food and catering safety procedure.

This policy is based on the DFE's guidance on allergies in schools, the ISBM's allergy policy, guidance from the allergy team and Resuscitation Council UK's age-based guidance

What is an allergy?

Allergy occurs when a person reacts 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.

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.

Roles and Responsibilities

Bishop Chavasse Primary School takes a whole-school approach to allergy management.

Designated Allergy Lead

The Designated Allergy Lead is the Headteacher (best practice) who works closely with the SBM/H and S officer and First Aid lead and are responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils/students and staff with an allergy
- Taking decisions on allergy management across the school
- Championing and practising allergy awareness across the school
- Being the overarching point of contact for staff, pupils/students and parents with concerns or questions about allergy management
- Ensuring allergy information is recorded, up-to-date and communicated to all staff by the First Aid Lead.
- Ensure that the school provides appropriate training, information, instruction, induction and supervision on a regular basis to enable everyone to stay safe regarding allergies and their management
- Making sure all staff have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment)
- Ensure adequate resources for managing allergies are available
- Ensuring staff, pupils/students and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures. Staff will be asked to record confirmation that they have read and understood the policy and undertaken any stipulated training. This will be recorded on the SCR.
- Ensure all visitors, volunteers, work experience students, sub-contractors are made aware of the school's commitment to allergy management
- Ensure there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff absences away from the school premises
- Ensure the curriculum contains age-appropriate content so all pupils/students can learn about allergies and how everyone can support those who have them
- Reviewing the school's stock of spare AAIs (check the school has an appropriate number for the setting, that they hold the correct dose, that spare AAIs are stored appropriately) and ensuring staff know where they are



- Keeping a record of any allergic reactions or near-misses, reporting these to the appropriate authority and Trust where necessary and ensuring the circumstances are investigated and learnings shared (as per the Trust incident recording and investigation process)
- Regularly reviewing and raising any considered updates to the Trust
- Ensuring there is an anaphylaxis drill once a year
- Periodically check procedures and report to the SLT and Trust
- Ensure First Aid staff training includes anaphylaxis management, including awareness of triggers, anaphylaxis and first aid emergency procedures

School Business Manager/First Aid Lead

School business manager and First Aid Lead are responsible for:

- Collecting and coordinating the paperwork, including Allergy Action Plans, Individual Healthcare Plans and information from families (including liaising with the admissions team for new joiners)
- Supporting the Designated Allergy Lead with disseminating this information to all school staff, including the catering team, occasional staff and those running clubs
- Ensuring the information from families is up-to-date, and reviewed at least annually. Coordinating medication with families and ensuring medication is in date. Systems are in place to check and notify the parents/carers when they see the expiry dates are approaching in respect of medicines held by the school. It remains the ultimate responsibility of parents/carers to ensure medication is up to date. Keeping an AAI register to include AAI prescribed to pupils/students and the school's stock of spare AAIs, including brand, dose and expiry date. The location of spare AAIs should also be documented
- Regularly checking spare AAIs are where they should be, and that they are in date
- Replacing the spare AAIs when necessary
- Providing on-site AAI training for staff and pupils/students and refresher training as required e.g. before school trips
- Ensure an adequate risk assessment or Allergy Action Plan is undertaken prior to any school trips, excursions or off-site extra curricula activities for pupils/students who have allergies
- Ensure external caterers are appropriately vetted, competent and trained
- Ensure best practice in the labelling of foodstuffs and their contents, where outsourced, ensure caterers are competent and have received the relevant training and information required, including a copy of this policy

Admissions Team

The school admissions team will ensure:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity before a school visit, Open Day or Taster session if food is offered or likely to be eaten.



- There is a clear structure in place to communicate this information to the relevant parties (i.e. school nursing team, school business manager (or equivalent), catering team etc.)
- Parents and applicants are informed of catering arrangements during admission events
- Plans are made for emergency medication if the child is to be left without parental supervision

All staff

All school staff, including teaching staff, support staff, occasional staff (e.g. sports coaches, music teachers and those running breakfast and afterschool clubs) are responsible for:

- Championing and practising allergy awareness across the school
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed
- Being aware of pupils/students (and staff, when necessary) with allergies and what they are allergic to
- Considering the risk to pupils/students with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate
- Ensuring pupils/students always have access to their medication or carrying it on their behalf, where appropriate
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;
- Taking part in training and anaphylaxis drills as required. Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager
- Considering the safety, inclusion and wellbeing of pupils/students with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy
- Supervising any food-related activities with due caution whilst following best practice for storing, preparing, cooking and serving food
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the First Aid Lead / School business manager
- Ensuring that pupils/students have their medication and their Allergy Action Plan or Individual Health Care Plan with them when leaving school site, for a match or trip.

All parents

All parents and carers (whether their child has an allergy or not) are responsible for:

- Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils/students with allergies



- Providing the school 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;
- Refraining from telling the school their child has an allergy or intolerance if this is a preference or dietary choice
- Encouraging their child to be allergy aware

Parents of children with allergies

In addition to point "all parents responsibilities", 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, completed by a healthcare professional
- If applicable, provide the school or their child with two labelled AAI 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 AAI 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
- 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, how to read food labels, how to spot symptoms, to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food to which they are allergic.
- Provide appropriate foods to be consumed by the child if necessary

All pupils/students

In an age appropriate manner, all pupils/students at the school should:

- Be allergy aware
- Understand the risks allergens might pose to their peers and respect measures to support them
- Learn how they can support their peers and be alert to allergy-related bullying
- Older pupils/students will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency
- Consider and adhere 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

Pupils/students with allergies

In addition, in an age and capability appropriate way to “all pupils/students responsibilities”, pupils/students with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk
- Avoiding their allergen as best as they can
- Understanding the importance of following the school specific processes of lunch and snack services and how that mitigates risk. i.e. not exchanging foods with others, avoiding eating foods with unknown ingredients
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction
- Carrying two adrenaline auto-injectors with them at all times, if age and capability appropriate. They must only use them for their intended purpose
- Understanding how and when to use their adrenaline auto-injector
- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies
- Pupils/students permitted to leave the school site during the school day should know what to do if they have an allergic reaction off school premises. This should include how to treat themselves and raise the alarm to get help
- If age and capability appropriate, ensuring they have their medication with them on the journey to and from school

Information and Documentation

Register of pupils/students with an allergy

The school must have a register of pupils/students who have a diagnosed allergy. This includes children who have a history of anaphylaxis or have been prescribed AAls, as well as pupils/students with an allergy where no AAls have been prescribed.

Individual Healthcare Plans

Each pupil/student with an allergy must have an Individual Healthcare Plan (IHP). The information on the IHP must include:

- Known allergens and risk factors for allergic reactions
- A history of their allergic reactions
- Detail of the medication the pupil/student has been prescribed including dose, this should include AAls, antihistamine etc.



- A copy of parental consent to administer medication, including the use of spare AAls in case of suspected anaphylaxis
- A photograph of each pupil/student
- A copy of their Allergy Action Plan. See Appendix 1 definitions for the BSACI templates.

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. Some examples include:

- Classroom activities, for example craft using food packaging, science experiments where allergens are present, food lessons or cooking
- Bringing animals into the school, for example a dog or hatching chick eggs
- Running activities or clubs where they might hand out snacks or food “treats”. Ensure safe food is provided or consider an alternative non-food treat for all pupils/students
- Planning special events, such as cultural days and celebrations

Inclusion of pupils/students with allergies must be considered alongside safety and they should not be excluded. If necessary, adapt the activity. The school will ensure compliance with the Equality Act 2010.

Food, Including Mealtimes & Snacks

Catering

The school is committed to providing a safe meal for all students, staff and visitors, including those with food allergies.

- Due diligence must be carried out with regard to allergen management when appointing catering staff and agencies
- All catering staff and other staff preparing food must receive relevant and appropriate allergen awareness training
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures
- School Business Manager/ First Aid Lead will inform the Catering Manager/Chef of pupils/students with food allergies.
- Schools with Early Years settings should adhere to new Early Years Foundation Stage statutory guidance. The “Safer Eating” section has the relevant information for allergies. You should detail the relevant procedures here., for example adults holding PFA qualifications, safe preparation of food for allergies and to prevent choking]
- The catering team will endeavour to get to know the pupils/students with allergies and what their allergies are, supported by school staff
- The catering team will endeavour to provide varied meal options to pupils/students and staff with allergies



- The school has a robust system in place to ensure catering staff can identify pupils/students with allergies e.g. a list with photographs—the admissions officer/First Aid lead identify pupils with allergies and share records with the catering staff. This is updated 3 times per year or on admission of a new pupil with an allergy
- Food containing the main 14 allergens (see Allergens definition in appendix 1) will be clearly labelled . Other ingredient information will be available on request.
- Pre-packaged food will comply with PPDS legislation (Natasha’s Law) requiring the allergen information to be displayed on the packaging
- Where changes are made to the ingredients this will be communicated by the catering team to staff and pupils/students with dietary needs
- Food provided at breakfast clubs and after school clubs will follow these procedures
- Any food sold on site, will only be done so in the presence of parents at school events. Donations will be nut free in line with school policy. Ingredients of foods will be clearly labelled if homemade or food items in original packaging if shop bought. It will be parental responsibility to check the safety of the food item for their child.

Allergy awareness and nut bans

The Trust supports the approach advocated by many allergy charities towards nut bans/nut-free schools. This is because nuts are only one of many allergens that could affect pupils/students, and no school could guarantee a truly allergen free environment for a child living with food allergies. They advocate instead for schools to adopt a culture of allergy awareness and education.

A ‘whole school awareness of allergies’ is considered a better approach, as it ensures teachers, pupils/students and all other staff are aware of what allergies are, the importance of avoiding the pupils’/students allergens, the signs & symptoms, how to deal with allergic reactions and to ensure policies and procedures are in place to minimise risk.

Our schools may however choose to adopt nut bans/ nut free zones, especially where there are younger children present, and this will be clearly communicated to parents.

Food brought into school

- It is clearly communicated to homes that we are a nut free school/if there is a child in a class with a specific allergy. We remind parents of this prior to any trip where packed lunches may be eaten.
- Pupils with significant food allergies eat lunch in a separate lunch room to avoid contamination.
- If staff see food containing any allergens in a packed lunch, the food will be taken from the child and a substitute given. Parents will be contacted.
- Parents must ensure that any food brought in to celebrate birthdays must NOT contain nuts in line with our nut free policy. Food will be given out but children will not be allowed to eat it until they have been



dismissed to parents. It is a parent's responsibility to check the ingredients of the food before allowing their child to eat it.

- At fundraising events where parents may supply homemade goods, they are only shared for purchasing if ingredients are clearly labelled. All parents are informed that they are responsible for the purchase of any food item at fundraising event.
- Foods given to school for an event must be brought in in their original packaging. Parents are responsible for purchasing any such food item at a fundraising event.

Food hygiene for pupils/students

- Pupils/students must wash their hands before and after eating
- Sharing, swapping or throwing food is not allowed
- Water bottles and packed lunches should be clearly labelled

Educational Visits and Sports

- Staff leading the trip will have a register of pupils/students with allergies and details of their medication. Staff should notify the trip leader of any allergies
- Allergies will be considered on the risk assessment and catering provision put in place and communicated to the venue, caterers etc.
- Parents, and pupils/students where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay and an individual risk assessment will be drawn up with the parent.
- Staff (and some volunteers, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction
- Allergens will be clearly labelled on any catered packed lunches
- See AAls section for School Trips and Sports Fixtures

Insect Stings

Those with a known insect venom allergy should:

- Avoid walking around in bare feet when outside
- Avoid wearing strong perfumes or cosmetics
- Keep food and drink covered

The school caretaker/site team will monitor the grounds for wasp or bee nests.

Animals

It's normally the dander (flakes of skin) saliva or urine that causes a person with an animal allergy to react.

- Pupils/staff with a known animal allergy should avoid the animal to which they are allergic
- 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
- If an animal lives on site, for example in a Boarding House, pupils/students, parents and staff will be made aware and consideration and adaptations will be made
- School trips that include visits to animals will be carefully risk assessed

Allergic Rhinitis/ Hay Fever

Children who suffer from seasonal pollen allergy and hay fever may bring in medication that can be administered in line with guidance from parents who are required to complete an administration of medication form. The same applies to children who have persistent nasal allergy due to house dust mites or allergens.

Inclusion and Mental Health

Allergies can have a significant impact on mental health and wellbeing. Pupils/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
- Pupils/students with allergies may require additional pastoral support including regular check-ins
- Affected pupils/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 Auto-Injectors (AAI)

See the government guidance on AAI's in Schools.

Storage of AAI's

- Pupils/students prescribed with AAI's will have easy access to two, in-date AAI's at all times;
- The school have 2 AAI's which are stored centrally close to the defibrillator. They are accessible at all times and expiry dates recorded.
- AAI's for some children are held in the classroom medical bag and clearly labelled and accessible at all times.
- Some pupils carry their own AAI's. This is an agreement with parents and set out in the pupils' Health Care Plan. We encourage children in Year 4 or year 5 to transition from the school managing the AAI's to pupils/students carrying them. Parents are reminded that pupils/students must also have access to two AAI's as they travel to and from school if they travel alone.
- Spot checks will be made by the designated allergy lead to ensure AAI's are where they should be and in date
- AAI's must not be kept locked away
- AAI's should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator)

- Used or out of date AAls must be disposed of as sharps

Spare AAls

Note. AAls are prescribed to patients in pairs. A dose including spares, should be held in pairs.

This school has 2 spare AAls to be used in accordance with government guidance.

The locations of spare AAls are clearly signposted. Location and dosage can be easily found on the AAI register

The Allergy Lead and School business manager/ first aid lead are responsible for:

- Deciding how many spare AAls are required – consideration is given to having a couple of spare AAls in grab bags for school trips/ matches as well as around the site.
- What dosage is required, based on the Resuscitation Council UK's age-based guidance [see DfE Guidance on the use of adrenaline auto-injectors in schools, which lists age groups and types of doses required. [Guidance on the use of adrenaline auto-injectors in schools](#)]
- Which brand(s) to buy. This will be a single brand to avoid any confusion.
- The purchasing of spare AAls.
- Distribution around the site and clear signage

AAls on off-site activities

- No child with a prescribed AAls will be able to go on a school trip without two of their own devices. It is the trip leader's responsibility to check they have them
- AAls will be kept close to the pupils/students at all times e.g. not stored in the hold of the coach when travelling or left in changing rooms
- AAls will be protected from extreme temperatures
- Staff accompanying the pupils will be aware of pupils/students with allergies and be trained to recognise and respond to an allergic reaction
- A risk assessment will be completed to determine whether to take spare AAls to off-site activities

Responding to An Allergic Reaction /Anaphylaxis

See appendix 2 on recognising and responding to an allergic reaction

If a pupil/student has an allergic reaction:

- Treat the pupil/student in accordance with their Allergy Action Plan
- Instigate the school's Emergency Response Plan
- If anaphylaxis is suspected administer adrenaline without delay
- Treat the pupil/student where they are. Lie them down with their legs raised and bring medication to them
- Use pupil's/students own prescribed medication if immediately available



- Pupil/student can administer the AAI themselves [if able to] or a member of staff can administer the AAI. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline
- If the pupil's/students own AAI is not available or misfires, then use a spare AAI
- If anaphylaxis is suspected but the pupil/student does not have a prescribed AAI or Allergy Action Plan, lie the pupil/student down with their legs raised, call 999 and explain anaphylaxis is suspected. Inform the operator that spare AAIs are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare AAI can be administered to anyone for the purposes of saving their life
- If, after 5 minutes, there is no improvement, use a second AAI and call the emergency services again and inform them that a second dose of adrenaline has been given
- Do not move the pupil/student 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 should accompany them in an ambulance until a parent or guardian arrives

Training

The school is committed to training all staff annually 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
- How to recognise and treat an allergic reaction, including anaphylaxis
- How the school manages allergy, for example Emergency Response Plan, documentation, communication etc.
- Where AAIs are kept (both prescribed AAI and spare AAI) and how to access them
- The importance of inclusion of pupils/students with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying
- Understanding food labelling
- Taking part in an anaphylaxis drill

1.1 The school will carry out an anaphylaxis drill at least once a year.

This includes:

- An exercise simulating an event where a pupil/student or member of staff has an allergic reaction and testing the whole school response.

Asthma



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

Reporting Allergic Reactions

The school will log allergic reaction incidents and near-misses by completing the Trust incident recording form and sharing it with the Trust H&S Lead, and in accordance with the Health and Safety Policies.



Appendix 1

Definitions

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

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 UK 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 AAI, 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 AAI.

Allergy Action Plan: This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan. We use the BSACI Allergy Action Plan paediatric templates which include versions for: people without a prescribed AAI, and people prescribed with different brands of AAI. [Paediatric Allergy Action Plans - BSACI](#)

Designated Allergy Lead: The member of staff responsible for overseeing allergy management across the school and acting as the main point of contact for pupils/students, parents and staff.

NEFFY: Neffy (official name in the UK is EURNeffy) is a nasal spray which delivers adrenaline. It is a needle-free alternative to an adrenaline auto-injector approved. Neffy was approved for use in the UK in 2025 and distribution is expected from late September. There is a factsheet attached to this Policy for reference.

Individual Healthcare Plan: A detailed document outlining an individual pupil's/students' medical conditions, history, treatment, risks and action plan. This document should be created by schools in collaboration with parents/carers and, where appropriate, pupils/students. All pupils/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 risks. Allergy should be included on all risk assessments for events on and off the school site.

Spare AAI: Schools are able to purchase spare AAI. These should be held as a back-up, in case pupils'/Students' prescribed AAI are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

Appendix 2



MANAGING ALLERGIC REACTIONS

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 pupil
- Call for help
- Locate adrenaline pens
- Give antihistamine
- Make a note of the time
- Phone parent or guardian
- Continue to monitor the pupil

SERIOUS ALLERGIC REACTIONS / ANAPHYLAXIS

The most serious type of reaction is called **ANAPHYLAXIS**. 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.

Anaphylaxis usually occurs within 20 minutes of eating a food but can begin 2-3 hours later.

People who have never had an allergic reaction before, or who have only had mild to moderate allergic reactions previously, can experience anaphylaxis.



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

1. Take the medication to the patient, rather than moving them.
2. The patient should be lying down with legs raised. If they are having trouble breathing, they can sit with legs outstretched.
3. 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.
4. Inject adrenaline into the upper outer thigh according to the manufacturer's instructions.
5. 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.
6. Stay with the patient and do not let them get up or move, even if they are feeling better (this can cause cardiac arrest).
7. Call the pupil's emergency contact.
8. 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.
9. Start CPR if necessary.
10. 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.](#)