Wootton St Peter's CE Primary School

Allergen Management Policy

Date Adopted by Governing Body: July 2026

Date to be Reviewed: July 2029

Contents

1. Introduction 3
2. Aims 3
3. Legislation and statutory responsibilities 4
4. Allergy Management Checklist 5
5. Roles and Responsibilities 6
   5.1. Chief Executive Officer ..... **Error! Bookmark not defined.**
   5.2. Operations Director ..... **Error! Bookmark not defined.**
   5.3. Headteachers, Head of Schools and Executive Headteachers 6
   5.4. Allergy Governor 7
   5.5. Allergy Lead 7
   5.6. Member(s) of Staff responsible for medical needs 9
   5.7. All Staff 10
   5.8. Parents/Carers 11
   5.9. Pupils/Students with allergies (as age appropriate) 12
6. Risk Assessments 12
7. Risk Register 13
8. Cambrian Learning Trust (CLT) Central Register 13
9. Allergy Action Plans (AAPs) 13
10. Supply, storage and care of medication 14
11. Staff Training 16
12. Inclusion and Safeguarding 16
13. Allergies and Bullying 16
14. Catering 17

Catering Contractor Responsibilities 17

15. Allergy awareness and nut bans 18
16. GDPR 18
17. Supplementary Policies and Procedures 18
18. Monitoring Arrangements 18

Appendix I – First Aid for Anaphylaxis Poster 19
Appendix II – Epipen AAI and Jext AAI Instructions 20
Appendix III – Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector 21
Appendix IV – Flowchart for Allergic Reaction with use of Adrenaline Auto-Injector 22
Appendix V – Information on Allergies 23
Appendix VI – Other support and resources 24
Appendix VII – Top 14 Allergens Poster 25

1. Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more sever reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. The whole body is affected often within minutes of exposure to the allergen but sometimes hours later. Causes can include foods, insect stings and drugs.

Common UK allergens include (but are not limited to):

Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

Please refer to Appendix VII for further identification of the top 14 Allergens.

2. Aims

Wootton St Peter's CE Primary School aims to support the Department of Education (DfE)'s statutory guidance on allergen management. For clarity, this statutory guidance refers to allergies, and not food intolerances or preferences, and to new anaphylaxis response requirements.

The Trust is committed to promoting a Trust wide approach to the health, welfare and wellbeing and the safe management of those members of our school communities who live with specific allergies.

Wootton St Peter's CE Primary School is committed to promoting a whole school approach to the health, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies.

Wootton St Peter's CE Primary School and FGB will implement this policy by:

- Appointing a Named Allergy Governor (within the role of Health and Safety Link Governor) to oversee all safety policies and reporting those allergic incidents/near misses that occur up to the Local Governing Committee as part of business-as-usual procedures.
- Appointing a Named Allergy Lead – Charles Pitt, the headteacher, responsible for driving awareness of allergy safety policy within the school and championing its cause.

- Maintaining a Risk Register highlighting the risk of potential allergy incident(s).
- Maintaining a Central Register on Arbor (MIS)to record near misses / incidents.
- Providing allergy training to every single member of staff in the school.
- Developing and monitoring individual healthcare plans (IHCPs) for every child with an allergy which requires active management together with a Risk Assessment.
- Developing an Allergy Action Plan (AAP), in conjunction with the IHCP, for every child with an allergy that requires active management.
- Ensuring that spare Adrenaline Auto-Injector (AAI) Pens are available within the School.
- Fostering closer relationships with catering contractors to ensure a coherent allergen management policy.
- Ensuring inclusivity for all children irrespective of their background, ethnicity or different cultural heritage.

3. Legislation and statutory responsibilities

This policy is based on the Department for Education (DfE)'s statutory guidance on allergen management entitled "Supporting Children and Young People with Medical Conditions and Allergy" and reflects the outcome of the DfE Consultation entitled "Proposal on support for pupils with medical conditions at school".

It also reflects up to date guidance found here: DfE Allergy Guidance for Schools

This policy also meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

4. Allergy Management Checklist

The following is intended to assist in the allergen management process within the school.

Question	Tick to Confirm
Do all children, where appropriate, have an Individual Healthcare Plan?	☐
Has your school purchased spare Adrenaline Auto-Injector pens?	☐
Does each child, where appropriate, have a completed and signed Allergy Action Plan?	☐
Have ALL school staff been trained in allergy and anaphylaxis?	☐
Does the school allergy policy include where and how to store AAIs?	☐
Is there a schedule to check the expiry dates on spare AAIs and each child's AAI?	☐
Does the allergy policy cover catering for children with allergies?	☐
Does the allergy policy include pupil allergy awareness?	☐
Has the school completed an allergy risk assessment?	☐
Does the allergy policy include risk assessment of extra curricula activities?	☐
Does the allergy policy cover safeguarding children with allergies, including bullying?	☐

5. Roles and Responsibilities

Roles and responsibilities are defined as follows.

5.1. Headteachers

This person is responsible for:

- Day-to-day responsibility for the effective delivery of this policy.
- Ensuring the school's arrangements to identify and safeguard the wellbeing of pupils, because of their own or someone else's allergy, are robust and effective.
- Ensuring the school's arrangements to identify and safeguard any member of staff, because of their own or someone else's allergy, are robust and effective and supportive of that staff member in their role.
- Ensuring the school's arrangements to identify and safeguard any visitor(s) to the school, because of their own or someone else's allergy, are robust and effective and appropriately managed (e.g. at visitor sign-in, an option to advise of any allergy details could be included in the same way as car registration number is requested.
- Ensuring that on Open Days and/or Sports Days, when many visitors attend the school, that the completion / management of appropriate Risk Assessments has been undertaken.
- Ensuring 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. Logging all training and attendees.
- Fostering an environment whereby all staff are confident and clear that anaphylaxis is time-critical and requires prompt action, free of any personal liability for administering adrenaline in an emergency.
- Ensuring adequate resources for managing allergies are available.
- Ensuring appropriate material is available on the school website for parent/carers highlighting how the school is managing pupils/students with allergies, including catering menus.
- Ensuring the school has a system in place so that Catering staff can identify pupils with allergies – e.g. a list with photographs, coloured bands, lanyards, etc.
- Ensuring, where food is provided by the school, that staff are trained how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils.
- Ensuring food is not given to primary school age food allergic children without parental engagement and permission (e.g. birthday sweets, food treats).

- Ensuring the use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) is carefully considered, including the need to restrict/risk assessed depending on the allergies of particular children and their age.
- Supporting, with monitoring, the effectiveness of this policy to ensure it remains fit for purpose by providing data on any allergic near misses/incidents to the Local Governing Committee via the Allergy Governor (see below).

5.2. Allergy Governor

Within the role of Health and Safety Link Governor.

The Local Governing Committee's named representative below is responsible for overseeing all safety policies and procedures and reporting any allergic near misses/incidents to the Local Governing Committee (via data provided by the Headteacher) is:

[insert name, title – contact would be via the LGC Clerk or school office]

This person is responsible for:

- Overseeing the school management of allergy risk assessment and emergency procedures.
- Overseeing the effective delivery of this policy by the Allergy Lead.
- Overseeing the school's arrangements to identify and safeguard the wellbeing of pupils, because of their own or someone else's allergy.
- Overseeing the school training, information, instruction, induction and supervision via the Local Governing Committee Meetings to enable everyone to stay safe regarding allergies and their management.
- Supporting with monitoring the effectiveness of this Policy to ensure it remains fit for purpose.

5.3. Allergy Lead

This school's Allergy Lead is[1]: Charles Pitt, Headteacher, office.3854@wootton-abingdon.oxon.sch.uk

This person is responsible for:

[1] In smaller schools this may be the Headteacher or Head of School, in which case, the responsibilities can be combined into one section under Headteachers, Heads of Schools, Executive Heads / Allergy Lead

- Providing, as far as practicable, a safe and healthy environment in which people at risk of allergic reaction and anaphylaxis can participate equally in all aspects of school life and are not subject to bullying because of their condition.
- Ensuring all visitors, volunteers, work experience students, sub-contractors are made aware of the school's commitment to allergy management as part of Safeguarding.
- Ensuring the curriculum contains age-appropriate content so all pupils/students can learn about allergies and how everyone can support those who have them.
- Creating links at strategic level with Healthcare professionals and Catering contractors and ensuring at operational level that those links are robust.
- Ensuring the system for Catering staff identifying pupils with allergies is effective
- Ensuring that up-to-date allergy information for pupils/students is accessible to catering teams.
- Ensuring there is a workable School Emergency Plan in place that is known by all staff.
- Ensuring the school sends a copy of the medical details it holds for the child to parents/carers for review and update at the end of each school year. Seek updated medical information at the commencement of each calendar year and for any pupil/student joining in year.
- Where the pupil/student has an Individual Healthcare Plan (IHP), ensuring the involvement of healthcare and welfare professionals, teaching and catering staff, parents/carers and the pupil/ student in establishing IHPs.
- Encouraging parents/carers to provide Allergy Action Plans (AAPs) completed and signed by a healthcare professional that can be kept with their medication with copies made available for all staff to access and help the school support the pupil/student.
- Ensuring effective communication of individual pupil medical needs to all staff and that they know how and where to check for updated information
- Ensuring allergen training is undertaken by all staff within the school.
- Ensuring First Aid staff training includes anaphylaxis management, including awareness of triggers, anaphylaxis and first aid emergency procedures.
- Ensuring a Risk Register is maintained highlighting the risk of potential allergy incident(s).
- Ensuring adequate Risk Assessments are undertaken prior to any school trips, excursions or offsite extra curricula activities for pupils/students who have allergies.
- Ensuring records of pupils/students medically prescribed an AAI and its use are kept correctly.

- Ensuring pupil/student documentation and in date medication is kept correctly and safely.
- Ensuring best practice in the labelling of foodstuffs and their contents.
- Reporting to the Allergy Governor regarding the management of allergies and any near misses/incidents that occur.

5.4. Member(s) of Staff responsible for medical needs

Emergency First Aiders

Members of staff responsible for pupil medical needs within the school must:

- Follow all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context.
- Report to the Head / Head of School regarding pupils/student with allergies.
- Lead on the training of staff regarding allergy medical needs and their identification and management.
- Work closely with Catering teams in assisting in the support of pupils/students with known allergies (including meeting with parents/carers where requested) to discuss any special requirements.
- Monitor where there is a school ‘tuck shop’ or home baked items are brought into school.
- Liaise with parents/carers of pupils/students with known declared allergies to produce a risk assessment for their child that includes sharing of information, allergy management, risk minimisation and emergency actions.
- Wherever possible use an AAP for pupils with recognised allergies and keep it with their medication. Ensure copies of the AAP are available for all staff to access.
- If an additional written IHP is not required, ensure that the AAP is viewed and treated with the same level of seriousness.
- Ensure all copies of the AAP/IHP located around the school and/or on IT systems are identical if an updated version is received.
- Where an AAP has not been received for a pupil with recognised allergies, or if the medication information is not clear, liaise with GP/school nursing team, to obtain an up-to-date copy and/ or clarification.
- Ensure medication is stored in a rigid box and clearly labelled with the pupils/student’s name and a photograph (older students should carry their AAIs and medication with them).

- Be trained in the use of an Adrenaline Auto-Injectors (AAIs) and be competent in performing any possible required prescribed medical treatment as outlined in the pupil/student's IHCP and/or AAPs.
- Ensure that any other staff involved with those pupils/students requiring the use of an AAI are also adequately trained and competent.
- Ensure all school trips, excursions or off-site extra curricula activities for pupils/students are pre-checked so that 'safe' food is provided or that an effective control is in place to minimise risk of exposure for pupils with allergies.
- Ensure the school has an audited spare supply of in date AAIs that are kept in a safe space at room temperature that is accessible, secure but not locked away and all staff are aware of the location.
- Monitor the use of all AAIs to ensure they are within the expiry date including those brought into the school by pupils/students or external sources and are of the correct dosage.
- Arrange for the correct disposal of out-of-date AAIs.
- Where anaphylaxis is suspected in an undiagnosed individual, call the emergency services and state ANAPHYLAXIS is suspected, then follow their advice as to whether administration of a spare AAI is appropriate.
- Record all emergency uses of AAIs or reports of suspected emergencies.
- Ensure that, if a pupil/student notifies school that they are no longer allergic to a food, this information is checked prior to updating records and the IHP (if applicable).

5.5. All Staff

Responsibilities will vary depending on role.

- Following as directed all the requirements of the school, including all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context.
- Completing appropriate allergen training in order to be confident to respond to an allergy emergency.
- Raising awareness about allergies and anaphylaxis amongst their pupils/students in the classroom and around school, especially in dining areas.
- Encouraging self-responsibility and learning avoidance strategies amongst pupils/students living with allergies.
- Helping all pupils/students understand which foods are safe for those with allergies and how they can support other pupils/students with specific dietary needs to stay safe.

- Highlighting the need for anti-bullying of pupils/students with the condition.
- Being aware of the pupils in their care (including regular cover classes) who have known allergies as an allergic reaction could occur at any time, not just at breaks or mealtimes.
- Any food-related activities being supervised with due caution whilst following best practice for storing, preparing, cooking and serving food.
- Ensuring, if in a lead role, that they check on a school trip that all pupils/students with medical conditions, including allergies, are carrying their medication (those unable to produce their required medication would not be able to attend the excursion).
- Ensuring, if in lead role, that they carry all relevant emergency supplies with them on a school trip, excursion or off-site extra curricula activity.

5.6. Parents/Carers

Are responsible for:

- Notifying the school of the pupil/student's allergies.
- Informing the school of any changes as soon as known.
- Notifying Catering contractors directly of the pupil/student's allergies together with provision of supporting medical evidence.
- Informing the Catering contractors directly of any changes as soon as known.
- Talking with their child about allergy self-management, including what foods are safe and unsafe, how to read food labels, strategies for avoiding allergens, how to spot symptoms of allergy, how and when to tell an adult if experiencing an allergic reaction.
- Ensuring where relevant that water bottles and lunch boxes provided are clearly labelled with the name of the child for whom they are intended.
- Providing an Allergy Action Plan (AAP) completed by a healthcare professional that can be kept with their medication and help the school support the pupil/student.
- Contributing to the provision of an IHCP in partnership with the school, and relevant healthcare professional, where required.
- Ensuring that their child's IHCP plans in advance for and reflects the fact that their child will refuse an adrenaline autoinjector, despite symptoms of anaphylaxis, if already known. Providing any other written medical documentation, instructions and medications as directed by a health professional.
- If required, meeting with the Catering Contractor to discuss any specific requirements relating to their child's allergy (information from these meetings will be recorded by the Catering Contractor and copied to the Named Allergy Lead).

- Being aware of the school Allergy Policy and any arrangements for managing children with allergies and at risk of anaphylaxis.
- Communicating regularly with the school to support their ability to keep their children safe and act immediately in the event of an allergic reaction.
- Providing appropriate in date medication (two AAIs) of the correct dosage and register their AAIs on the manufacturer's websites to receive text alerts for expiry dates.
- Providing appropriate foods to be consumed by their child if necessary.
- Replacing medications after use or upon expiry.
- Reviewing the Policy and procedures with the school's Head and/or Member of Staff responsible for medical needs, the pupil/student's doctor and the pupil (if age appropriate) after a reaction has occurred.

5.7. Pupils/Students with allergies (as age appropriate)

Are responsible for:

- Having a good awareness of their allergy and supporting the knowledge of peers in helping keep them safe.
- Being proactive in the care and management of their food allergies and reactions and medication.
- Being sure not to exchange food with others and taking care to avoid any foods which may cause an allergic reaction.
- Reading food labelling but, if unsure, avoiding that food.
- Avoiding eating anything with unknown ingredients.
- Knowing where their medication is kept and (if age appropriate and confident enough to administer their own AAIs) take responsibility for carrying AAIs on their person at all times.
- Telling an adult, as soon as they suspect they are experiencing signs of allergic reaction.

6. Risk Assessments

Wootton St Peter's CE Primary School will conduct a detailed individual risk assessment for all existing, new joining pupils with allergies and any pupils newly diagnosed.

7. Risk Register

Wootton St Peter's CE Primary School will maintain a Risk Register which will include the following key components to ensure comprehensive management of allergies:

a. **Allergen Identification**: A list of allergens present in the school environment, including food items, medications and other potential allergens.

b. **Individual Healthcare Plans (IHCPs):** Information on any pupils requiring IHCPs including details of their medical condition, medication, emergency contacts and any clinical action plans.

c. **Risk Assessments**: Regular assessments of the school environment to identify potential allergen sources and risks.

d. **Staff Training:** Details on the training provided to staff on allergen management, including emergency response protocols.

e. **Incident Reporting:** Procedures for reporting an allergic reactions or incidents to the school's local governing committee and, where necessary, the Resources Committee.

f. **Communication:** Guidelines on how to communicate with parents, guardians and pupils regarding allergies and their management.

g. **Emergency Procedures:** Procedures for managing anaphylaxis and other severe allergic reactions including the use of AAIs and the role of designated First Aiders.

8. Wootton St Peter's CE Primary School Central Register

All staff are responsible for entering any near misses and/or incidents that occur within the school on to the school's MIS -Arbor. Health & Safety reports are reviewed on a termly basis at FGB meetings.

9. Allergy Action Plans (AAPs)

Allergy Action Plans (AAPs) are designed to function as individual health care plans for children with food allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare Adrenaline Auto-Injector (AAI).

Where a pupil refuses an AAI, despite symptoms of anaphylaxis, the school will call 999 immediately, seek emergency advice and ensure an ambulance is on its way. If refusal is a known risk, this should be planned for in advance with the pupil and family and reflected in pupil's IHCP as referenced above (section 5.8).

AAPs are critical for timely and effective management of severe allergic reactions.

10. Supply, storage and care of medication

Dependent upon their level of understanding and competence, pupils are encouraged to take responsibility for and to carry their own two AAIs on them at all times (in a suitable bag/container).

Younger Children

- In their classroom

Medication should be stored in a suitable container and clearly labelled with the pupil's name.

The pupil's medication storage container should contain:

- Two AAIs i.e. EpiPen® or Jext®
- An up-to-date Allergy Action Plan (AAP)
- Antihistamine as tablets or syrup (if included on Allergy Action Plan)
- Spoon if required
- Asthma inhaler (if included on Allergy Action Plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the school administrator will check the medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

Storage

AAIs should be stored at room temperature, protected from direct sunlight and temperature extremes.

Disposal

AAIs are single use only and must be disposed of as sharps.

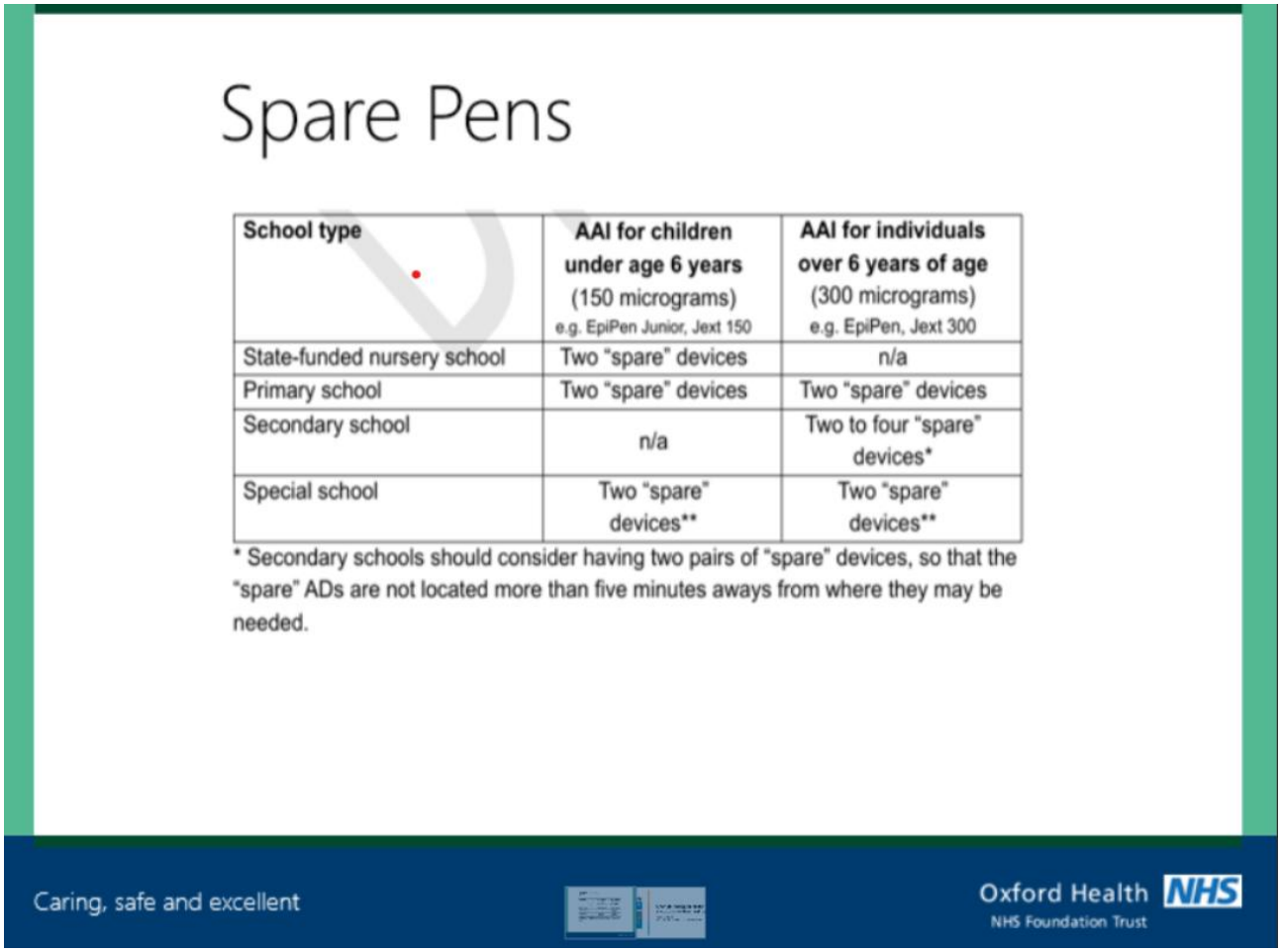
Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin.

Sharps bins to be obtained from and disposed of by a clinical waste contractor/specialist collection service/ local authority (delete as appropriate).

The sharps bin is kept in the school office.

Spare AAIs

Oxford Health NHS Foundation Trust has issued the following guidance in relation to spare quantities of AAIs that schools should consider holding:



Spare Pens

School type	AAI for children under age 6 years (150 micrograms) e.g. EpiPen Junior, Jext 150	AAI for individuals over 6 years of age (300 micrograms) e.g. EpiPen, Jext 300
State-funded nursery school	Two "spare" devices	n/a
Primary school	Two "spare" devices	Two "spare" devices
Secondary school	n/a	Two to four "spare" devices*
Special school	Two "spare" devices**	Two "spare" devices**

* Secondary schools should consider having two pairs of "spare" devices, so that the "spare" ADs are not located more than five minutes aways from where they may be needed.

Caring, safe and excellent

Oxford Health NHS
NHS Foundation Trust

Wootton St Peter's CE Primary School has purchased Qty 2x spare AAIs for emergency use in children who are at risk of anaphylaxis (if their own devices are not available or not working) or are experiencing anaphylaxis for the first time. This is in accordance with the current recommended guidance.

These are stored in location(s) referenced below and are clearly labelled 'Emergency Anaphylaxis Adrenaline Pens'. They are accessible and known to all staff.

- The office cupboard next to the office door

The school secretary is responsible for checking the spare medication is in date on a monthly basis and will replace as needed.

Written parental permission for use of the spare AAIs is included in the Pupil's Allergy Action Plan.

11. Staff Training

The named staff members responsible for co-ordinating staff anaphylaxis training are:

Catherine Porter, Health and Safety Lead

Allergy training will be provided annually to all staff within the school, and on an ad-hoc basis during the induction of new staff.

Training will include:

- Knowing the common allergens and triggers of allergy.
- Spotting the signs and symptoms of an allergic reaction and anaphylaxis. Early recognition of symptoms is key, including knowing when to call for emergency services.
- Administering emergency treatment (including AAIs) in the event of anaphylaxis - knowing how and when to administer the medication/device.
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance.
- Knowing who is responsible for what.
- Associated conditions e.g. asthma.
- Managing Allergy Action Plans and ensuring these are up to date.

12. Inclusion and Safeguarding

Wootton St Peter's CE Primary School is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can lead a full and active role in school life, remain healthy and achieve their academic potential.

13. Allergies and Bullying

A robust Anti-Bullying Policy is in place within Cambrian Learning Trust (CLT)'s schools and allergy bullying is not tolerated. Please refer to Wootton St Peter's CE Primary School's Anti-Bullying Policy for further information.

14. Catering

We expect that our catering contracts meet all the requirements of the **Food Information Regulations 2014** and any relevant governmental guidance.

Note: Catering contractors have no statutory obligation to provide menu options for lifestyle choices.

Catering Contractor Responsibilities

- Overall responsibility for allergen management for the catering service and to communicate / liaise with the Allergy Lead at each school to ensure correct allergy controls are in place.
- Ensure allergen information relating to the 'Top 14' allergens is available for all food products.
- Ensure the food provided within each school setting is to be safe, appropriate and inclusive
- Ensure the menu is provided to schools in advance with all ingredients listed and allergens highlighted. While this menu will take into account legally specified food allergens, it cannot be adapted to meet other dietary requirements. For specific food intolerances, an appointment should be made to see the catering lead to view the Allergen Information (recipe) sheets.
- Ensure that all staff are trained.
- Ensure allergen procedures are implemented within the catering facilities.
- Point of contact for members of staff in case of any uncertainty in handling an allergy enquiry (usually the Catering lead in the kitchen)
- Following the correct procedures and reporting concerns to the Catering lead in the kitchen in the first instance.
- The Catering team are responsible for creating, and making available on request, Allergen Information Sheets (recipe sheets) for all dishes and keeping them up to date.
- The catering team are responsible for ensuring menu items have allergen information accurately recorded on the Allergy Matrix.
- The Operations Managers for the Catering contracts are responsible for ensuring all staff are trained in Allergen Awareness.
- The catering team are responsible for considering allergens when planning and reviewing menus and recipes.
- The catering team are responsible for avoiding cross-contamination.
- All dishes provided to be labelled in WORDS not abbreviations or symbols.

- Information must be easily available within the Dining Hall for the child to check.

15. Allergy awareness and nut bans

Cambrian Learning Trust supports the approach advocated by many allergy charities towards nut bans/nut free schools. We would not advocate a blanket ban on any particular allergen in any establishment because nuts are only one of many allergens that could affect pupils and no school could guarantee a truly allergen free environment for a child living with food allergy. We advocate instead to adopt a culture of allergy awareness and education.

We therefore do not ban nuts from our schools and we do not claim to be ‘nut free’ as the Anaphylaxis Campaign highlights a number of problems with this approach, including:

- There would be a risk that children with allergies might be led into a false sense of security
- The nut ban would be seen as a precedent for demands to ban other potentially ‘risky’ foods

Our catering contractors do not purchase any product containing nuts or peanuts, or anything that states ‘may contain nuts’.

There is nothing on the catering menu that contains nuts.

16. GDPR

Please note that any information passed to our catering contractors and their teams complies with GDPR.

17. Supplementary Policies and Procedures

This policy should be read in conjunction with the following Cambrian Learning Trust (CLT) Policies and Procedures:

- First Aid Policy 2024-2027
- Supporting Students with Medical Conditions Policy
- Accidents, Incident & Near Miss Reporting & Investigation Procedure, V1.3

18. Monitoring Arrangements

This policy will be reviewed every three years and approved by the Trustees.

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 (1180498) Scotland (SC051610). 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

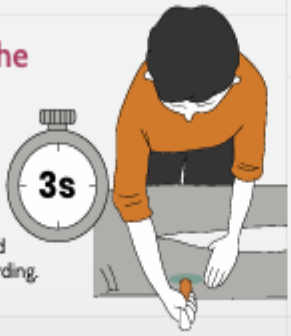
Grasp the EpiPen in your dominant hand and remove the blue safety cap by pulling straight up. **Remember: Blue to the Sky, Orange to the Thigh!**

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 >>

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

Empower • Include • Protect
AllergySchool.org.uk

Registered charity England & Wales (1180498) Scotland (SC051610). Based on BSACI and 2023 MHRA guidance. Source: EpiPen.

Appendix III – Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector

Refer to the child's Allergy Action Plan if they have one and call for other staff to 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 given 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)
- 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 and 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 Allergy Action Plan if they have one and call for other staff to 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 given 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)
- 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 and legs raised

Administer Auto-Injector (AAI)

1. Check in-date, safety cap intact
2. Remove safety cap
3. Hold needle firmly, inject into thigh
4. AAI clicks, hold for 3 seconds
5. Remove AAI carefully
6. 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 of ambulance

Appendix V – Information on Allergies

The most common cause 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 (shredded 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

Sever 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 – Other support and resources

- Allergy Guidance for Schools
- Allergy UK Helpline: providing support, advice and information for those living with allergic disease tel. weekdays 9am-5pm 01322 619898 – www.allergyuk.org
- Early Years Foundation Stage Statutory Guidance, Section 3 Safeguarding and Welfare Requirements – Food and Drink – Statutory framework for the early years foundations stage – publishing.service.gov.uk
- Example menus for early years settings in England – Part 1 Guidance – Example menus for early years settings in England: part 1 (publishing.service.gov.uk) – Managing food allergies, intolerances and meeting cultural needs; Providing food allergen information; Reading food labels; Allergen information
- Food Standards Agency food allergy and intolerance online training
- For pupils/students with Medical Conditions at School – supporting pupils with medical conditions gov uk
- Wales
- Scotland
- Northern Ireland
- FSA reporting tool for allergies
- Guidance on the use of adrenaline auto-injectors in school (Department of Health, 2017)
- Wales
- Training for Schools
- Transitioning to Secondary School
- Whole school allergy and awareness management

Appendix VII – Top 14 Allergens Poster