



Broomhaugh and Corbridge
Church of England
First Schools

Allergy and Anaphylaxis Policy

Inspired by Jesus, we make a difference in God's world by
being 'the best that we can be'.

Louise Storey
Allergy and Anaphylaxis Lead

This policy applies to all staff, pupils and volunteers in school. The Headteacher and Louise Storey are responsible for policy implementation and for ensuring staff receive appropriate training. Class staff are responsible for daily implementation. Governors (or the Resources Committee) will receive an annual report on allergy management in school and information regarding any near misses / lessons learnt.

Author/s	Louise Storey
Review Frequency	Yearly
Date approved by governors	October 2026
Date of next review	September 2027
Purpose	To minimise the risk of any pupil suffering a serious allergic reaction whilst at school or attending any school related activity. To ensure staff are properly prepared to recognise and manage serious allergic reactions should they arise.
Links with other policies	Supporting Pupils with Medical Conditions Safeguarding Behaviour Anti-bullying Health and Safety

The named staff members responsible for coordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:

Louise Storey and Suzanne Hart

Contents

1. Introduction
2. Roles and responsibilities
3. Allergy Action Plans and Individual Health Plans
4. Emergency treatment and management of anaphylaxis
5. Supply, storage and care of medication
6. Staff training
7. Inclusion and safeguarding
8. Catering
9. School trips
10. Allergy awareness and nut bans
11. Risk assessment
12. Useful links

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 severe 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 it can be hours later. Causes can include foods, insect stings and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation).

It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens.

Common UK Allergens include (but are not limited to):-

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

Coeliac disease and food intolerance can present symptoms which are similar to those of food allergy; it is important that Coeliac disease and food intolerance is managed through dietary avoidance, these conditions do not pose a risk of anaphylaxis and so they are not within this allergy safety policy.

This policy sets out how Corbridge and Broomhaugh First Schools will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

2. Role and responsibilities

Parent Responsibilities

- On entry to the school, it is the parent's responsibility to inform the school of any allergies. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication.
- Parents are to supply a copy of their child's Allergy Action Plan to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. School nurse/GP/allergy specialist.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.

Staff Responsibilities

- All staff in school will complete anaphylaxis training. Training is provided to staff annually.
- Staff (regular or cover) must be aware of the pupils in their care who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.

- Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, have any necessary medication near to hand and carry out risk assessment procedures before the trip.
- The SENCO (also Allergy and Anaphylaxis lead) will ensure that the up-to-date Allergy Action Plan and Individual Health Plan (I.H.P) is kept with the pupil's medication.
- It is the parent's responsibility to ensure all medication is in date however the SENCO/Office Manager will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
- The SENCO/Office Manager will keep an allergy risk register which includes pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of use of any AAI(s) and emergency treatment given. This will be re-shared with staff on a termly basis.
- The SENCO/Office Manager ensures that any reaction or near miss is recorded and reported internally or in accordance with RIDDOR.

Pupil Responsibilities

- Pupils are encouraged to have a good awareness of their symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.
- Pupils who are trained and confident to administer their own AAIs will be encouraged to take responsibility for carrying them on their person at all times.

3. Action Plans

Allergy Action Plans and Student Individual Healthcare Plans (IHPs)

Allergy Action Plans

- These are clinical documents that are created by a GP / allergy nurse or allergy clinic. They detail the student's allergy and medication.
- These contain parent/carer contact details and must be signed by the parent/carer as this is the parental authority to administer medication including the administration of spare adrenaline devices.
- These will only be updated by the medical professional following a review of the student's allergy management, this could be annually or up to 5 yearly.

Allergy action plans are issued for students who have an IgE food allergy and often a venom allergy that could lead to anaphylaxis. They are not issued for all allergies. Students with nonIgE allergies don't experience anaphylaxis and so an allergy action plan is not issued.

Individual Healthcare Plans (IHPs)

Individual healthcare plans provide clarity about the arrangements which need to be in place to ensure that a student is fully included in the life of the school. They will identify exact risk-mitigation measures that need to be followed.

Individual Healthcare Plans are school owned documents that are co-created by school, parents/carers and students. They should include any advice received from health professionals. Where a child has an allergy action plan and or an asthma plan, this must be included with the IHP.

It is good practice to review IHPs annually or when staff change however they must be reviewed if an incident or near miss occurs. They need to be brought to the attention of supply or cover staff and be passed on during transition to a new school.

Corbridge and Broomhaugh First Schools will ensure that:

- students with an allergy action plan and/or an asthma plan have an individual healthcare plan;
- students without an allergy action plan or asthma plan but have an allergy that needs active management over and above what other students need will have an individual healthcare plan;
- individual healthcare plans are created whilst students are waiting for a diagnosis where necessary.

4. Emergency Treatment and Management of Anaphylaxis

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.

Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

More serious symptoms are often referred to as the ABC symptoms and can include:

- AIRWAY - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- BREATHING - sudden onset wheezing, breathing difficulty, noisy breathing.
- Consciousness - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more severe reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. **Adrenaline** is the mainstay of treatment, and it starts to work within seconds.

What does adrenaline do?

- It opens up the airways
- It stops swelling
- It raises the blood pressure

As soon as anaphylaxis is suspected, adrenaline must be administered without delay. Action:

- Keep the child where they are, call for help and do not leave them unattended.
- **LIE CHILD FLAT WITH LEGS RAISED** – they can be propped up if struggling to breathe but this should be for as short a time as possible.

- **USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY** and note the time given. AAI's should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.
- **CALL 999** and state **ANAPHYLAXIS (ana-fil-axis)**.
- If no improvement after 5 minutes, administer second AAI.
- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

Serious Incidents and "Near Misses"

Corbridge and Broomhaugh First Schools approach serious incidents and "near misses" in a "no blame" spirit, seeking to learn lessons and address any issues which the incident identified, so that students are better protected in the future.

Corbridge and Broomhaugh First Schools are aware, when an incident occurs, that materials such as residues of food consumed or handled or samples of fluids may constitute evidence, which may need to be seized and retained. Corbridge and Broomhaugh First Schools use CPOMS to record allergic reactions (incidents) and near misses (e.g., accidental exposure without reaction, or labelling errors) immediately.

The incident or near miss will be reviewed and a report written. Corbridge and Broomhaugh First Schools will share the report with the student's parents/carers. They should be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. Corbridge and Broomhaugh First Schools will confirm what it has learned from the incident and outline any actions it is taking as a result. The student's IHP will be updated if necessary.

5. Supply, storage and care of medication

Depending on their level of understanding and competence, pupils will be encouraged to take responsibility for and to carry their own **two** AAI's on them at all times in a suitable bag/container.

For younger children or those not ready to take responsibility for their own medication, there should be an anaphylaxis kit which is kept within 5 minutes of them, not locked away and **accessible to all staff. Personal anaphylaxis kits will be kept in marked classroom cupboards so they are accessible by all staff at all times in under five minutes if they are required.**

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 AAI's i.e. EpiPen® or Jext®
- An up-to-date allergy action plan and Individual health plan.
- 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 SENCO/Classroom staff will check 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 AAls their child is prescribed, to make sure they can get replacement devices in good time.

Older children and medication

Older children and teenagers should, whenever possible, assume responsibility for their emergency kit under the guidance of their parents. However, symptoms of anaphylaxis can come on **very suddenly**, so school staff need to be prepared to administer medication if the young person cannot.

Storage

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

Disposal

AAls are single use only and must be disposed of as sharps. Used AAls can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin.

Spare Adrenaline Auto Injectors (A.A.Is)

Both schools' stock two pairs of spare AAls – one pair for children aged 5 years and under and one pair for children aged 6 and over. The AAls will be stored in the school offices and be readily accessible to all staff. They will be clearly labelled **SPARE** to avoid confusion with any device prescribed to a named person. At both schools the proximity of the office allows for AAls to be collected and taken to any child or adult experiencing signs of anaphylaxis within 5 minutes.

Spare AAls will be checked termly by the SENCO and office manager and email alerts set to remind the above staff when the devices are approaching their expiry date.

The SENCO and Allergy and Anaphylaxis lead is responsible for disposing of spare devices by returning to the pharmacy where purchased (Health Hut Morpeth) and ordering replacement devices.

6. Staff Training

The named staff members responsible for coordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:-

Louise Storey and Suzanne Hart

All school staff will complete allergy and anaphylaxis training annually and new staff will complete training on induction. In addition to this, all adults (including volunteers and outside professionals) who are regularly on site when children are present will be asked to complete training and provide school with proof that it has been completed.

Training includes:

- 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 AAls) 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
- Managing allergy action plans and ensuring these are up to date

School ensures that staff undertake a practical session using trainer devices at least annually.

7. Inclusion and safeguarding

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 play a full and active role in school life, remain healthy and achieve their academic potential.

Corbridge and Broomhaugh First Schools recognise that a safeguarding referral may be needed if an incident highlights concern that the child or young person might be at an increased risk of being neglected, abused or exploited by persons inside or outside of their family unit because of their medical condition. This might occur where relevant information about a child or young person's medical condition is not provided to a school, college or setting, or where they are repeatedly sent without essential medication, thereby putting the individual at risk.

Wellbeing and Support at Corbridge and Broomhaugh First Schools

Allergy safety is a priority and actions to ensure that students are included and safe are embedded into the school's culture. Students with allergies may become anxious as a result of the risk of exposure to allergens and the potential for anaphylaxis, which may be compounded by living with difficult-to-control asthma or eczema.

Corbridge and Broomhaugh First Schools:

- regularly communicate to students, parents and staff about allergies, ensuring ongoing awareness and appreciation of the severity of the potential risks
- share allergy and anaphylaxis lessons and assemblies
- plan school celebrations, rewards, and communal events inclusively from the outset to eliminate social isolation
- involve students and staff with allergies in developing and reviewing the policy and procedures for allergy management
- understand that allergy bullying is extremely serious and actively monitors, prevents, and addresses any stigmatisation or bullying directed at individuals due to their allergies or dietary constraints
- invite new joiners with allergies to have a tour of the kitchen/dining hall so they can meet staff and get used to the mealtime environment which may help to reduce anxiety and enable staff to identify students with allergies in the dining hall

8. Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products.

The school's menu is available for parents to view termly in advance with all ingredients listed and allergens highlighted on the school websites:

www.corbridgefirst.northumberland.sch.uk

<http://www.broomhaugh.northumberland.sch.uk/>

The SENCO/Office Manager will inform the Catering Manager of pupils with food allergies. This information will be displayed in the kitchen.

Parents/carers of children with allergies are required to speak to the Catering Manager to discuss their child's needs before food is provided.

The school adheres to the following Department of Health guidance recommendations:

- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.
- If food is purchased from the school kitchen, parents should check the appropriateness of foods by speaking directly to the catering manager.
- The pupil should be taught to also check with catering staff, before purchasing food or selecting their lunch choice.
- Where food is provided by the school, staff should be educated about 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. For further information, parents/carers are encouraged to liaise with the Catering Manager.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

9. School trips

Staff leading school trips will ensure they carry all relevant emergency supplies.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and actions taken to mitigate these risks. Children with allergies and measures to protect them will be noted on the event specific plan for the trip.

Overnight school trips will require careful planning and a meeting for parents with the lead member of staff planning the trip should be arranged. Staff at the venue for an overnight school trip should be briefed early on that an allergic child is attending and will need appropriate food (if provided by the venue).

Sporting Excursions

Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the P.E. teacher/s are fully aware of the situation. The school being visited will be notified that a member of the team has an allergy when arranging the fixture. A member of staff trained in administering adrenaline will accompany the team.

10. Allergy awareness and nut bans

School supports the approach advocated by Anaphylaxis UK towards nut bans/nut free schools. They would not necessarily support a blanket ban on any particular allergen in any establishment, including in schools. This is 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. They advocate instead for schools to adopt a culture of allergy awareness and education.

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

11. Risk Assessment

On entry to school families fill out an admission form on which information on allergies is collected. When an allergy is noted on an admission form the SENCO will contact the parent/carer and initiate the completion of an I.H.P and sharing of any Allergy Action Plan that is in place for the child. School will conduct a risk assessment as part of the I.H.P process.

12. Useful Links

Anaphylaxis UK - <https://www.anaphylaxis.org.uk/>

Natasha's Foundation - <https://www.narf.org.uk/>

Equal Opportunities and Race Equality Policy

All children regardless of their race, sex, religion, religious belief or ability will be given equal opportunities under this policy.