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Heath Mount School

ALLERGY AND ANAPHYLAXIS POLICY

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AIMS AND OBJECTIVES

This policy outlines Heath Mount School's (the School) approach to allergy management, including how the whole school community works to reduce the risk of an allergic reaction happening and the procedures in place to respond if one does. It also sets out how we support our pupils with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy aware school.

This is a whole school policy including the Early Years Foundation Stage (EYFS).

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.

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 AAIs, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this Policy we will refer to them as Adrenaline Pens.

ALLERGY ACTION PLAN: This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan. The School recommends the BSACI Allergy Action Plan paediatric templates which include versions for: people without a prescribed adrenaline pen, and people prescribed with different brands of adrenaline pen. [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, 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 medical conditions, history, treatment, risks and action plan. This document should be created by schools in collaboration with parents/carers and, where appropriate, pupils. All pupils 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 ADRENALINE PENS: Schools are able to purchase spare adrenaline pens. These should be held as a back-up, in case pupils' prescribed adrenaline pens are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

THE SCHOOL MEDICAL TEAM: means the School Nurse, Matron and Occupational Therapist who are primarily located in the School's Medical Centre (located in the Pavilion). The School Nurse is registered with the Nursing and Midwifery Council and the Occupational Therapist is registered with the Health and care Professional Council and The Royal College of Occupational Therapists.

THE CATERING TEAM means The School's catering contractor, Holroyd Howe, who provide all meals and snacks to pupils, boarders, staff, and visitors.

ROLES AND RESPONSIBILITIES

The School takes a whole-school approach to allergy management.

Designated Allergy Lead

The Designated Allergy Lead is the **Deputy Head (Pastoral) and the Bursar**. They are responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy;
- Taking decisions on allergy management across the school;
- Championing and practicing allergy awareness across the school;
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff [although they have ultimate responsibility, the collation of information may be delegated to another member of staff, for example the school nurse]

- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
- Ensuring staff, pupils and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures.
- Reviewing the school's stock of spare adrenaline pens (check the school has an appropriate number for the setting, that they hold the correct dose, that spare adrenaline pens 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 (e.g. under RIDDOR) where necessary and ensuring the circumstances are investigated and learnings shared;
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy; and
- Ensuring there is an anaphylaxis drill once a year.

At regular intervals the Designated Allergy Lead will check procedures and report to the SMT.

School nurse/ Healthcare team/ Medical Lead

The **School Medical Team** is responsible for:

- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families (this is likely to involve liaising with the admissions team for new joiners);
- Supporting the 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 annually (at a minimum)
- Coordinating medication with families and ensuring medication is in date. [Whilst it's the responsibility of parents/carers to ensure medication is up to date, the nursing team/medical lead should also have systems in place to check this and notify the parents/carers when they see the expiry dates are approaching in respect of medicines held by the school];
- Keeping an adrenaline pen register to include adrenaline pens prescribed to pupils and the school's stock of spare adrenaline pens, including brand, dose and expiry date. The location of spare adrenaline pens should also be documented;
- Regularly checking spare adrenaline pens are where they should be, and that they are in date;
- Replacing the spare adrenaline pens when necessary;
- Providing on-site adrenaline pen training for staff and pupils and refresher training as required e.g. before school trips; and
- Working closely with the School's Catering Team to ensure that they are aware of all existing allergy information relating to staff and pupils and are notified of any changes or additions.

Admissions Team

The Head and admissions team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Leads and the Medical Team to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity and this should be in place before a school visit, an Open Day or Taster Days 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, catering team);
- Parents and applicants are informed of catering arrangements during admission events; and
- 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, domestic staff and occasional staff (for example sports coaches, music teachers and those running breakfast and afterschool clubs) are responsible for:

- Championing and practicing 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 (and staff, when necessary) with allergies and what they are allergic to;
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate;
- Ensuring pupils always have access to their medication or carrying it on their behalf (depending on the age of the pupils)
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;
- Taking part in training and anaphylaxis drills as required (at least once a year). 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 with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy;
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the School Nurse/ Healthcare Team; and
- Ensuring that pupils 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 with allergies;
- Providing the Registrar or School Medical Team, upon joining 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; and
- Encouraging their child to be allergy aware.

Parents of children with allergies

In addition, the parents and carers of children with allergies should:

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

All pupils

All pupils 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 will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency; and

Pupils with allergies

In addition, pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk. The School recognises that this will depend on their age and may not be appropriate with very young children;
- 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;
- 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;
- Medical bags and contents should be left at school and parents are responsible for ensuring that they have additional medication for home use and for the journey to and from school.

INFORMATION AND DOCUMENTATION

Register of pupils with an allergy

The school has a register of pupils who have a diagnosed allergy. This includes children who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed. A list (with photos) of those pupils with severe allergies (who carry adrenaline pens) is displayed in each staff room and the catering kitchens. Staff are regularly reminded of these pupils, and the lists are also stored on the Staff Drive under 'Medical Displays'.

Individual Healthcare Plans

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

- Known allergens and risk factors for allergic reactions;

- A history of their allergic reactions;
- Detail of the medication the pupil has been prescribed including dose, this should include adrenaline pens, antihistamine etc;
- A copy of parental consent to administer medication, including the use of spare adrenaline pens in case of suspected anaphylaxis;
- A photograph of each pupil; and
- A copy of their Allergy Action Plan. See 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 can pose a risk;
- 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; and
- Planning special events, such as cultural days and celebrations.

Inclusion of pupils 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.

CATERING IN SCHOOL

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

- Due diligence is carried out with regard to allergen management when appointing catering staff;
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training;
- 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.
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;
- The catering team will endeavour to get to know the pupils with allergies and what their allergies are, supported by school staff;
- The catering team will endeavour to provide varied meal options to students and staff with allergies;

- The school has robust procedures in place to identify pupils with food allergies. The Catering Team use a colour coding system to identify special diets. The colour code is as follows:
 - **RED:** pupil with a severe allergy / anaphylactic shock or has been medically diagnosed;
 - **AMBER:** Pupil has intolerance;
 - **Green:** Pupil excludes foods due to preferences including religious beliefs.

Pupils and staff in the RED category

- ❖ A meeting will be arranged between the Medical Team, the Catering Team and the pupil's parents to discuss the pupil's allergy and show them the kitchen production and service areas. This is particularly important where a pupil is susceptible to trace allergens caused by cross-contamination (e.g., at self-service salad bars and dessert counters).
- ❖ A pre-plated meal will be provided for them. Whilst the Catering Team can provide meals that do not include the nominated allergens, they cannot guarantee that dishes do not contain traces of allergens as they may be stored and prepared in the same areas as known or identified allergens. However, the School will take all reasonable steps to minimise the risk of cross-contamination. The menu cycle for all pre-plated meals is carefully planned. The pre-plated meal is prepared in a separate area or at a separate time from the meals containing the pupil's allergens.
- ❖ The Catering Team do not use nuts in any of the food they prepare and serve. They are, however, unable to guarantee that the dishes / products served are totally free from nuts / nut derivatives. This is due to the use of pre-cautionary allergy statements such as 'may contain' used by the School's suppliers.
- ❖ Sometimes, pupils in the RED category with an allergy to nuts, are able to tolerate precautionary statements such as 'made in a factory containing nuts.' If this is the case, then during the meeting with the School, it may be possible to allow the parents to sign a disclaimer to allow the pupil to select meals rather than have a pre-plated meal.
- ❖ Staff in the RED category will also be provided with a pre-plated meal.

Pupils and staff in the AMBER or GREEN category

- Pupils and staff within these categories may ask a member of the Catering Team for any allergen information and this will be provided using the Catering Team's daily allergen checker.

- Food containing the main 14 allergens (see Allergens definition, above) will be clearly identified for pupils, staff and visitors to see. Other ingredient information will be available on request. For pupils or staff with allergies to food other than the 'main 14', the School will undertake a risk assessment to determine whether the allergen or combination of allergens can be safely catered for and whether a pre-plated meal is required. The School may request a medical note from parents to support this process.
- Food packaged to go 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 to pupils with dietary needs by the Catering Team.
- Food provided at breakfast club, after school clubs, boarding / day boarding and the Year 8 tuck shop will follow these procedures.

Food bans or restrictions

This school is an Allergen Aware school. We have pupils and staff with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food;

- Pupils are not allowed to bring birthday cakes into School, including the boarding houses.
- Any food brought in by staff or for staff should not contain nuts.
- All food coming onto school premises or taken on a school trip should be checked to ensure peanuts, sesame and tree nuts are not an ingredient in another product. Please check the label on all foods brought in. Common foods that contain these goods as an ingredient include: packaged nuts, cereal bars, chocolate bars, nut butters, chocolate spread, sauces.
- All food bought into school for social or fundraising purposes should similarly comply with this policy and not contain nuts.

Food hygiene for pupils

- Pupils will wash their hands before and after eating;
- Sharing, swapping or throwing food is not allowed;
- Water bottles and packed lunches should be clearly labelled; and
- In the Boarding Houses, pupils can prepare light breakfasts or snacks such as toast, cereal and croissants. This food is provided by the School's Catering Team.

EDUCATIONAL VISITS AND SPORTS FIXTURES

Staff leading the trip will have a register of pupils 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;
- Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
- Staff accompanying the trip will be trained to recognise and respond to an allergic reaction;
- Allergens will be clearly labelled on catered packed lunches.
- If attending Match Tea at another school, Sports staff attending fixtures with children with allergy will have the allergy details with them and will liaise at the fixture
- See Adrenaline Pens section for School Trips and Sports Fixtures.

INSECT STINGS

Staff and pupils with a known insect venom allergy should:

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

The Estates and Operations Manager will ensure the Grounds Team monitor the grounds for wasp or bee nests. Pupils (with or without allergies) should notify the Estates and Operations Manager or a member of the Grounds Team if they find a wasp or bee nest in the school grounds and avoid them.

ANIMALS

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

Precautions to limit the risk of an allergic reaction include:

- A pupil 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, parents and staff will be made aware and consideration and adaptations will be made; and
- School trips that include visits to animals will be carefully risk assessed
- Please see the Animals in School Policy

ALLERGIC RHINITIS/ HAY FEVER

If parents have provided their consent, the School may administer homely remedies, including antihistamine. This will be recorded on the School's MIS and parents will be informed by email or telephone by the end of each school day at the latest.

INCLUSION AND MENTAL HEALTH

Allergies can have a significant impact on mental health and wellbeing. Pupils 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 with allergies may require additional pastoral support including regular check-ins from their Form Teacher, House Parent etc;
- Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives; and
- Bullying related to allergy will be treated in line with the school's anti-bullying policy.

ADRENALINE PENS

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

Storage of adrenaline pens

- Pupils prescribed with adrenaline pens will have easy access to two, in-date pens at all times in their Adrenaline Pen bag. This also contains their Allergy Action Plan and is clearly named. The Individual Healthcare Plan has been sent to the relevant form teachers.
- Spot checks will be made to ensure adrenaline pens are where they should be and in date;
- Adrenaline pens must not be kept locked away;
- Adrenaline pens should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator); and
- Used or out of date pens will be disposed of as sharps.

Spare adrenaline pens

The School keeps an emergency anaphylaxis kit in the main reception and in the Pre-Prep Reception area in line with government guidelines (Guidance on the use of Adrenaline Auto-Injectors in Schools).

The Medical Team are responsible for:

- Deciding how many spare pens are required and ensuring spare Adrenaline Pens are in grab bags for school trips / matches as well as on-site.
- What dosage is required, based on the Resuscitation Council UK's age-based guidance (see page 11);
- Which brand(s) to buy. Schools are recommended to buy a single brand if possible to avoid confusion;

Adrenaline pens on off-site activities

- No child with a prescribed adrenaline pen 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;
- Adrenaline pens will be kept close to the pupils at all times e.g. not stored in the hold of the coach when travelling or left in changing rooms;
- Adrenaline pens will be protected from extreme temperatures;
- Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction; and

RESPONDING TO AN ALLERGIC REACTION /ANAPHYLAXIS

See Appendix A on recognising and responding to an allergic reaction

If a pupil has an allergic reaction:

- Treat the pupil 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 where they are. Lie them down with their legs raised and bring medication to them;
- Use pupil's own prescribed medication if immediately available;
- Pupil can administer the adrenaline pen themselves [if able to] or a member of staff can administer pen. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline;
- If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen;
- If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, lie the pupil down with their legs raised, call 999 and explain anaphylaxis is suspected. Inform the operator that spare adrenaline pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life;
- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services again and inform them that a second dose of adrenaline has been given;

- Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better; and
- Anyone who has 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 Catering Team undertake food allergy training before or on the first day they join the Team, including understanding the allergy procedures at school. There are at least two 'Allergy Champions' at each service who have completed additional training and can be identified by their 'Ask Me About Allergens' badge.

The School is committed to training all staff to give them a good understanding of allergies. This includes:

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 adrenaline pens are kept (both prescribed pens and spare pens) and how to access them;
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying;
- Understanding food labelling; and
- Training pens are available in the medical centre for practise

ASTHMA

It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions. The School follows the Department of Health document 'Guidance on the Use of Emergency Inhalers in Schools'.

Pupils with asthma will be identified from the School's Medical Questionnaire. A list of pupils with asthma in each section of the School is compiled and displayed in relevant, staff only areas.

The School's Medical Centre Standard Operating Procedures outline where pupils own inhalers are kept, depending on which area of the School they are based and guidance on treatment.

Labelled Emergency Asthma Packs containing a spare inhaler and spacer, along with information regarding assessment and treatment of an asthma attack, are available in School should a pupil with asthma require an inhaler and theirs is not available.

These are located in each area of the School, including the Boarding Houses. These can only be used on children identified as having asthma and consent has been gained from the parent. Each pack contains a list of these children

REPORTING ALLERGIC REACTIONS

The school will log allergic reaction incidents and near-misses. (See the Accidents, Incidents, Near Misses and Occupational Ill Health Reporting, Recording and Investigation Policy).

All allergic reactions classed as mild to moderate (see Appendix 1) will be recorded by the Medical Team on the School's Management Information System (MIS).

Any allergic reaction classed as serious, where an anaphylactic reaction has occurred, (see Appendix 1) will be recorded on the MIS and in the Accident Book due to the need for the pupil or member of staff to be sent to hospital for further treatment. The Bursar will be notified and will determine the appropriate course of action and include such incidents in the updates to the School's Health and Safety Committee, which meets on a half-termly basis. The Health and Safety Committee will consider any patterns or incidents which may require further investigation or necessitate a change in procedures. The Health and Safety Committee report to the Buildings and Infrastructure Committee of the Governing Board.

IF IN ANY DOUBT, CALL AN AMBULANCE (999).

MONITORING AND REVIEW

Governors' Committee	Buildings and Infrastructure Committee
Normally reviewing	
Effective from	January 2026
Date of next review	January 2027
Person responsible for Implementation and Monitoring	Bursar
Related Policies and Procedures	<ul style="list-style-type: none"> ○ Child Protection and Safeguarding Policy ○ Health and Safety Policy ○ Animals in School Policy ○ Accidents, Incidents, Near Misses and Occupational Ill Health Reporting, Recording and Investigation Policy ○ Risk Assessment Policy ○ Educational Visits Policy ○ Medical Conditions Policy ○ Medical Management Policy

APPENDIX 1 – MANAGING ALLERGIC REACTIONS



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.

APPENDIX 2- RESPONDING TO 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](#).