



Allergy and Anaphylaxis Policy

for the whole School including EYFS

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Allergy and Anaphylaxis Policy

1. AIMS AND OBJECTIVES

This policy outlines Edge Grove School's 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 policy applies to all staff, pupils, parents and visitors to the school and should be read alongside these other policies:

- Anti-bullying policy
- Asthma Policy
- Catering and Food Hygiene Policy
- Child Protection Policy
- Diversity, Equity and Inclusion Policy
- Emergency Response Plan
- Health and First Aid Policy
- Health and Safety Policy
- Incident/Accident Policy
- Risk Assessment Policy

2. WHAT IS AN ALLERGY?

Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response; instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.

While most allergic reactions are mild, some can 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.

3. 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. 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.

There are 14 allergens required by law in the UK 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.¹

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 pen, 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 uses the [BSCAI Allergy Action Plan paediatric templates](#).

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.

INDIVIDUAL HEALTHCARE PLAN: A detailed document outlining an individual pupil's medical conditions, history, treatment, risks and action plan. This document is created by Edge Grove in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy 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 malfunction, are damaged or are otherwise not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

4. ROLES AND RESPONSIBILITIES

Edge Grove takes a whole-school approach to allergy management.

4.1 Designated Allergy Lead

The Designated Allergy Lead is the Senior Deputy Head (Pastoral). They report to the headteacher and lead governor for safeguarding. They oversee and delegate day to day responsibility to the School Health Centre staff for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy
- Taking decisions on allergy management across the school
- Championing and practising allergy awareness across the school

¹ <https://www.allergyuk.org/types-of-allergies/food-allergy/top-14/>

- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management
- 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
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy
- 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
- Ensuring there is an anaphylaxis drill once a year.

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

4.2 Healthcare Assistant

- Ensuring allergy information is recorded, up-to-date and communicated to all staff
- Ensuring that information from families is up to date, and reviewed annually (at a minimum)
- Collecting and coordinating Allergy Action Plans and Individual Healthcare Plans and other relevant information from families. They will liaise with the Admissions Team for new starters
- Coordinating medication with families and ensuring medication is in date
- Ensuring that the school's Food Concern List is kept up to date, and redistributing the list as required
- Disseminating information to all school staff, including the Catering Team, occasional staff and staff running clubs
- Reviewing the stock of the school's spare adrenaline pens and ensuring staff know where they are
- Replacing spare pens when necessary
- Keeping a record of any allergic reactions or near-misses and ensure an investigation held as to the cause and put in place any learnings*
- Keeping an adrenaline pen register to include Adrenaline Pens prescribed to pupils, and spare pens, including brand, dose and expiry date. The location of the spare pens should also be documented
- Providing on-site adrenaline pen training for other members of staff and pupils and refresher training as required (e.g. prior to school trips)
- And any other responsibilities delegated by Designated Allergy Lead.
- The Health Centre Staff will keep a record of any allergic reactions or near-misses. These will be reported to the Senior Deputy Head Pastoral, School Bursar, Catering Manager, and the Assistant Head Junior in the case of a reaction in the Junior Department, and a full investigation will be held as to the cause and to put in place any learnings.

4.2 Admissions Team

The admissions team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Health Centre Staff to ensure that:

- Allergy information or special dietary information is captured at the earliest opportunity, for Admissions, School Visits, Open Days or Taster Days, if food is offered, or likely to be eaten
- 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.
- The Health Centre Staff, Catering Teams & Form Teachers are informed of any allergies or dietary requirements in advance
- That parents understand that the child's Allergy Action Plan and emergency medication **must be in school on the day of their visit, or first day of school**, and that the child may not be able to remain in school unless this is in place

4.3 All staff

All school staff, including teaching staff, support staff, catering and occasional staff, are responsible for:

- Championing and practising allergy awareness across the school
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed
- Being aware of pupils (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 an activity is necessary and/or appropriate
- Ensuring pupils always have access to their medication or carrying it on their behalf
- Being able to recognise and respond to an allergic reaction, including anaphylaxis
- Taking part in training as required (at least once a year) and to tell the Healthcare Assistant if you have not received any in the last 12 months
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the Healthcare Assistant;
- 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
- 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
- If staff become aware that a pupil does not have their emergency medication at school, this must be escalated to the Healthcare Assistant/SLT at the earliest opportunity

4.4. Food Concerns in the Junior Department (EYFS)

- The Junior Department EpiPens are stored in the Junior Department First Aid Cupboard

- Junior Department pupils carry A4 food mats at lunchtime, which communicate their dietary requirements to the catering team.
- If staff are informed of a **food concern** directly by a parent, this must be communicated to the Healthcare Assistant, Catering Manager and PA to the Head of Junior, so that a mat can be created and the pupil added to the Food Concern List
- Mats should go to the dining room with pupils every lunch time, and staff should ensure that these have been returned to their classrooms after lunch
- Any queries about a pupil's dietary restrictions should be directed to the Healthcare Assistant, who will be able to clarify and liaise with the Catering Team if necessary
- Staff should regularly check the Food Concern List for their class, which is shared with them by the Healthcare Assistant at the beginning of the year, to ensure that they are familiar with their class' dietary requirements.
- Staff should cross check new food mats with their class' Food Concern List, to minimise the chances of an error occurring
- A Pediatric first aider is always present when Early Years pupils are eating

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

4.6 Parents of children with allergies

In addition to point 4.5, 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
- Respond to any request for information in a timely manner
- If applicable, provide the school or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, i.e. spoon or syringe), inhalers or creams
- Ensure medication is in date and replaced at the appropriate time
- Update school with any changes to their child's condition and ensure the relevant paperwork is updated too

- Provide the school with an up-to-date photograph of their child and sign the associated permission for it to be shared appropriately as part of their allergy management; and
- Support their child to understand their allergy diagnosis, to advocate for themselves, and to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food they are allergic to

4.7 All pupils

All pupils at the school should:

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

4.8 Pupils with allergies

In addition to point 4.7, pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk (Year 3 upwards)
- Avoiding their allergen as best as they can
- Understand that they should notify a member of staff if they are not feeling well, or suspect they might have an allergic reaction
- Carrying two adrenaline auto-injectors with them at all times. The Healthcare Assistant will liaise with parents on an individual basis to provide support to these pupils, and to ensure that pupils are of appropriate maturity and age to manage this
- Where pupils are not carrying their adrenaline auto-injectors, knowing where these are stored in an emergency
- Understand how and when to use their adrenaline autoinjector if age appropriate
- Talking to the Healthcare Assistant or a member of staff if they are concerned by any school processes or systems relating to their allergy
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies
- If age and capability appropriate, ensuring they have their medication with them on the journey to and from school, and on trips

The Health Centre Staff will collaborate with parents and teachers to ensure that pupils' responsibilities are appropriate in relation to their age and individual circumstances.

5. INFORMATION AND DOCUMENTATION

5.1 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.

5.2 Individual Healthcare Plans

Each pupil with an allergy will have 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.

Parents of all new pupils will be required to complete an Individual Healthcare Plan on admission to the school. Current parents will be required to complete an IHCP when their child's Allergy Action Plan is due for review. This should bring all pupils up to date by November 2026.

Note that, a formal medical diagnosis is not strictly required if a child is at functional risk and IHP's can be issued with a risk assessment before a formal diagnosis.

6. 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 tech 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.

7. FOOD, INCLUDING MEALTIMES & SNACKS

7.1 Catering in school

The school is committed to providing a safe meal for all pupils, staff and visitors, including those with food allergies. The school's Catering Department is staffed and managed by Holroyd Howe. The Healthcare Assistant and Catering Manager work closely to ensure that

information about pupil allergies is shared and acted upon. The school and Holroyd Howe will work together to ensure that:

- Due diligence is carried out with regard to allergen management when appointing catering staff
- The Healthcare Assistant will inform the Catering Manager of all dietary requirements via the Food Concern List, and will convey any dietary updates in writing
- The Healthcare Assistant will inform the Catering Manager of pupils who require a pre-plated meal
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training
- We adhere to the EYFS safer eater guidelines for allergies and at each mealtime and snack time, a specific person is responsible for checking that food is safe for the child consuming it and they are paediatric first aid trained.
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures
- 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:
 - Pupils in the Junior Department use A4 allergen food mats, produced by the PA to the Junior Department
 - Junior Department teachers accompany their pupils into lunch and are aware of which pupils have allergies
 - Pupils in Year 3 and 4 wear lanyards into lunch
 - Pupils in Year 5 upwards collect a generic food allergen card from a member of staff when they are ticked in to lunch, which is then handed to a member of the catering team trained in Allergy Awareness
 - At snack time, snacks for pupils with allergies are pre-packaged and clearly labelled with the pupil's name and form. Where possible the Catering Team will endeavour to provide a "like for like" snack, though this cannot always be guaranteed
 - An allergen "tick list" is used by the member of staff ticking the pupils in the lunch, to ensure that pupils with allergies are wearing the correct lanyard, or have collected a generic allergen card
 - Pupils with food allergies and dietary requirements use the food counter to the left of the servery, where a member of the catering team trained in allergy awareness will serve them
 - A copy of the food concern list is always kept in the servery, and can be cross referenced with food mats/lanyards/allergen cards as necessary
- Food containing the main 14 allergens (and any others outside of this group) will be clearly identified for pupils, staff and visitors to see. Other ingredient information will be available on request
- Food packaged to go will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging
- The Catering Team do not source or serve food with nuts as an ingredient
- Whilst every effort is made to avoid food with Precautionary Allergen Labelling, or "May Contain" labelling, in some circumstances this is unavoidable. If parents are happy for their child to consume foods with a "May Contain" warning, this should be

communicated in writing to the Healthcare Assistant, who will then communicate this information to the Catering Team

The school will ensure that allergen traceability information is readily available. Allergens will be tracked using the following method:

- Allergen information will be obtained from the supplier and recorded, upon delivery, in a food allergen log stored in the kitchen
- Allergen tracking will continue throughout the school's handling of allergen-containing food goods, including during storage, preparation, handling, cooking and serving
- The food allergen log will be monitored for completeness on a weekly basis by the catering manager
- Incidents of incorrect practices and incorrect and/or incomplete packaging will be recorded in an incident log and managed by the kitchen manager
- Food provided at breakfast will follow the above procedures, the only exception being that pupils will not have their mats/lanyards/allergen cards at these times. An Allergy Champion is present at breakfast club, with access to the Food Concern List.
- The Catering team provides food for Match Tea and after school activities. Catering staff are not present at these times, however an FS13 form is provided for staff with the contact number for the Catering Manager available in case of any incidents. The Health Centre Staff is also contactable until 5pm. All members of staff serving food are First Aid Trained and an emergency Adrenaline kit is available in the Dining Room at all times.
- Members of staff who are not members of the Catering Team, or who have not been trained to serve food, **should not serve or collect food on behalf of pupils**. If a pupil requests extra food they should collect it themselves from a member of the Catering Team

7.2 Food brought into school

- Edge Grove is an Allergen Aware school. We have students with a wide range of allergies to different foods
- Edge Grove School does not allow pupils to bring food onto the premises, from home, for consumption at breakfast, breaktimes, lunches or after school activities, other than in exceptional circumstances
- In the case of a pupil needing to bring in their own food for a medical reason, this request should be made in writing to the Healthcare Assistant, at least a week prior to the arrangement starting.
- Any food brought into school will be locked away in the appropriate department, and may be accessed as needed under the supervision of a member of staff
- Pupils must wash their hands thoroughly after consuming food brought in from home

8. SCHOOL TRIPS AND SPORTS FIXTURES

- Staff leading the trip will have a register of pupils with allergies with medication details. They should also be aware of any members of staff with allergies, accompanying the trip
- The staff leading the trip will be responsible for liaising the the trip destination, to ensure that appropriate catering arrangements are in place for pupils with allergies
- Allergies will be considered on the risk assessment and catering provision put in place
- Parents may be consulted if necessary, or if the trip requires an overnight stay
- Staff (and some pupils, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction
- Allergens will be clearly labelled on catered packed lunches and named for the specific child.
- If attending Match Tea at another school, Sports Staff will be made aware of any allergies. A snack may also be provided by the school, to be taken with pupils who have an allergy, if appropriate
- See Adrenaline Pens section for School Trips and Sports Fixtures

9. INSECT STINGS

The Maintenance Team will monitor the grounds for wasp or bee nests and Oak Processionary Moth larvae. All pupils should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid them.

Pupils and staff can mitigate the risk of being stung by:

- Avoiding walking around in bare feet when outside
- Keeping food and drink covered

Edge Grove currently houses a small apiary (bee yard) between the Colt's Lawn and the lake (see school map: <https://www.edgegrove.com/map-of-the-school/>) . When pupils visit the apiary, the member of staff in charge will be able to access an emergency adrenaline kit, available at the Junior Department First Aid room, Dining room, and Health centre (see 13.2) to take with them. A risk assessment should be carried out for any pupil or member of staff with a known allergy to bee stings, before they visit the apiary. Pupils and staff with a known allergy to bee stings, and who have been prescribed adrenaline or antihistamine, should carry this with them at all times when they visit the apiary.

Oak Processionary Moth larvae are highly prevalent in South East England these black-and-white caterpillars move in head-to-tail lines on oak trees. Their tiny hairs contain the toxin thaumetopoein, causing severe itchy rashes, hives, and respiratory issues, any nest of larvae will be professionally removed and disposed of.

10. ANIMALS

It is normally the dander ([flakes](#) of skin) that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupils with a known animal allergy should avoid the animal they are allergic to
- If an animal comes on site a risk assessment will be carried out prior to the visit, and parents of children affected by allergies will be consulted
- Areas visited by animals will be cleaned thoroughly
- Anyone in contact with an animal will wash their hands after contact
- School trips that include visits to animals will be carefully risk assessed

11. ALLERGIC RHINITIS/HAY FEVER

- The School Nursing team holds a limited stock of Piriton and Cetirizine to be given to pupils suffering from hay fever when required
- If a pupil requires medication and does not have their own supply in school, the Healthcare Assistant will contact the pupil's parents/carer to gain consent to administer stock medication
- If a pupil is known to suffer from hay fever, the school requests that pupils are given hay fever medication at home, prior to coming into school, or that hay fever medication is provided by parents for a pupil's individual use
- This medication will also accompany pupils on sports fixtures and school trips, as needed
- Parents should complete a Medication Consent Form, and ensure that medication is in date and labelled before being sent into school

12. 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 the Form Teacher
- Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives
- Bullying related to allergy will be treated in line with the school's anti-bullying policy

13. ADRENALINE PENS

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

13.1 Storage of Adrenaline Pens

- Pupils prescribed with adrenaline pens will have easy access to two, in-date pens at all times
- All pupils who have centrally stored adrenaline pens will have as follows:
 - A clear emergency box, labelled with their name and photograph containing;

- A labelled stock of medication for a mild allergic reaction, e.g. cetirizine or piriton
- Two in date, labelled adrenaline pens
- An Allergy Action Plan
- An Individual Health Care Plan (From September 2025)
- An Anaphylactic Reaction Record
- A black pen
- All pupils who have centrally stored medication for mild reactions (such as piriton or cetirizine, will have a clear zip pouch, containing their labelled medication and an Allergy Action Plan
- Emergency Medication is stored in the following locations:
 - **JUNIOR DEPARTMENT PUPILS:** Cupboard in Junior Department First Aid Room, next door to Assistant Head Junior's office. Key hanging on hook to right of cupboard.
 - **YEAR 3 AND 4 PUPILS:** If not carrying, this should be accessible in the class room, and move around the school site with them
 - **YEAR 5 TO 8 PUPILS:** Required to carry their EpiPens at all times
- It is parents' responsibility to ensure that pupils have access to their adrenaline injectors as they travel to and from school. Parents should liaise with the Healthcare Assistant for pupils travelling on the School Bus, or if exceptional arrangements are required.
- 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)
- Used or out of date pens will be disposed of as sharps

13.2 Spare adrenaline pens

The school has 10 spare adrenaline pens to be used in accordance with government guidance. Adrenaline pens should be located within 5 minutes of where they may be required. All staff have access to AAI devices, but these are out of reach and inaccessible to pupils – AAI devices are not locked away where access is restricted.

All spare AAI devices will be clearly labelled to avoid confusion with any device prescribed to a named pupil.

The adrenaline pens are clearly signposted and are stored in:

- The Health Centre
- The Dining Room
- The Junior Department First Aid Room

The Healthcare Assistant is responsible for:

- Deciding how many spare pens are required
- What dosage is required based on the [Resuscitation Council UK's age-based guidance](#) (page 11)
- Which brand to buy - Edge Grove school currently purchases EpiPens, one only to brand to avoid confusion with Administration and training

- Distribution around the site and clear language

13.3 Adrenaline pens on off-site activities: school trips and match days

- No child with a prescribed adrenaline pen will be able to go on a match fixture or school trip without two of their own pens. 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

14. RESPONDING TO AN ALLERGIC REACTION/ANAPHYLAXIS

See appendix on recognising and responding to an allergic reaction.

- If a pupil has an allergic reaction they will be treated in accordance with their Allergy Action Plan and a member of staff will instigate the school's [Emergency Response Plan](#)
- If anaphylaxis is suspected adrenaline will be administered without delay, lying the pupil down with their legs raised as described in the appendix/ They will be treated where they are and medication brought to them
- A pupil's own prescribed medication will be used to treat allergic reactions if immediately available
- This will be administered by the pupil themselves (if age appropriate) or by a member of staff. 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 a spare adrenaline pen will be used
- If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, a member of staff will ensure they are lying down with their legs raised, call 999 and explain anaphylaxis is suspected. They will inform the operator that spare adrenaline pens are available and follow instructions from the operator. The Medicines and Healthcare products Regulatory Agency says that in exceptional circumstances, a spare adrenaline pen can be administered to **anyone** for the purpose of saving their life
- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services to tell them you have done so
- The pupils will not be moved until a medical professional/paramedic has arrived, even if they are feeling better
- Anyone who has suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff will accompany the pupil in an ambulance and stay until a parent or guardian arrives

15. STAFF TRAINING

The school is committed to training all staff (permanent, part-time supply, peripatetic, business contractors) annually to give them a good understanding of allergy. This includes:

- Understanding what an allergy is
- How to reduce the risk of an allergic reaction occurring
- How to recognise and treat an allergic reaction, including anaphylaxis
- Practice how to use an auto-injector (demonstration version)
- 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
- Taking part in an anaphylaxis drill.

16. ASTHMA

It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions. Please see the [Asthma Policy](#).

17. REPORTING ALLERGIC REACTIONS

The Healthcare Assistant will log allergic reaction incidents and near-misses on Schoolbase, and will report these to the Senior Deputy Head Pastoral, and the Health and Safety Committee. Reporting will take place in line with the Health and Safety Policy.

Useful links:

Allergy UK - <https://www.allergyuk.org/>

Allergywise Training for Healthcare Assistants:

<https://www.anaphylaxis.org.uk/allergywise/allergywise-for-healthcare-professionals-information/>

Department of Health Guidance on the use of Adrenaline Auto Injectors in schools -

https://assets.publishing.service.gov.uk/media/5a829e3940f0b6230269bcf4/Adrenaline_auto_injectors_in_schools.pdf

NICE Guidance on Anaphylaxis - <https://www.nice.org.uk/guidance/cg134>

NICE Guidance on Food Allergies - <https://www.nice.org.uk/guidance/qs118>

Resuscitation Council UK Guidance on Anaphylaxis -

<https://www.resus.org.uk/library/additional-guidance/guidance-anaphylaxis>

Schools Allergy Code - <https://theallergyteam.com/schools-allergy-code/>

Senior Deputy Head Pastoral - September 2026

APPENDIX A: 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 that 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-tingling mouth
- Hives or itchy skin rash
- Abdominal pain/vomiting
- Sudden change in behaviour

If you suspect a mild to moderate allergic reaction, give an age appropriate dose of antihistamine, with consent of parents if applicable.

SYMPTOMS OF ANAPHYLAXIS

A - Airway	B - Breathing	C - Circulation
• Persistent cough	• Difficult or noisy breathing	• Persistent dizziness
• Hoarse voice	• Wheeze or persistent cough	• Pale or floppy
• Difficulty swallowing		• Suddenly sleepy
• Swollen tongue		• Collapse/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 what 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 and 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.](#)

Appendix B: Allergy Action Plan

bsaci ALLERGY ACTION PLAN

This child has the following allergies:

Name:

DOB:

Photo

Mild/moderate reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

Action to take:

- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine:

(If vomited, can repeat dose)

- Phone parent/emergency contact

Watch for signs of ANAPHYLAXIS

(life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

A AIRWAY

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

B BREATHING

- Difficult or noisy breathing
- Wheeze or persistent cough

C CONSCIOUSNESS

- Persistent dizziness
- Pale or floppy
- Suddenly sleepy
- Collapse/unconscious

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1 Lie child flat with legs raised (if breathing is difficult, allow child to sit)



- 2 Use Adrenaline autoinjector **without delay** (eg. EpiPen®) (Dose: mg)

- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")

*** IF IN DOUBT, GIVE ADRENALINE ***

AFTER GIVING ADRENALINE:

1. Stay with child until ambulance arrives, **do NOT** stand child up
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement **after 5 minutes**, give a further adrenaline dose using a second autoinjectable device, if available.

You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis.

Emergency contact details:

1) Name:



2) Name:



Parental consent: I hereby authorise school staff to administer the medicines listed on this plan, including a 'spare' back-up adrenaline autoinjector (AAI) if available, in accordance with Department of Health Guidance on the use of AAI in schools.

Signed:

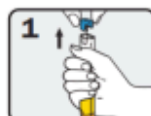
Print name:

Date:

For more information about managing anaphylaxis in schools and "spare" back-up adrenaline autoinjectors, visit: sparepensinschools.uk

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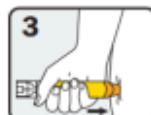
How to give EpiPen®



PULL OFF BLUE SAFETY CAP and grasp EpiPen. Remember: "blue to sky, orange to the thigh"



Hold leg still and PLACE ORANGE END against mid-outer thigh "with or without clothing"



PUSH DOWN HARD until a click is heard or felt and hold in place for **3 seconds**. Remove EpiPen.

Additional instructions:

This is a medical document that can only be completed by the child's healthcare professional. It must not be altered without their permission. This document provides medical authorisation for schools to administer a 'spare' back-up adrenaline autoinjector if needed, as permitted by the Human Medicines (Amendment) Regulations 2017. During travel, adrenaline auto-injector devices must be carried in hand-luggage or on the person, and **NOT** in the luggage hold. This action plan and authorisation to travel with emergency medications has been prepared by:

Sign & print name:

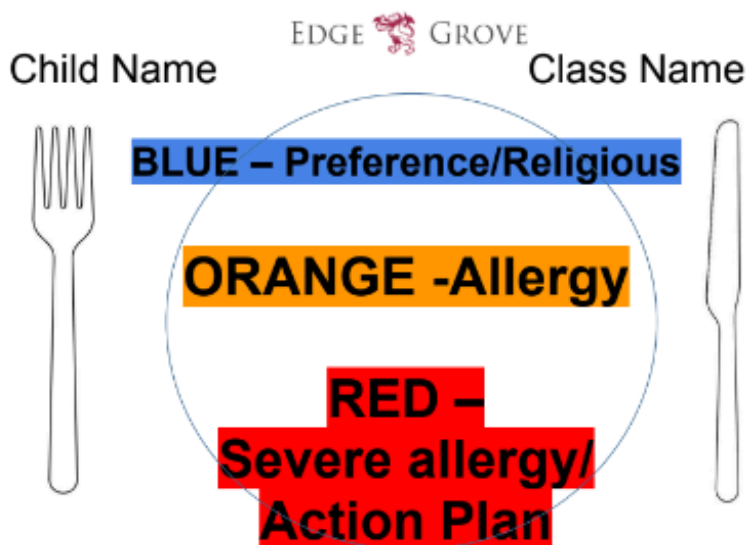
Hospital/Clinic:



Date:

Appendix C: Food mats, lanyards, allergy cards

Food mat:



Lanyard:

Go to the left hand counter and tell the staff your name, form and dietary needs
John Smith
3A
NO NUTS [AUTOINJECTOR]

Allergy card:

Use the RIGHT counter only
Tell the catering team

- Your year and class
- Your name
- Your dietary needs

