Allergies & Anaphylaxis Policy

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Staff role responsible for review	Designated Allergy Lead (can be delegated)
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This policy applies to all stakeholders within Ivel Valley School & College

Introduction

AIMS AND OBJECTIVES

This policy outlines Ivel Valley School & College'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 relevant policies that are listed at the end of the policy.

Research shows that around 20% of allergic reactions happen at school, and around 20% of serious allergic reactions occur in people who have never had a previous reaction before. Therefore, this policy does not just relate to those with known allergies but is intended to raise allergy awareness in general.

WHAT IS AN ALLERGY?

An 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. People 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 nine 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:** A 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.
- **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.

- **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, the school nursing team 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. Allergies should be considered for any 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' or staff members' 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 pen.

Roles and Responsibilities

Ivel Valley School & College takes a whole-school approach to allergy management.

Designated Allergy Lead

The Designated Allergy Lead is Rachel Kruger, Assistant Headteacher. The Designated Allergy Lead has the responsibility for the areas detailed below but the duties may be delegated to other members of staff;

- Reviewing and updating the Allergy and Anaphylaxis Policy annually;
- Ensuring staff, pupils and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures;
- 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;
- 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;
- Making sure all staff are appropriately trained, have good allergy awareness and understand their role in allergy management (including what activities need an allergy risk assessment);
- Ensuring there is an anaphylaxis drill once a year;
- 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 lessons learned are shared;
- Reviewing the school's stock of spare adrenaline pens - checking 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 an adrenaline pen register to include adrenaline pens prescribed to pupils and staff 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; and
- Providing on-site adrenaline pen training for staff and pupils and refresher training as required e.g. before school trips.

At regular intervals the Designated Allergy Lead will report back to the SLT with regards to policy, procedures and their implementation and incidents.

School nursing team

The school nursing team is responsible for:

- Working closely with the appropriate school staff and parents/carers to gather information from families and other medical professionals to write or contribute to the necessary paperwork; they will produce the Allergy Action Plans and may contribute to the Individual Healthcare Plans;
- Liaising with other medical professionals as appropriate and updating the school as required; and
- Ensuring the information from families is up-to-date and reviewed annually (at a minimum).

Office Team

The office team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Lead, class staff and school nursing team/medical lead to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity; and
- There is a clear structure in place to communicate this information to the relevant parties (i.e. class staff, school nursing team, catering team).

All staff

All school staff, including teaching staff, support staff, occasional staff (for example sports coaches, music teachers and those running breakfast and after-school clubs) are responsible for:

- Championing and practising allergy awareness across the school;
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed;
- Being aware of the pupils that are in their care that have allergies and ensuring that they have read the relevant documentation e.g. Individual Healthcare Plan and Allergy Action Plan;
- Coordinating medication with families and ensuring medication is in-tact and in date. [Whilst it's the responsibility of parents/carers to ensure medication is up to date, the staff responsible for looking after or administering medication have a responsibility to check the medication daily and inform parent/carers when new or additional medication is required];
- Making sure pupils with allergies who have school dinners have the appropriate lanyard and these are worn every lunchtime;
- Attending appropriate allergy training as required. [Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager];
- Considering the risk to pupils and staff with allergies posed by any activities e.g. food technology and sensory 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;

- Being able to recognise and respond to an allergic reaction, including anaphylaxis;
- Taking part in training and anaphylaxis drills as required;
- 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, office team and Designated Allergy Lead;
- 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;
- Supporting any staff they know to have allergies by helping them to mitigate risk and looking out for signs of an allergic reaction and being prepared to provide the help they need;
- Documenting on CPOMS all incidents relating to allergies and reactions, including near misses.

Specific staff e.g. teachers, health and care assistants

Some staff have specific responsibilities for the pupils in their care. These include:

- Keeping 'One Page Profiles' updated with key medical information including allergies;
- Making sure the up-to-date Individual Healthcare Plans, risk assessments and Allergy Action Plans are readily available and shared with relevant staff and visitors, including those who are new to the class or are unfamiliar with the pupils;
- Liaising with other staff to develop risk assessments for pupils with allergies; and
- Designating appropriate specific staff to hold the green medication bags each day.

Training records co-ordinator

The Training records co-ordinator (Wendy Presland) is responsible for:

- Maintaining records of all allergy/anaphylaxis training completed;
- Informing staff when their training is due; and
- Liaising with the school nursing team and organising further training for specific staff.

Catering team

The catering team are responsible for:

- Completing the annual Allergy Awareness training from the Food Standards Agency or other catering-specific training;
- Having access to the most up to date allergy lists;
- Following up with class staff when pupils with allergies are not wearing their allergy lanyards;
- Complying with all allergy related food hygiene procedures as detailed in the Safer Food Better Business manual and other guidance and legislation e.g. Natasha's law;
- Completing an accurate food allergens matrix every day and making it available in all food serving areas;
- Having effective procedures in place for identifying changes to allergens in ingredients and recipes, including when substitutions are ordered/delivered; and
- Implementing all recommendations from the council's environmental health officers.

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 school with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. This includes being honest about whether their child has an allergy or intolerance if this is a preference or dietary choice;
- Informing the school of any related conditions, for example asthma, hayfever, 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; and
- Encouraging their child to be allergy aware (if appropriate).

Parents of children with allergies

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

- Work with the school to fill out an Individual Healthcare Plan
- 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;
- 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 too; and
- If appropriate, 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: [all of the points below should be done in an age and capability appropriate way.]

- Be allergy aware;
- Understand the risks allergens might pose to their peers and respect measures to support them, including checking that the food they are bringing on site is in accordance with the restrictions put in place by the school;
- Learn how they can support their peers and be alert to allergy-related bullying; and
- Learn how to recognise an allergic reaction and support their peers and staff in case of an emergency.

Pupils with allergies

In addition to the points above pupils with allergies are responsible for: [this will depend on age and

capability];

- Knowing what their allergies are and how to mitigate personal risk and avoid the allergen;
- 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, and only use them for their intended purpose;
- Understanding how and when to use their adrenaline pens;
- 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;
- Knowing what to do if they have an allergic reaction off school premises, especially if allowed to go off site without staff. This should include how to treat themselves and raise the alarm to get help; and
- Ensuring they have their medication with them on the journey to and from school.

Staff with allergies

All staff with allergies are responsible for:

- Informing the Designated Allergy Lead of any allergies and action to be taken in the event of an allergic reaction, including whether they have an adrenaline pen or other medication;
- Ensuring any medication is readily available for them to use in the event of an allergic reaction but is held/stored securely so that it cannot be found by pupils;
- Informing appropriate team members about their allergies and action that may need to be taken in the event of an allergic reaction;
- Agreeing with the Designated Allergy Lead and/or Operations Manager whether a risk assessment is required or any other documentation or whether an occupational health referral is appropriate; and
- Advocating for themselves if they are concerned about the risk to themselves and not putting themselves at risk by not following agreed procedures to mitigate the risk.

Information and Documentation

Register of pupils and staff with an allergy

The school has a register of pupils and staff who have a diagnosed allergy. This includes pupils and staff who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as those with an allergy where no adrenaline pens have been prescribed. The register should record what medication is prescribed, including the dosage.

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;
- How their allergy is managed;
- The impact the allergy has on their education;
- Arrangements for support;
- 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 and, if appropriate, the risk assessment.

Assessing Risk

The school will conduct a risk assessment for any pupil or staff at risk of anaphylaxis. 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 and sensory activities;
- Bringing animals into the school, for example a dog or hatching chick eggs;
- Running activities or clubs where they might hand out snacks or food “treats”. Ensure safe food is provided or consider an alternative non-food treat for all pupils; 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 activities may need adapting. The School will ensure compliance with the Equality Act 2010, however, all actions taken as a result will need to be proportionate and take into consideration the education and welfare of all pupils.

Managing Risk

FOOD, INCLUDING MEALTIMES & SNACKS

Catering in school

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

- 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;
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;

- The catering team will be provided with up-to-date lists of all pupils with allergies – this will be easily accessible and organised by site and lunch location;
- The school has robust procedures in place to visually identify pupils with food allergies. Pupils with dietary requirements wear special lanyards with information about their allergy to assist staff serving food and those supporting them with choosing food and eating;
- The catering team will endeavour to get to know the pupils with allergies and what their allergies are, supported by school staff;
- Where changes are made to school menus, we will make sure these continue to meet any special dietary needs of pupils and where changes are made to the ingredients this will be communicated to pupils and staff as necessary;
- The catering team will endeavour to provide varied meal options to pupils with allergies;
- The catering team will provide a daily allergen matrix that clearly shows the main 14 allergens in all food items that are not in original manufacturer packaging. This will be available to anyone on request;
- Special meals or food items may be provided for pupils with allergies and these will be clearly labelled;
- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging;
- Food prepared to be eaten off site e.g. for trips, will be requested in advance and any allergens shared with staff and pupils at the point of selecting items. Food will be clearly labelled for the pupils with allergies; and
- The catering team will not prepare or serve any food that include ingredients that are on the banned or restricted list. This currently includes tree nuts and fresh/raw strawberries.

It must be noted that due to the size of the school kitchens it is not always possible to have separate areas, equipment and appliances, etc for food being prepared for pupils with allergies. Therefore, despite all the food hygiene procedures in place catering staff cannot guarantee that food is allergen free as they may contain traces of allergens.

Food prepared/served by other staff (not catering teams)

Due to the needs of the pupils, a lot of food is provided, prepared and/or served by class staff or other staff e.g. class staff who are working with a specific pupil who requires food to be prepared. All staff involved in this will need to be aware of the allergies of pupils in the area or class where the food is being served and follow any procedures and risk assessments to mitigate the risk.

Snacks are also provided by the after-school club so staff will need to follow the procedures above regarding knowing who has allergies and how to prepare or serve food to mitigate the risk to those pupils.

Food brought into school

There are occasions when food is brought into the school by staff, pupils, parents/carers or visitors for consumption by others e.g. fundraising events, celebrations etc.

Those being asked to provide food will be reminded before the event that:

- They should avoid any ingredients that we try not to have on site (see food bans or restrictions section below); and
- The manufacturers original packaging should be in-tact and kept with the item when made available to others.

At the event:

- Original packaging will be next to any items so that ingredients can be checked;
- Signs will be prominently displayed to make everyone aware that any food that did not come out of original packaging may contain any of the 14 main allergens. To avoid cross-contamination this food will be displayed separately from the packaged food; and
- Pupils will need close supervision to ensure that they do not have contact with foods that contain allergens that they are affected by.

Food bans or restrictions

Food bans are almost impossible to enforce and can lead to a sense of complacency or give a false sense of security. They can also give the impression of one allergen being more high risk than others. We have students with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food. Therefore, the school's approach to food bans and restrictions is:

- Ensuring that everyone is allergy aware and that procedures are followed;
- We currently try to restrict peanuts and tree nuts and fresh/raw strawberries as much as possible on the site and regularly remind staff, parents/carers of this;
- For any other known allergies, we will consider whether a food ban or restriction either for the class, building or site is appropriate - decisions about food bans or restrictions will need to be proportionate and enforceable and take into consideration the health and welfare of all pupils;
- If a pupil brings these foods into school, they may be asked to eat them away from others to minimise the risk, or the food may be confiscated; and
- We check all foods coming into the kitchen for these ingredients.

Food hygiene for pupils

- Pupils will be encouraged to wash their hands before and after eating;
- Water bottles and packed lunches should be clearly labelled;
- Some pupils have their own plates, bowls and cutlery; and
- Staff should follow and model good food hygiene procedures in food technology areas to avoid cross-contamination for anyone who could be using the area.

Although sharing, swapping or throwing food is not allowed this is difficult to enforce due to the special educational needs and disabilities that affect how our pupils act or behave. Staff will be supervising pupils wherever they are eating and will take appropriate action if there is a risk to any pupils with allergies.

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 (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 – see catering section above;

- If appropriate, details of any dietary requirements will be sent ahead to ensure safe food can be provided; and
- See adrenaline pens section for School Trips and Sports Fixtures.

INSECT STINGS

Those with a known insect venom allergy should:

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

Staff should report any suspected bee/wasp/hornet nests so that they can be fenced off and the pest control contractors arranged if requried. Pupils should be kept away from the area if possible.

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

ANIMALS

There are regularly animals on site, including the school support dogs who are an important part of the school community.

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 for a pupil or staff member with a known animal allergy include:

- Up to date risk assessments for specific pupils, staff or activities with control measures to mitigate the risk;
- Restricting areas and/or times that the animal is on site;
- Appropriate cleaning and ventilation including washing hands after contact - there are specific procedures that can be implemented if a building needs to be ventilated prior to someone with a known allergy being on site after an animal has been on site; and
- School trips that include visits to animals will be carefully risk assessed.

ALLERGIC RHINITIS/ HAY FEVER

Many pupils and staff suffer from hayfever or allergic rhinitis. Pupils will have an Individual Healthcare Plan, and if appropriate, an Allergy Action Plan. Staff will be expected to take appropriate precautions and medication to manage the symptoms.

ASTHMA

It is vital that anyone who has asthma and has allergies has their asthma well controlled. Asthma can exacerbate allergic reactions or the allergic reaction can exacerbate the asthma. All pupils with asthma will have an Individual Healthcare Plan detailing how their asthma is controlled and may have a risk assessment. Staff working with pupils have asthma training to identify the signs and provide appropriate support of first aid.

Staff with asthma may require a risk assessment, occupational health advice and reasonable adjustments in place.

REPORTING ALLERGIC REACTIONS

The school will log allergic reaction incidents and near-misses. These will be logged by staff on CPOMS

and all incidents will be reviewed by the Designated Allergies Lead, the Operations Manager and the Business Manager.

Some allergy or anaphylaxis incidents will need to be reported to the Local Authority using AssessNet.

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 pupil 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 class staff, the family support team or other pastoral support staff;
- 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

Storage of adrenaline pens

- Pupils prescribed with adrenaline pens will have easy access to two, in-date pens at all times, including when travelling to and from school;
- While the pupil is in school the adrenaline pens will be kept in the green medication bags that will be with the pupil or a designated member of staff at all times;
- The adrenaline pens will have the original pharmacist's label and clearly state the pupil's name;
- The green medication bags will also contain the pupil's allergy action plan and any other appropriate documentation and equipment or medication e.g. inhalers;
- Spot checks will be made to ensure the green medication bags are complete, documentation is up to date and the adrenaline pens are in date and in-tact;
- Adrenaline pens must not be kept locked away;
- Adrenaline pens should be held at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator); and
- Out of date pens will be disposed of as sharps or taken to the pharmacy for disposal.

Spare adrenaline pens [this will be updated when anaphylaxis kit cabinets are installed]

This school has eight spare adrenaline pens to be used in accordance with government guidance.

- Two are for pupils under 6 years of age and six are for anyone aged 6 and upwards and are stored;
- Two are in the School site defibrillator cabinet (key is in the office);
- Two are in the College site defibrillator cabinet; and
- Two are in a green travel kit.

The designated allergy lead, with the operations manager or business manager is responsible for:

- Deciding how many spare pens are required;
- What dosage is required, based on the Resuscitation Council UK's age-based guidance);
- Which brand(s) to buy (schools are recommended to buy a single brand if possible to avoid confusion);
- The purchasing of spare adrenaline pens which can be obtained at low cost from a local pharmacy;
- Keeping a log of all pens, with their locations and expiry dates;
- Carrying out a half-termly check of the stock of spare adrenaline pens to ensure they are where they should be, are in date and are in-tact; and
- Distribution around the site and clear signage.

The allergy lead will make sure all spare adrenaline pens are:

- Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of pupils;
- **Not** locked away, but accessible and available for use at all times;
- **Not** located more than 5 minutes away from where they may be needed; and
- Kept separate from any pupil's own prescribed adrenaline pens and clearly labelled to avoid confusion.

Adrenaline pens on off-site activities

- No pupil with a prescribed adrenaline pen will be able to go on a school trip without two of their own devices unless it has been agreed with the senior leadership team that spare adrenaline pens will be taken. It is the trip leader's responsibility to check they have them;
- Adrenaline pens will be kept in the green medication bags 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
- The spare adrenaline pens can be taken on trips even if there are no pupils with their own adrenaline pens going. For example, residential trips or large trips with large groups. This should be agreed in advance with the Designated Allergy Lead, Operations Manager or Business Manager so that they can be checked on return.

Responding to an allergic reaction/Anaphylaxis

RESPONDING TO AN ALLERGIC REACTION /ANAPHYLAXIS

[See appendix 1 and 2 on recognising and responding to an allergic reaction]

If a pupil, staff member or anyone else on site appears to be having an allergic reaction:

- Treat the individual in accordance with their Allergy Action Plan (pupil) or other guidance available (e.g. care plan for a member of staff);
- **If the allergic reaction is mild (e.g. skin rash, itching or sneezing):** the pupil will be monitored and the parents/carers informed and alternative medication given in accordance with their allergy care plan;
- **For suspected anaphylaxis:** Treat them where they are. Lie them down with their legs raised and bring medication to them;
- If anaphylaxis is suspected administer adrenaline without delay;
- Use the individual's own prescribed medication if immediately available. They can administer the adrenaline pen themselves [if able to] or a member of staff can administer the adrenaline pen. In an emergency, anyone can administer adrenaline;
- If the individual's own adrenaline pen is not available or misfires, then use a spare adrenaline pen;
- If anaphylaxis is suspected but the individual does not have a prescribed adrenaline pen or Allergy Action Plan then the spare adrenaline pens should be used;
- Someone other than call 999 and explain anaphylaxis is suspected. Inform the operator that adrenaline pens are available and have been used (if appropriate) and follow instructions from the operator.
- 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 individual until a medical professional/ paramedic has arrived, even if they are feeling better;
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. If it is a pupil, a member of staff should accompany them in an ambulance until a parent or guardian arrives; and
- Adrenaline pens can only be used once. Once an adrenaline pen has been used, it will be disposed of in line with the manufacturer's instructions. As any individual who has used an adrenaline pen should receive emergency medical attention the adrenaline pens should accompany the individual to hospital.

Training

The school is committed to training all staff annually to give them a good understanding of allergy.

This includes:

- Understanding what an allergy is;
- How to reduce the risk of an allergic reaction occurring;
- How to recognise and treat an allergic reaction, including anaphylaxis;
- How the school manages allergy, for example Emergency Response Plan, documentation, communication etc;
- Where 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
- Taking part in an anaphylaxis drill.

The school has a high number of staff who are first aid trained to different levels. Allergy awareness and use of adrenaline pens is covered in most first aid training courses. These are:

- First Aid at Work (certificated 3-day course)
- Paediatric First Aid (certificated 2-day course)
- Emergency First Aid (certificate 1 day course)
- First Aid for Schools (1 day course)

All staff are required to undertake annual anaphylaxis awareness e-learning. The current provider is The Key.

Catering staff are also required to complete annual catering-specific allergy awareness e-learning.

The school holds training adrenaline auto-injectors so that staff can become familiar with them and practice using them.

Records of all training due and completed are maintained by the training co-ordinator.

Guy Lakin, the Operations Manager, and the Schools nursing team can provide additional training and guidance for supporting and caring for specific pupils.

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

This includes:

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

Legislation and guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

The Food Information Regulations 2014

The Food Information (Amendment) (England) Regulations 2019

Links to other policies

This policy links to the following policies and procedures:

- Health and safety policy
- Supporting pupils with medical conditions policy
- First aid policy

Equalities & inclusion

Ivel Valley is clear about the need to actively support pupils with medical conditions, including allergies, to participate as fully as possible in all school or college events - including trips, visits and sporting activities - and not prevent them from doing so. Ivel Valley maintains due regard to the protected characteristics defined under the Equality Act 2010 and will ensure that all reasonable adjustments are made in order to ensure that pupils are included.

Similarly, the school is legally required to make reasonable adjustments, ensure safety, and promote inclusion for employees with disabilities while respecting their privacy and rights. Staff with a severe allergy may be classified as having a disability.

Ivel Valley recognises its obligations under the Public Sector Equality Duty.

Safeguarding implications

Staff **must** follow written policy and procedures at all times and with all medication. Staff will only follow medical advice and, where relevant, the written instructions that accompany a medication.

Staff should escalate concerns if allergy or anaphylaxis medication is not routinely being brought into or left at the school/college.

Sustainability implications

Where possible, we will consider:

- Safe and environmentally friendly disposal of medications.
- Utilisation of recyclable materials and digital documentation to minimise waste
- Prioritising energy-efficient and eco-friendly products for storage and procurement.

Appendix 1:

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

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.