Peterhouse School

# Allergy Safety Policy

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Part of the Autism Initiatives Group

## Related / relevant policies and key documents

The School Business Leader is the staff member responsible for coordinating staff allergy/anaphylaxis training and the Health & Wellbeing Co-ordinator the upkeep of the school's allergy safety policy.

Links to:

- Managing Pupils with Medical Conditions
- First Aid Policy

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## Summary / scope

To minimise the risk of any pupils suffering severe allergic reaction whilst at school or attending any school related activity.

To ensure staff are properly prepared to recognise and manage severe allergic reactions should they arise.

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## 1 INTRODUCTION

An allergy is a reaction by the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more severe reaction called anaphylaxis. Anaphylaxis is a severe systemic allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen but sometimes can be hours later. Causes often include food, insect stings, or drugs.

**Definition.** Anaphylaxis is a severe life threatening generalised or systemic hypersensitivity reaction. This is characterised by rapidly developing life-threatening airway / breathing problems usually associated with skin or mucosal changes.

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

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

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

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

## 2 Roles and Responsibilities

### Parent responsibilities

- On entry to the school, it is the parent's responsibility to inform school of any allergies. This information should include all previous allergic reactions, history of anaphylaxis and details of all prescribed medication.
- Parents are to supply a copy of their child's Allergy Action Plan to school.
- Parents are responsible for ensuring any required medication is supplied in date and replaced as necessary.
- Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan/Individual Health Care Plan will be kept updated accordingly.

### Staff Responsibilities

- All staff will complete allergy/anaphylaxis training. Training is provided for all staff on an annual basis and as part of induction for any new members of staff,
- Staff must be aware of the pupils in their care (regular or cover basis) who have known allergies, as an allergic reaction could occur at any time and not just at mealtimes. Any food related activities must be supervised with due caution.
- Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend excursions.
- Staff to record all allergy and near misses on Vatix (incident/accident recording) in line with school procedures.
- Staff to record Safeguarding concerns on CPOMS, in line with school procedures.
- The Health & Wellbeing Co-ordinator will review and update Healthcare Plans (IHP's) termly and whenever a pupils medical care changes,
- The Health & Wellbeing Co-ordinator will ensure that up to date Allergy Action/Individual Health Care Plan is kept with the pupil's medication.
- It is the parent's responsibility to ensure all medication is in date however, the Health & Wellbeing Co-ordinator will check medication kept in school on a termly basis and send a reminder to parent if medication is approaching expiry.
- The Health & Wellbeing Co-ordinator keeps a register of pupils who have been prescribed an Adrenaline Auto Injector (AAI) and a record of use of any AAI(s) and emergency treatment given.

### Pupil Responsibilities

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

## 3 ALLERGY ACTION PLANS

Allergy actions plans are included in Individual Health Care Plans for children whose allergies require active management by the school, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction including consent to administer a spare adrenaline auto injector.

It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP / Allergy Specialist) and provide this to the school. This information to be shared promptly with relevant staff, parents/guardians and others, where appropriate, to ensure that pupils are safe and supported,

**Emergency Treatment and Management of Anaphylaxis**

**What to look for:-**

- Swelling of the mouth or throat
- Difficulty swallowing or speaking
- Difficulty breathing
- Sudden collapse / unconsciousness
- Hives, rash anywhere on the body
- Sudden feeling of weakness
- Strong feelings of impending doom

**Anaphylaxis is likely if all of the following 3 things happen**

- Sudden onset (a reaction can start within minutes) and rapid progression of symptoms
- Life threatening airway and/or breathing difficulties and/or circulation problems (e.g. alteration in heart rate, sudden drop in blood pressure, feeling of weakness).
- Change to the skin e.g. flushing, urticaria (an itchy, red, swollen skin eruption showing markings like nettle rash or hives), angioedema (swelling or puffing of the deeper layers of skin and/or soft tissues, often lips, moth, face etc). Note: skin changes on their own are not a sign of an anaphylactic reaction, and in some cases don't occur at all.

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

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

Adrenaline should be administered by an injection into the muscle (intramuscular injection).

**What does adrenaline do?**

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

Adrenaline must be administered with the minimum of delay as it is more effective in preventing an allergic reaction from progressing to anaphylaxis than in reversing it once the symptoms have become severe.

**ACTION**

- Stay with the child and call for help. DO NOT MOVE CHILD OR LEAVE UNATTENDED.
- Remove trigger if possible (e.g. Insect stinger)
- Lie child flat (with or without legs elevated) – If this is not possible, a sitting position may make breathing easier.
- USE ADRENALINE WITHOUT DELAY and note time given. (inject at upper, outer thigh – through clothing if necessary)
- Call 999 and state ANAPHYLAXIS
- If no improvement after 5 minutes, administer second adrenaline auto-injector.
- If no signs of life commence CPR
- Phone parent/carer as soon as possible.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can re-occur after treatment,

## 4 Supply, Storage and Care of Medication

Medication should be stored in a rigid box or zip wallet and clearly labelled with the pupil's name.

The pupil's medication storage box should contain:-

- Adrenaline injectors (i.e. epipen® or Jext® (two of the same type being prescribed).
- An up-to-date allergy action plan / IHP.
- Antihistamine as tablets or syrup (if included in plan).
- Spoon if required.
- Asthma inhaler (if included on plan)

It is the responsibility of the parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the Health & Wellbeing Co-ordinator will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

**Storage**

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

**Disposal**

AAIs are single use only and must be disposed of as sharps. At Peterhouse, used AAIs are given to ambulance paramedics on arrival. At Peterhouse any medical waste is put in the medical waste bin located in the Health & Wellbeing room. There is no sharps bin in school as this is not required for any current pupils; this situation is kept under review.

## 5 Spare Adrenaline Auto Injectors in School

Peterhouse School has spare adrenaline auto-injector (AAI) devices available for emergency use in children who are at risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date), or for children who are not known to have an allergy but appear to have a severe allergic reaction.

Spare AAI pens are kept in the following locations:-

School Office (by defibrillator) for use on site: 1 junior 1 adult

In Health & Wellbeing Room (to be signed out for Community Access): 1 junior, 2 adult

Flex Ed office (for Flex Ed use): 1 adult

The H&WB Co-ord is responsible for checking the spare medication is in date on a termly basis and to replace as needed.

If anaphylaxis is suspected in an undiagnosed individual call the emergency services and state, you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

## 6 Staff Training

The SBL is responsible for coordinating all staff anaphylaxis training and the upkeep of the school's anaphylaxis policy.

All staff will complete online anaphylaxis awareness training via the Key annually. Training is also available for any new members of staff as part of their Induction programme.

Training includes:

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

## 7 Inclusion and Safeguarding

Peterhouse school is committed to ensuring that all children with medical conditions, in terms of both physical and mental health, including allergies, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Wellbeing and anti-bullying measures: -

- Promote inclusion and wellbeing
- Prevent and respond to allergy related bullying
- Work with families and Healthcare professionals to keep pupils safe

## 8 Catering

All food businesses (including school catering) must follow the Food Intolerance Regulations 2021 which states that allergen information relating to the 'Top 14' allergens must be available for all food products. The school menu is available for parents to view with all allergens listed on the school website.

The Health & Wellbeing Co-ordinator will inform the school kitchen of pupils with food allergies.

Parents/carers are encouraged to meet with a member of the Family Support Team to discuss their child's needs.

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

- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.
- Where food is provided by the school, staff should be educated about how to read labels for food allergies and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the Catering Team.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats)
- Foods containing nuts are discouraged from being brought in to school.
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

## 9 School Trips and Community Access

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion. All the activities on the school trip will be risk assessed to determine if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.

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

## 10 Allergy awareness

Peterhouse School supports the approach advocated by the Anaphylaxis Campaign and Allergy UK objective of being allergy aware, rather than seeking to avoid specific allergens. This is because nuts are only one of many allergens that could affect pupils, and no school could guarantee a truly allergen free environment for a child living with food allergies.

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

Each classroom has a list of known allergens for class members (pupils and staff) on the door, to alert visitors to the class (no names are given on the list).

## 11 Risk assessments

The SBL, in liaison with the Health & Wellbeing Co-ordinator, will conduct a detailed risk assessment to help identify any gaps in our systems and processes for keeping allergic children safe for all new joining pupils with allergies and any pupils newly diagnosed.

## 12 Useful Links

Anaphylaxis Campaign-https://www.anaphylaxis.org.uk

- *AllergyWise training for schools –* https://www.anaphylaxis.org.uk/informationtraining/allergywise-training/for-schools/
- *AllergyWise training for Healthcare Professionals – https://www.anaphylaxis.org.uk/information-training/allerywise-training/forhealthcare-professionals/*

  *Allergy UK – http://www.allergyuk.org*

- *Whole school allergy and awareness management (Allergy UK) https://www.allergyuk.org/schools/whole-school-allergy-awarenessandmanagement*
  *Spare Pens in Schools – http://www.sparepensinschools.uk*
  *Official guidance relating to supporting pupils with medical needs in schools: http://medicalconditionsatschool.org.uk/documents/Legal-Situations-in-Schools.pdf*
  *Education for Health http://www.educationforhealth.org*
  *Food allergy quality standards (The National Institute for Health and Care Excellence March 2026) https://www.nice.org.uk./guidance/qs118*
  *Anaphylaxis. assessment and referral after emergency treatment (The National Institute for Health and Care excellence,2020) https://www.nice.org.uk/guidance/cg1347unlid=22904150420167115834*
  *Guidance on the use of adrenaline auto-injectors in schools (Department of Health 2017) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pd*

## REVISION STATUS

| This Review Date | Details of Changes | Sections Changed | Author | Date of next review |
|---|---|---|---|---|
| New Policy | | | C. Sayles<br>E. Price | July 2027 |
| Endorsed by the Peterhouse Governance Committee 22.07.2026 | | | | |
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