HAMSEY GREEN PRIMARY SCHOOL & ACORNS NURSERY ALLERGY POLICY (BENEDICT'S LAW ALIGNED)

2026-2027

Reviewed By Nikki Mace Head Teacher

Date: September 2026

Next Review: September 2027

Context

Food allergies are increasing in both developed and developing countries, especially in children and the severity and complexity of food allergy is also increasing. Food allergy can be fatal and an appropriate diagnosis is essential in parallel with the need for clear food labelling worldwide. Around 5-8% of children in the UK live with a food allergy and most school classrooms will have at least one allergic pupil. These young people are at risk of anaphylaxis, a potentially life threatening reaction which requires an immediate emergency response. 20% of severe allergic reactions to food happen whilst a child is at school and these reactions can occur in children with no prior history of food allergy. It is essential that staff recognise the signs of an allergic reaction, symptoms and are able to manage it safely and effectively. Schools have a legal duty to support pupils with medical conditions, including allergy.

Statement of Intent

This School is committed to promoting a whole school approach to safeguarding, health care, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies. The school will implement robust controls, maintain records, provide staff training and review arrangements regularly to ensure pupil safety and compliance.

We believe that all allergies should be taken seriously and dealt with in a professional and appropriate way. By our actions we will work proactively to:

- provide staff training and review arrangements regularly to ensure pupil safety and compliance
- minimise the risk of exposure within the school setting
- encourage self-responsibility
- learn avoidance strategies
- have robust plans for an effective response to possible emergencies
- ensure inclusivity for all pupil
- encourage proactive steps to keep pupil/students safe
- ensure pupils/students from diverse backgrounds, ethnicities or different cultural heritages are not disadvantaged when dealing with allergies and food labelling

Legal Framework & Benedict's Law Compliance

Hamsey Green and Acorns Nursery are committed to providing a safe, inclusive and supportive environment for all pupils, staff and visitors with allergies.

We recognise that allergies can be life-threatening and that rapid recognition and response are essential.

This policy has been developed in line with:

- Children and Families Act 2014
- Supporting Pupils with Medical Conditions at School
- Equality Act 2010
- Department for Education allergy guidance and statutory requirements issued in support of Benedict's Law
- This includes compliance with Natasha's Law (The Food Information (Amendment) (England) Regulations 2019).

The school recognises that allergy management is a whole-school responsibility and that all staff have a role in keeping children safe.

The school will also:

- work with the catering provider/team to establish a robust process and documentation for menu planning, food labelling, storing, avoidance of cross-contamination, stock ordering of food/drink used at the school.
- provide an effective staff awareness programme on food allergies and intolerances, possible symptoms (anaphylaxis) recognition and actions to take.
- To develop a pupil awareness programme through PSCHE and other curriculum areas

Aims

The aims of this policy are to:

- Protect pupils with allergies from avoidable harm.
- Ensure staff can recognise allergic reactions and anaphylaxis.
- Promote inclusion of pupils with allergies in all aspects of school life.
- Establish clear procedures for prevention and emergency response.
- Meet all statutory duties arising from Benedict's Law and associated guidance.
- Foster a culture of awareness, vigilance and shared responsibility.

Scope

This policy applies to:

- All pupils.
- All employees.
- Volunteers.
- Supply staff.
- Contractors working in school.
- School clubs.

- Educational visits.
- Wraparound care and extracurricular activities.

Definitions

Allergy

An immune system reaction to a substance (allergen).

Anaphylaxis

A severe, potentially life-threatening allergic reaction requiring immediate treatment.

Adrenaline Auto-Injector (AAI)

Emergency medication used to treat anaphylaxis, including devices such as EpiPen®, Jext® and Emerade®.

Equalities statement

Our school is clear about the need to actively support pupils with medical conditions to participate in school life. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely in all aspects of school life. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Roles and Responsibilities

Governors

Will ensure that:

- This policy is implemented effectively.
- Appropriate resources are available.
- Allergy risks are included within school risk management procedures.
- Allergy incidents are monitored and reviewed.

Headteacher

Will:

- Ensure compliance with this policy.
- Appoint a Senior Leadership Team Allergy Lead.
- Ensure adequate staff training.
- Ensure emergency medications are available.

Allergy Lead & Staff responsible for medical needs

The school will appoint a designated Allergy Lead who will:

- Coordinate allergy management across the school.
- Maintain allergy records.
- Ensure Individual Healthcare Plans are current. Wherever possible use an AAP for pupils with recognised allergies and keep it with their medication. Ensure copies of the AAP are available for all staff to access. If an additional written IHP is not required, ensure that the AAP is viewed and treated with the same level of seriousness.
- Ensure all copies of the AAP/IHP located around the school and/or on IT systems are identical if an updated version is received.
- Where an AAP has not been received for a pupil with recognised allergies, or if the medication information is not clear, liaise with GP/school nursing team, to obtain an up to date copy and/ or clarification.
- Ensure medication is stored in a rigid box and clearly labelled with the pupils/student's name and a photograph (older students should carry their AAIs and medication with them)
- Be trained in the use of an Adrenaline Auto-Injector (AAI) and be competent in performing any possible required prescribed medical treatment as outlined in the pupil/student's IHP and/or AAP
- Ensure that any other staff involved with those pupils/students requiring the use of an AAI are also adequately trained and competent
- Oversee staff training.
- Coordinate incident and near-miss reviews.
- Liaise with parents and healthcare professionals with known declared allergies to produce a risk assessment for their child that includes sharing of information, allergy management, risk minimisation and emergency actions.
- Monitor compliance with Benedict's Law requirements, through annual review, governor oversight, incident reporting, training audits, allergy register checks
- Work closely with in-house and sub-contracted Catering Managers and Chef Managers in assisting in the support of pupils/students with known allergies (including meeting with parents/carers where requested) to discuss any special requirements
- Monitor where there is a school 'tuck shop' or home baked items are brought into school
- Ensure all school trips, excursions or off-site extra curricula activities for pupils/students are pre-checked so that 'safe' food is provided or that an effective control is in place to minimise risk of exposure for pupils with allergies

- Ensure the school has an audited spare supply of in date AAIs that are kept in a safe space at room temperature that is accessible, secure but not locked away and all staff are aware of the location
- Monitor the use of all AAIs to ensure they are within the expiry date including those brought into the school by pupils/students or external sources and are of the correct dosage
- Arrange for the correct disposal of out-of-date AAIs
- Where anaphylaxis is suspected in an undiagnosed individual, call the emergency services and state ANAPHYLAXIS is suspected, then follow their advice as to whether administration of a spare AAI is appropriate
- Record all emergency uses of AAIs or reports of suspected emergencies
- Ensure that, if a pupil/student notifies school that they are no longer allergic to a food, this information is checked prior to updating records and the IHP (if applicable).

All Staff

- Follow as directed all the requirements of the school, including all legal requirements, recommended best practice and whole school procedures pertaining to allergies within the school context
- Complete appropriate anaphylaxis training and be confident to respond to an allergy emergency
- Raise awareness about allergies and anaphylaxis amongst their pupils/students in the classroom and around school, especially in dining areas
- Encourage self-responsibility and learned avoidance strategies amongst pupils/students living with allergies
- Help all pupils/students understand which foods are safe for those with allergies and how they can support other pupils/students with specific dietary needs to stay safe
- Highlight the need for anti-bullying of pupils/students with the condition
- Be aware of the pupils in their care (including regular cover classes) who have known allergies as an allergic reaction could occur at any time, not just at breaks or mealtimes
- Any food-related activities must be supervised with due caution whilst following best practice for storing, preparing, cooking and serving food
- Any staff leading on a school trip must check that all pupils/students with medical conditions, including allergies, are carrying their medication -see Educational Visits section
- Staff leading a school trip, excursion or off-site extra curricula activity must ensure they carry all relevant emergency supplies with them

Parents/Carers

- Notify the school of the pupil/student's allergies.
- Inform the school of any changes as soon as known
- Talk with your child about allergy self-management, including what foods are safe and unsafe, how to read food labels, strategies for avoiding allergens, how to spot symptoms of allergy, how and when to tell an adult if experiencing an allergic reaction.
- Provide an AAP completed by a healthcare professional that can be kept with their medication and help the school support the pupil/student
- Contribute to the provision of an IHP in partnership with the school, and relevant healthcare professional, where required.

- Provide any other written medical documentation, instructions and medications as directed by a health professional.
- If you require it, meet with the Catering/Chef Manager to discuss any specific requirements relating to your child's allergy (information from these meetings will be recorded by the Catering/Chef Manager)
- Be aware of the school Allergy Policy and any arrangements for managing children with allergies and at risk of anaphylaxis
- Communicate regularly with the school to support our ability to keep our children safe and act immediately in the event of an allergic reaction
- Provide appropriate in date medication (two AAIs) of the correct dosage and register their AAIs on the manufacturer's websites to receive text alerts for expiry dates
- Providing appropriate foods to be consumed by the child if necessary
- Replace medications after use or upon expiry
- Review the Policy and procedures with the school's Head/SLT and/or Member of Staff responsible for medical needs, the pupil/student's doctor and the pupil (if age appropriate) after a reaction has occurred

Pupil/Students with allergies (as age appropriate)

- Have a good awareness of their allergy and support the knowledge of peers in helping keep them safe
- Be proactive in the care and management of their food allergies and reactions and medication
- Be sure not to exchange food with others and take care to avoid any foods which may cause an allergic reaction
- Read food labelling but, if unsure, avoid the food
- Avoid eating anything with unknown ingredients
- Know where their medication is kept and (if age appropriate and confident enough to administer their own auto-injectors) take responsibility for carrying AAIs on their person at all times
- As soon as they suspect they are experiencing signs of allergic reaction, tell an adult.

Supply, storage and care of medication

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

For younger children or those not ready to take responsibility for their own medication, there should be an anaphylaxis kit which is kept safely, not locked away and accessible to all staff.

Medication should be stored in a suitable container and clearly labelled with the pupil's name. The pupil's medication storage container should contain:

- Two AAIs i.e. EpiPen® or Jext®
- An up-to-date allergy action plan
- Antihistamine as tablets or syrup (if included on allergy action plan)
- Spoon if required

- Asthma inhaler (if included on allergy action plan).

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the Office First Aider will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.

Parents can subscribe to expiry alerts for the relevant AAIs their child is prescribed, to make sure they can get replacement devices in good time.

Older children and medication

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

Storage

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. Used AAIs can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin. Sharps bins to be obtained from and disposed of by a clinical waste contractor/specialist collection service/ local authority (delete as appropriate).

The sharps bin is kept in the following room: UTILITY ROOM (TO THE MALE TOILETS)

Spare AAIs

Schools can now legally purchase and store spare Adrenaline Auto-Injectors (AAIs For children at risk of anaphylaxis). Immediate access to an AAI can be life-saving. While it's vital that families have their own prescribed AAIs for their child, having spare AAIs at school adds an extra layer of reassurance for everyone involved. It's a step towards creating a safer and more inclusive environment for children managing severe allergies. Both Hamsey Green Primary and Acorns Nursery have spare AAIs.

Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products. Any food prepacked on site for direct sale must carry a full ingredient list with allergens clearly emphasised.

The school menu is available for parents to view in weekly with all ingredients listed and allergens highlighted on the school website at: hamseytlt.co.uk.

The Office/SENCO will inform the Catering Manager of pupils with food allergies.

Including Wraparound Care, the school and nursery operate a consistent system enabling catering staff to identify pupils with allergies. This includes maintaining an up-to-date list of pupils with photographs, allergy information and allergy placemats where required. Separate fridges are used for dairy and non-dairy products.

Parents/carers are required to complete an allergy form by the School Caterer and then encouraged to meet with the Catering Manager 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.
- If food is purchased from the school tuck shop, parents should check the appropriateness of foods by speaking directly to the catering manager or depending on the event, the Office/Head/Class Teacher.
- The pupil should be taught to also check with catering staff, before purchasing food or selecting their lunch choice.
- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils. For further information, parents/carers are encouraged to liaise with the Catering Manager.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats).
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.

Our Caterers will ensure they follow:

- allergen matrix maintenance
- supplier allergen verification
- cross-contamination checks
- allergen change notifications

Allergy awareness and nut bans

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

The school operates nut minimisation measures in identified areas and works with families to reduce the risk of exposure to nut allergens. The school cannot guarantee a completely nut-free environment.

Risk assessment

The School and Nursery will conduct a detailed individual risk assessment for all new joining pupils with allergies and any pupils newly diagnosed, to help identify any gaps in our systems and processes for keeping allergic children safe.

Training

The school will ensure that all staff receive annual allergy awareness training.

Training will include:

- Understanding allergies.
- Allergen avoidance.
- Recognising allergic reactions.
- Recognising anaphylaxis.
- Use of adrenaline auto-injectors.
- Emergency procedures.
- Educational visits and risk management.

New staff will receive allergy awareness information as part of induction.

Training records will be maintained by the Allergy Lead

Inclusion and Bullying

The school recognises that children with allergies may experience anxiety, exclusion or bullying.

The school will:

- Promote understanding of allergies.
- Challenge discriminatory behaviour.
- Support emotional wellbeing.
- Ensure pupils are able to participate safely in school life.

All allergy-related bullying will be addressed through the Behaviour Policy and Anti-Bullying Policy.

Allergy Register

We will maintain a central Allergy Register on Arbor including:

- Pupil name.
- Photograph.
- Allergens.
- Severity.
- Required medication.
- Emergency contacts.
- Healthcare Plan review dates.

Information will be accessible to relevant staff whilst complying with data protection requirements.

Individual Healthcare Plans

Every pupil with a diagnosed allergy will have either an agreed Allergy Action Plan and/or an Individual Healthcare Plan where required.

Plans will include:

- Known allergens.
- Symptoms.
- Emergency procedures.
- Medication requirements.
- Location of medication.
- Parental contacts.
- Medical advice.

Plans will be:

- Reviewed annually.
- Reviewed after any allergic reaction.
- Updated whenever circumstances change.

SECTION 2 – ALLERGY / ANAPHYLAXIS RISK

My child is allergic to:-

_____

_____

_____

All reasonable steps will be taken to ensure that your child is not exposed to the allergens detailed above. You must also remind your child to refuse food to which they are allergic.

His/her usual allergic symptoms are:

_____

_____

_____

Medication required	How much and when?
Any medication side effects	

In the event of an acute allergic reaction, staff will follow this procedure:-

- Call an ambulance
- Inform the Headteacher and First Aiders
- Inform the parents/emergency contacts
- Assess the severity of the symptoms and administer relevant medication as detailed above
- Follow emergency lifesaving procedures if necessary
- Hand over care to Ambulance technicians on arrival
- Record full details of all medication/interventions given

SECTION 4 – OTHER MEDICAL CONDITION

Please give a full description of your child's condition and how it affects them:

_____

_____

Please advise us of the necessary actions we need to take to care for your child:

_____

_____

_____

_____

Please provide details of medication (these will be passed to ambulance staff in the event of an emergency)

Medication required Any medication side effects?	How much and when?	Taken at Home or in School?	Can your child self - administer?

Describe what constitutes an emergency for the child and the action to take if this occurs:

_____

_____

Is there anything else we need to know? (please continue overleaf if necessary)

_____

_____

SECTION 5 – Review Sheet

School officials only

Staff Training Requirements:

Training Needs	Trained Staff

Review dates:

	YR	Y1	Y2	Y3	Y4	Y5	Y6
Office Manager							
First Aiders							
Class Teachers							
SLT							
TA's							
Shared in Staff Meeting							
Parents							

Location of plans :

1)
2)
3)

Location of medication:

_____

_____

_____

_____

Educational Visits

All visits will include consideration of allergy risks.

Planning will include:

- Consultation with parents.
- Review of Healthcare Plans.
- Access to emergency medication.
- Identification of trained staff.
- Venue-specific risk assessments.

The school will undertake an individual risk assessment and may determine that attendance is not safe if required emergency medication is unavailable.

Before and After School Clubs

All clubs provided by the school or external organisations operating on site must comply with this policy.

Relevant staff must:

- Be informed of allergy needs.
- Know emergency procedures.
- Have access to Healthcare Plans where necessary.

Incident Reporting & Monitoring

Incident and near miss investigations will be reported and findings sent to governors in an annual report.

Allergy Emergencies and Adrenaline Auto-Injectors

In the event of suspected anaphylaxis, staff will:

- Pupil should be lying down when pen administered, unless in breathing difficulties in which case they should lie down with head and shoulders raised. They stay in these positions until ambulance arrives. If second dose needed it should be in other thigh.

- calling 999 and stating "anaphylaxis";
- second AAI after 5 minutes if symptoms persist (following current action plans);
- inform parents;
- record incident;
- post-incident review.

Appendix I - First Aid for Anaphylaxis poster

FIRST AID FOR ANAPHYLAXIS

Recognise the Signs of Anaphylaxis...

A Airways

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

B Breathing

- Difficult or noisy breathing
- Wheeze or persistent cough

C Circulation

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

An allergic reaction can escalate to anaphylaxis which is potentially life-threatening.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

ANAPHYLAXIS: ACTIONS TO TAKE

If any one or more of the above ABC symptoms are present, take these steps.

1. Administer an Adrenaline Auto Injector (AAI) without delay

Inject the AAI into the top of the outer thigh. If you're in doubt that it is anaphylaxis but one or more ABC symptoms are present, **give the AAI, it will not harm them.**

2. Dial 999 and say anaphylaxis ('ana-fill-axis')

Stay with the person until the ambulance arrives. **DO NOT let them stand up and walk around.**

3. The person should lie down immediately

If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.

4. Inject a second AAI into the outer thigh if there are no signs of improvement after 5 minutes

If there is no sign of life, start CPR immediately until help arrives.

Please learn these steps. This is life-saving information.
You never know when you will need to act in an anaphylaxis emergency.

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

Empower • Include • Protect
AllergySchool.org.uk

Registered charity England & Wales (1180198) Scotland (SC050602). Based on RSAI and 2013 PHRN guidance.

Appendix II - Epipen AAI and Jext AAI Instructions

ANAPHYLAXIS

HOW TO USE EPIPEN AAIS

If you think someone is have an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Remove the blue safety cap

Grasp the EpiPen in your dominant hand and remove the blue safety cap by pulling straight up. **Remember: Blue to the Sky, Orange to the Thigh!**

2. Position the orange tip

Hold the EpiPen at 90°, approximately 10cm away from the leg, with the orange tip pointing towards the outer thigh.

3. Administer the EpiPen AAI

Jab the EpiPen firmly into the outer thigh at a right angle. Hold firmly for 3 seconds, before removing and safely discarding.

4. Once the EpiPen AAI has been administered call 999

Ask for an ambulance and say **"ana-fill-axis".**

5. Lie the person down with legs raised immediately

If the person is not already lying down, they should do so, **with legs raised if possible.**

If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side .

6. If there are no signs of improvement after 5 minutes, use a second EpiPen AAI

The person should remain still and lying down until the ambulance arrives. **Don't try to get up, even if you start to feel better.**

7. Start CPR

If there are no signs of life, **start CPR immediately** until help arrives.

For more information on EpiPen AAIs >>

Sign up to the free expiry alert service and receive reminders by text or email when your EpiPen is about to expire >>

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

Empower · Include · Protect
AllergySchool.org.uk

Registered charity England & Wales (FBKOM) Scotland (SCO50430). Based on RSAD and 2013 MMR guidance. Source: EpiPen.

Appendix II - Epipen AAI and Jext AAI Instructions

ANAPHYLAXIS

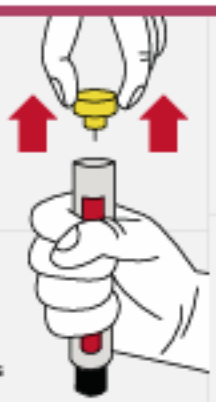
HOW TO USE JEXT AAIS

If you think someone is have an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Hold the Jext AAI in the hand you write with

Hold with your thumb closest to the yellow cap. **Pull off the yellow cap with your other hand.**



2. Place the black injector tip against the outer thigh

Hold the injector **at a right angles (approx. 90°) to the thigh.**

3. Push the black tip as hard as you can into the outer thigh

Wait until you **hear a 'click'** confirming the injection has started, then keep it pushed in. Hold the injector firmly in place against the thigh for **10 seconds (a slow count to 10)** then remove. The black tip will extend automatically and hide the needle.

4. Massage the injection area for 10 seconds

5. Once the Jext AAI has been administered call 999

Ask for an ambulance and say **"ana-fill-axis".**

6. Lie the person down with legs raised immediately

If the person is not already lying down, they should do so, **with legs raised if possible.**

If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.

7. If there are no signs of improvement after 5 minutes, use a second Jext AAI

The person should remain still and lying down until the ambulance arrives. **Don't try to get up, even if you start to feel better.**

8. Start CPR

If there are no signs of life, **start CPR immediately** until help arrives.

For more information on Jext AAIs >>

Sign up to the free expiry alert service and receive reminders by text or email when your Jext AAi is about to expire >>

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

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Registered charity England & Wales (1180798) Scotland (SC038630). Based on BSACI and 2020 MHRA guidance. Source: Jext.

Appendix III

Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector.

Refer to the child's BSACI Allergy Action Plan if they have one and call for other staff help if needed

Mild Reaction

- Itchy skin, rash, hives
- Swelling of lips, throat
- Sneezing, nasal congestion
- Water, red eyes

Give Antihistamine Dose

- Check correct dose as on pharmacy label

Contact Parent / Carer

- Notify them that their child has had an allergic reaction
- **Supervise child continually**

- If child vomits within 30 minutes of being ghiven first antihistamine dose

Administer another full dose

Regular dosing of antihistamine for 24 hours

- Dosage as directed on pharmacy label

If condition worsens move to Severe Reaction

Severe Reaction

- Hives (asthma or eczema worsen)
- Swollen tongue or difficulty swallowing
- Hoarse voice, coughing or wheezing
- Laboured breathing, gasping
- Stomach pain, bloating, vomiting
- Change in skin tone/colour - paler
- Feeling faint, clammy
- Dizziness, fainting, collapse

Where Airway / Breathing difficulty
ensure child sits upright

Where Feeling faint or drowsy,
lie down with legs raised

Dial 999 immediately

- Follow instructions given by ambulance control staff
- Inform ambulance control if you have spare in-date Adrenaline Auto-Injectors at the School
- Ensure parents/carers are contacted
- **DO NOT LEAVE THE CHILD**
- **If the child is asthmatic** but still alert, give inhaler via spacer - 2 puffs, additional puffs (1 per minute to max 8) can be given if needed.

Appendix IV

Flowchart for Allergic Reaction with use of Adrenaline Auto-Injector.

Refer to the child's BSACI Allergy Action Plan if they have one and call for other staff help if needed

Mild Reaction

- Itchy skin, rash, hives
- Swelling of lips, throat
- Sneezing, nasal congestion
- Water, red eyes

Give Antihistamine Dose

- Check correct dose as on pharmacy label

Contact Parent / Carer

- Notify them that their child has had an allergic reaction
- **Supervise child continually**

- If child vomits within 30 minutes of being ghiven first antihistamine dose

Administer another full dose

Regular dosing of antihistamine for 24 hours

- Dosage as directed on pharmacy label

If condition worsens move to **Severe Reaction**

Severe Reaction

- Hives (asthma or eczema worsen)
- Swollen tongue or difficulty swallowing
- Hoarse voice, coughing or wheezing
- Laboured breathing, gasping
- Stomach pain, bloating, vomiting
- Change in skin tone/ colour - paler
- Feeling faint, clammy
- Dizziness, fainting, collapse

Where Airway / Breathing difficulty

ensure child sits upright

Where Feeling faint or drowsy,

lie down with legs raised

Administer Auto-Injector (AAI)

- Check in-date, safety cap intact
- Remove safety cap
- Hold needle firmly, inject into thigh
- AAI clicks, hold for 3 seconds
- Remove AAI carefully
- Send for 2nd AAI

Dial 999 immediately

- Follow instructions given by ambulance control staff
- Where no improvement after 5 minutes, administer a second dose
- Ensure parents/carers are contacted
- **DO NOT LEAVE THE CHILD**
- **If the child is asthmatic** but still alert, give inhaler via spacer - 2 puffs, additional puffs (1 per minute to max 8) can be given if needed.
- Hand over AAIs to ambulance crew on arrival or ambulance

Appendix V

Information on allergies

The most common causes of food allergies relevant to this Policy are the fourteen food allergens:

- **Cereals containing Gluten**
- **Celery**
- **Crustaceans**
- **Eggs**
- **Fish**
- **Soya**
- **Milk**
- **Nuts**
- **Peanuts**
- **Mustard**
- **Sesame Seeds**
- **Sulphur dioxide/Sulphites**
- **Lupin**
- **Molluscs**

However, it is possible that any food has the potential to cause an allergic reaction. Contact with any food or materials containing a child's allergen has the potential to cause an allergic reaction for that child.

Latex, chemicals, medicines, grasses, pollen, weeds, trees, pets, insect venom and animal dander (shedded flakes of skin) can also cause allergic reactions.

Symptoms

Mild to moderate symptoms include:

- Swelling of the eyes, face and lips
- Runny or congested nose
- Raised itchy rash (hives), eczema flare, skin flushing
- Itchy mouth
- Stomach cramps, nausea, vomiting, diarrhoea

Severe symptoms include:

- Swollen tongue, hoarse voice or cry, difficulty swallowing and talking
- Chest tightness
- Breathing difficulties, persistent cough, wheeze
- Low blood pressure, feeling faint, collapse
- Pale and floppy (babies and small children)

Appendix VI

Other support and resources

- Allergy Guidance for Schools - https://www.gov.uk/government/publications/school-food-standards-resources-for-schools/allergy-guidance-for-schools
- Allergy UK Helpline: providing support, advice and information for those living with allergic disease tel. weekdays 9am-5pm 01322 619898 - www.allergyuk.org
- Early Years Foundation Stage Statutory Guidance, Section 3 Safeguarding and Welfare Requirements - Food and Drink - Statutory framework for the early years foundation stage (publishing.service.gov.uk)
- Example menus for early years settings in England - Part I Guidance - Example menus for early years settings in England: part 1 (publishing.service.gov.uk) - Managing food allergies, intolerances and meeting cultural needs; Providing food allergen information; Reading food labels; Allergen information
- Food Standards Agency food allergy and intolerance online training - https://allergytraining.food.gov.uk/
- For pupils / students with Medical Conditions at School - Supporting pupils with medical conditions at school - GOV.UK (www.gov.uk)

  Wales: https://www.gov.wales/sites/default/files/publications/2018-12/supporting-learners-with-healthcare-needs.pdf

  Scotland: https://www.gov.scot/publications/supporting-children-young-people-healthcare-needs-schools/

  Northern Ireland: https://www.education-ni.gov.uk/publications/supporting-pupils-medication-needs
- FSA reporting tool for allergies - https://www.gov.uk/government/news/fsa-launches-allergy-and-intolerance-reporting-tool
- 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.pdf

  Wales: https://www.gov.wales/sites/default/files/publications/2018-12/guidance-on-the-use-of-emergency-adrenaline-auto-injectors-in-schools-in-wales.pdf