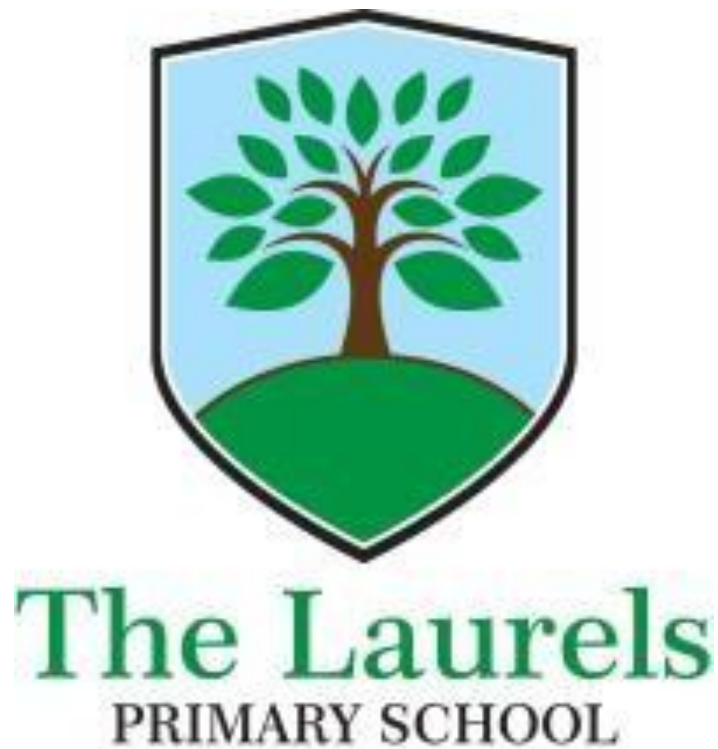




Anaphylaxis & Allergies Policy 2026-2027

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Approval By: Local Governing Board	Date: September 2026	Review Date: Summer Term 2027

Introduction

The Laurels Primary School is committed to providing a safe, inclusive environment for all pupils with allergies. This policy sets out how the school will minimise the risk of allergic reactions, respond effectively to emergencies and ensure that pupils with allergies are able to participate fully in school life.

An allergy is an immune system reaction to a substance that is normally harmless. Allergic reactions can range from mild symptoms, such as itching, sneezing or skin rashes, to a severe, life-threatening reaction known as anaphylaxis.

Anaphylaxis is a rapid, serious allergic reaction that can affect the whole body, usually within minutes of exposure to an allergen, although symptoms may occasionally develop later. Common triggers include foods, insect stings, medicines and latex.

Healthcare professionals generally consider an allergic reaction to be anaphylaxis when it affects the airway, breathing or circulation (the **ABC symptoms**).

Common allergens include, but are not limited to:

- Peanuts
- Tree nuts
- Sesame
- Milk
- Egg
- Fish
- Latex
- Insect venom
- Pollen
- Animal dander

1. Anaphylaxis and Undiagnosed Allergies

The Laurels Primary School recognises that anaphylaxis can occur in any child, including those with no previous diagnosis of allergy, no Allergy Action Plan and no prescribed medication.

Staff must therefore be aware that a child's first episode of anaphylaxis may occur unexpectedly and can become life-threatening within minutes.

Where anaphylaxis is suspected, treatment must never be delayed because a child does not have:

- a known allergy
- an Allergy Action Plan
- prescribed medication.

In accordance with current national guidance and the Human Medicines Regulations 2012, the school's emergency adrenaline auto-injectors (AAIs) may be administered where anaphylaxis is suspected and immediate treatment is required to preserve life.

2. Roles and Responsibilities

Parents and Carers

Parents and carers are responsible for:

- informing the school of any diagnosed allergies or previous serious allergic reactions before their child starts school or immediately following diagnosis;
- providing an up-to-date Allergy Action Plan (BSACI plans are preferred), completed by an appropriate healthcare professional;
- ensuring prescribed medication is supplied, clearly labelled, in date and replaced before expiry;
- notifying the school immediately of any changes to their child's allergy, treatment or medication;
- ensuring food allergies are accurately recorded within School Grid where school meals are taken.

Staff

All staff, including temporary, supply and cover staff, are responsible for:

- completing annual allergy and anaphylaxis training, together with induction training where appropriate;
- knowing which pupils have diagnosed allergies;
- familiarising themselves with pupils' Allergy Action Plans;
- responding immediately to suspected allergic reactions;
- following this policy and the school's emergency procedures.

Staff leading educational visits must also ensure:

- emergency medication accompanies the pupil throughout the visit;
- medication remains immediately accessible;
- suitable arrangements are in place before the visit proceeds.

School Office

The School Office is responsible for:

- maintaining records of pupils prescribed adrenaline auto-injectors (AAIs);
- storing Allergy Action Plans alongside medication;
- undertaking routine checks of medication held in school and notifying parents when replacement is required;
- maintaining records of allergic reactions, administration of AAIs and any associated incidents;
- ensuring spare AAIs remain in date and available for emergency use.

Pupils

Where appropriate to their age and understanding, pupils will be encouraged to:

- understand their allergy and recognise symptoms;
- avoid known allergens where possible;
- inform a member of staff immediately if they feel unwell or believe they have been exposed to an allergen.

As a primary school, emergency allergy medication will normally be stored and managed by staff to ensure it remains safe, accessible and available whenever required.

3. Allergy Action Plans

Every pupil with a diagnosed allergy requiring emergency medication must have an up-to-date Allergy Action Plan completed by an appropriate healthcare professional.

The school's preferred format is the British Society for Allergy and Clinical Immunology (BSACI) Allergy Action Plan.

The Allergy Action Plan acts as the pupil's individual healthcare plan and provides staff with clear guidance on:

- recognised allergens;

- signs and symptoms of an allergic reaction;
- medication required;
- when and how medication should be administered;
- emergency procedures.

The Allergy Action Plan will be stored with the pupil's medication and made available to relevant staff.

For pupils at risk of anaphylaxis, the Allergy Action Plan forms part of the school's Individual Healthcare Plan (IHP) arrangements and will be reviewed at least annually, or sooner where medical needs change

4. Emergency Treatment and Management of Anaphylaxis

Recognising Anaphylaxis

Symptoms of an allergic reaction usually develop quickly, often within minutes of exposure to an allergen.

Mild to Moderate Allergic Reaction

Symptoms may include:

- a raised, itchy rash (urticaria or hives);
- tingling or itching in the mouth;
- swelling of the lips, face or eyes;
- abdominal pain or vomiting.

Severe Allergic Reaction (Anaphylaxis)

Anaphylaxis is a medical emergency. Symptoms commonly affect the **Airway, Breathing or Circulation (ABC)** and may include:

Airway

- Swelling of the throat, tongue or upper airways.
- Difficulty swallowing.
- Hoarse voice or throat tightness.

Breathing

- Sudden wheezing.
- Difficulty breathing.
- Noisy breathing.
- Persistent coughing.

Circulation

- Dizziness or faintness.
- Pale, clammy skin.
- Sudden drowsiness or confusion.
- Collapse or loss of consciousness.

In severe cases, blood pressure can fall rapidly, leading to collapse and, without prompt treatment, cardiac arrest.

Emergency Treatment

Anaphylaxis can occur in any child, including those with no known allergy or previous history of allergic reactions. Staff must never delay treatment because a child does not have an Allergy Action Plan, prescribed medication or a confirmed diagnosis.

Adrenaline is the first-line treatment for anaphylaxis. It works rapidly by:

- opening the airways;
- reducing swelling;
- raising blood pressure.

Where a pupil has a diagnosed allergy, parental consent for the use of the school's emergency adrenaline auto-injector (AAI) will normally be included within their Allergy Action Plan.

However, where anaphylaxis is suspected and immediate treatment is required to preserve life, staff may administer a school emergency AAI in accordance with Regulation 238 of the Human Medicines Regulations 2012, including where:

- the child has no known allergy;
- there is no Allergy Action Plan;
- prior parental consent has not been obtained.

Life-saving treatment will never be delayed whilst attempts are made to contact parents or carers.

Emergency Procedure

If anaphylaxis is suspected:

1. **Stay with the child** and call for assistance immediately. Do not leave them unattended.
2. **Administer an adrenaline auto-injector (AAI) immediately.** Record the time it was given and follow the manufacturer's instructions.
3. **Lie the child flat with their legs raised.** If breathing is difficult, they may be supported in a sitting position for the shortest possible time. Do not allow them to stand or walk.
4. **Call 999 immediately**, stating that the child is experiencing **anaphylaxis**.
5. **Administer a second AAI after five minutes** if symptoms have not improved or begin to worsen.
6. **Begin CPR immediately** if the child becomes unresponsive and is not breathing normally.
7. **Inform parents or carers** as soon as practicable.

While waiting for the ambulance:

- continue to monitor the child's airway, breathing and circulation;
- keep them warm and reassured;
- do not allow them to stand, walk or sit upright unless absolutely necessary to assist breathing.

Any pupil who has received adrenaline must be taken to hospital by ambulance for further assessment and observation, even if symptoms appear to have resolved.

Following an Allergic Reaction

Following every allergic reaction, the school will:

- complete an incident report;
- review the circumstances surrounding the incident;
- update individual or whole-school risk assessments where required;
- review the pupil's Allergy Action Plan;
- identify and implement any additional control measures;
- debrief staff where appropriate to ensure learning is shared and future risk is reduced.

5. Supply, Storage and Care of Medication

Every pupil with a diagnosed allergy requiring emergency medication will have a clearly labelled **red drawstring allergy bag** containing their prescribed medication and supporting documentation.

Medication must be stored in an unlocked location that is known to staff, readily accessible at all times and capable of being retrieved and administered immediately in an emergency. Under normal circumstances, medication should be accessible within five minutes.

Where appropriate, the allergy bag should contain:

- two adrenaline auto-injectors (AAIs), such as EpiPen® or Jext®;
- an up-to-date Allergy Action Plan;
- antihistamine medication, where specified within the Allergy Action Plan;
- an oral syringe or spoon, where required;
- an asthma inhaler and spacer, where prescribed.

Parents and carers are responsible for ensuring that all medication:

- is clearly labelled;
- remains in date;
- is replaced before expiry.

To support this process, the School Office will undertake termly checks of medication held in school and notify parents when replacement medication is required. Parents are also encouraged to register for manufacturers' expiry reminder services where available.

In exceptional circumstances, a pupil may carry their own medication following an individual risk assessment and agreement between the school, parents/carers and the relevant healthcare professional.

Storage

AAIs must be stored:

- at room temperature;
- away from direct sunlight;
- protected from excessive heat or cold.

Disposal

AAIs are single-use devices and must be disposed of safely as clinical sharps. Used devices should be handed to the attending ambulance crew whenever possible.

Whenever any AAI is administered, including a spare AAI, staff must:

- call 999 immediately;
- inform parents or carers as soon as practicable;
- record the incident and review any lessons learned.

6. Spare Adrenaline Auto-Injectors (AAIs)

The Laurels Primary School maintains a supply of spare adrenaline auto-injectors (AAIs) in accordance with the Human Medicines Regulations 2012. These devices are intended for emergency use where immediate treatment is required to preserve life.

Spare AAIs may be administered:

- to a pupil with a diagnosed allergy whose own prescribed AAI is unavailable, inaccessible or unusable (for example, if it is out of date or has misfired); or
- in exceptional circumstances where a pupil is experiencing suspected anaphylaxis for the first time and has no known allergy, no prescribed AAI and no Allergy Action Plan.

Spare AAIs are stored in the school office in a clearly labelled **Emergency Anaphylaxis Adrenaline red drawstring allergy bag**. They are kept in an unlocked, readily accessible location that is known to all staff.

The School Office is responsible for:

- checking spare AAIs monthly;
- replacing medication before its expiry date;
- ensuring the storage location remains clearly identified and accessible.

For pupils with known allergies, written parental consent for the use of a spare AAI will normally be included within the pupil's Allergy Action Plan.

Whenever a spare AAI is administered:

- 999 must be called immediately;
- parents or carers must be informed as soon as reasonably practicable;
- the incident must be recorded and reviewed in accordance with this policy.

7. Staff Training

The Headteacher has overall responsibility for ensuring that appropriate allergy management arrangements are in place.

Day-to-day coordination of allergy management, staff training and policy implementation is delegated to:

- Carly Oliver
- Sam Foster

All staff, including temporary, supply and agency staff, will receive allergy and anaphylaxis awareness training:

- on induction;
- annually thereafter; and
- whenever procedures or guidance change.

Training will include:

- recognising common allergens and allergy triggers;
- recognising the signs and symptoms of allergic reactions and anaphylaxis;
- understanding when and how to administer adrenaline auto-injectors (AAIs);
- emergency response procedures, including contacting emergency services;
- allergen avoidance and measures to reduce the risk of exposure;
- understanding staff responsibilities under this policy;
- managing and following Allergy Action Plans.

Wherever possible, staff will also undertake practical training using manufacturer training devices to maintain confidence in administering AAIs.

Training records will be maintained by the school.

8. Inclusion and Safeguarding

The Laurels Primary School is committed to ensuring that pupils with allergies are fully included in all aspects of school life.

The school recognises that allergies can affect both a child's physical health and emotional wellbeing. Pupils with allergies will therefore be supported to participate safely in learning, educational visits, enrichment activities and wider school life without unnecessary barriers.

Reasonable adjustments will be made where required to reduce risk while promoting independence, confidence and inclusion.

The school will work in partnership with parents, healthcare professionals and, where appropriate, pupils themselves to ensure appropriate support arrangements remain effective.

9. Catering

The school works closely with its catering provider to minimise the risk of allergen exposure during the preparation and serving of food.

All catering providers are required to comply with the Food Information Regulations 2014, ensuring allergen information for the statutory 14 allergens is available for all food provided.

Current menus, ingredients and allergen information are available to parents through School Grid.

School Grid

School Grid provides an additional layer of protection for pupils with food allergies.

When parents record their child's medically diagnosed allergies within School Grid, the system:

- prevents meals containing recorded allergens from being ordered;
- automatically updates meal availability where supplier ingredient information changes;
- alerts parents if a previously selected meal becomes unsuitable.

During meal service, kitchen staff are alerted to each child's recorded allergies when meals are served, providing an additional safeguard against incorrect meal selection.

School Grid supports, but does **not** replace, the requirement for parents to:

- notify the school of diagnosed allergies;
- provide an up-to-date Allergy Action Plan where required.

Food Safety Arrangements

The school expects that:

- packed lunches, drinks and food containers for pupils with allergies are clearly labelled;
- parents check the suitability of school meals before ordering;
- pupils are encouraged, where appropriate, to check meal choices with catering staff.

Catering staff will follow safe food handling procedures to minimise the risk of cross-contamination, including appropriate cleaning of equipment and preparation areas.

Food will not be provided to pupils with known food allergies without appropriate parental agreement where there is any uncertainty.

Where birthday treats or similar items are brought into school, these will normally be sent home at the end of the school day for parents or carers to decide whether they are suitable for their child.

Any activity involving food, including cooking, food technology, science investigations, celebrations or cultural events, will be considered as part of the school's risk assessment process. Adjustments will be made where necessary to ensure all pupils can participate safely.

10. Educational Visits and Residential Visits

The Laurels Primary School is committed to ensuring that pupils with allergies are able to participate fully in educational visits, residential visits and sporting activities wherever it is safe to do so.

The needs of pupils with allergies will be considered as part of the visit planning and risk assessment process.

Visit leaders are responsible for ensuring that:

- all prescribed emergency medication accompanies the pupil throughout the visit;
- medication remains readily accessible at all times and is never left unattended or stored where it cannot be accessed quickly;
- staff supervising the pupil are aware of their allergy, understand their Allergy Action Plan and know how to respond in an emergency;
- venues, catering providers and activity organisers are informed of relevant allergies where appropriate.

Where food is provided by an external venue, arrangements will be discussed in advance to ensure suitable meals can be provided safely.

If appropriate arrangements cannot be made to manage a pupil's allergy safely, the school will work with parents or carers to identify suitable alternatives. Decisions will always be based on individual risk assessment and the safety of the pupil.

11. Allergy Awareness and Nut Management

The Laurels Primary School is not a nut-free school and cannot guarantee that the school environment is completely free from nuts or traces of nuts.

However, the school takes reasonable and proportionate steps to reduce the risk of accidental exposure for pupils with severe allergies.

Parents, carers, pupils and visitors are asked **not** to bring foods containing nuts or nut products onto the school site wherever possible.

If food containing nuts is brought into school:

- pupils will not be permitted to consume it on site;
- the item will be stored safely and returned home at the end of the school day;
- parents or carers may be contacted where appropriate.

The school will continue to promote allergy awareness across the school community and expects everyone to support these arrangements by helping to minimise avoidable risks for pupils with severe allergies.

12. Risk Assessment

Individual risk assessments will be completed for:

- newly admitted pupils with diagnosed allergies;
- pupils receiving a new allergy diagnosis;
- pupils whose medical needs change significantly.

Risk assessments will consider, where appropriate:

- classroom activities;
- lunchtimes and breaktimes;
- educational visits;
- clubs and enrichment activities;
- sporting activities;
- practical lessons involving food or other allergens;
- emergency arrangements.

Risk assessments will be reviewed following:

- any significant allergic reaction;
- changes to a pupil's medical needs;
- changes in school procedures;

- any identified near miss or emerging risk.

13. Governance

The Governing Board is committed to promoting the safety, wellbeing and inclusion of pupils with allergies.

A nominated Allergy Governor will provide strategic oversight by seeking assurance that appropriate arrangements are in place across the school.

This includes monitoring:

- compliance with relevant legislation and national guidance;
- implementation and review of this policy;
- completion of Individual Healthcare Plans and Allergy Action Plans where required;
- records of allergic reactions, near misses and lessons learned;
- staff training and emergency preparedness;
- availability and accessibility of emergency medication, including spare AAIs;
- the school's approach to allergy awareness and inclusion.

Operational responsibility for implementing this policy rests with the **Headteacher**, who is responsible for ensuring that appropriate procedures are followed on a day-to-day basis.

14. Useful Resources

The following organisations provide up-to-date advice and guidance on allergy management:

- **Anaphylaxis UK**
 - Safer Schools Programme
 - AllergyWise for Schools
- **Allergy UK**
 - Whole School Allergy Management
- **British Society for Allergy and Clinical Immunology (BSACI)**
 - Allergy Action Plans
- **Spare Pens in Schools**
- **Department for Education**
 - *Supporting Pupils at School with Medical Conditions*
- **Department of Health**
 - *Guidance on the Use of Adrenaline Auto-Injectors in Schools*
- **National Institute for Health and Care Excellence (NICE)**
 - *Food Allergy Quality Standard (QS118)*
 - *Anaphylaxis: Assessment and Referral After Emergency Treatment (CG134)*