

North Baddesley Junior School

"Respect. Aspire. Resilient"

Allergy safety policy



Status:	Current	Approval Level:	FGB
Review Frequency:	Every 3 Year	Author/Role:	Headteacher
Date First Written:	July 2026	Date Last Approved:	July 2026
Date of Next Review:	July 2027	Statutory:	Yes
Source:	School	Any Changes:	No

Section 34 of the [Children's Wellbeing and Schools Act 2026](#) requires that LA-maintained schools, academies and PRUs must have an allergy safety policy.

Key staff Members: Allergy Safety liaison officer. Hannah Saint

Responsible Manager: Lucy Woolten Head Teacher

Culture

Awareness training

All staff present during times when pupils are scheduled to be on site will receive allergy awareness training. This includes permanent staff, temporary staff, supply teachers, peripartetic staff, agency workers and regular volunteers. It includes catering staff and others who may oversee children and young people at breakfast or after school clubs. It is not intended to include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

Annually, staff will undertake allergy awareness training. If staff join mid cycle then this training will be part of their induction. Allergy awareness training should ensure all staff:

Have an **awareness** of allergy, the risks it poses, how allergic reactions can occur and how to manage it;

- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist;
- Understand the difference between food allergy, coeliac disease and food intolerance;
- Know where to find information on **allergy triggers**;
- Can identify the range of **symptoms** of allergic reactions;
- Understand and can recognise **anaphylaxis**;
- Know how to respond in an **emergency**, including:
 - calling emergency services and informing parents;
 - how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack).
 - training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices);

- Understand the **impact** allergy can have on a child or young person's wellbeing;
- Understand the school, college or setting's **allergy safety policy**;
- Know how to check whether an individual is on the record of those with known allergy and how to use an Allergy or Asthma Action Plan;
- Understand their **responsibilities** in reducing the risk of individuals with known allergy coming into contact with their known allergens;
- Understand how to **report** an allergic reaction or case of anaphylaxis (whether an incident or a "near miss").

Training under this guidance should be understood as allergy awareness and emergency response training. It should not be read as replacing any separate clinical governance, competency or delegation arrangements that may be needed where a child or young person requires individual healthcare support beyond school-level allergy safety arrangements.

Wellbeing

Promoting the Wellbeing of Children and Young People with Allergies

The school is committed to promoting the physical, emotional, and social wellbeing of all children and young people with allergies. We recognise that living with an allergy, particularly where there is a risk of anaphylaxis, can cause anxiety for pupils and their families.

To support wellbeing, the school will:

- Foster an inclusive, supportive environment where pupils with allergies feel safe, respected, and able to participate fully in school life.
- Work in partnership with parents/carers, healthcare professionals, and the pupil to develop and regularly review Individual Healthcare Plans (IHPs), where appropriate.

- Ensure staff are trained to recognise allergic reactions, respond appropriately in an emergency, and understand the impact allergies can have on a pupil's confidence and emotional wellbeing.
- Encourage pupils, where appropriate to their age and understanding, to develop confidence in managing their allergy safely and to communicate their needs to trusted adults.
- Ensure emergency medication is readily accessible and that appropriate arrangements are in place for educational visits, extracurricular activities, and school events.
- Take reasonable steps to reduce exposure to known allergens while recognising that it is not possible to guarantee an allergen-free environment.
- Provide reassurance to pupils and families through clear communication about the school's allergy management procedures and emergency response arrangements.
- Offer pastoral support to pupils who experience anxiety or emotional difficulties related to their allergy and signpost additional support where required.

Preventing Bullying Related to Allergies

The school has a zero-tolerance approach to bullying, harassment, or discrimination related to a pupil's allergy or medical condition. Allergies are recognised as serious medical conditions, and behaviour that places a pupil at risk will be treated as a significant safeguarding and disciplinary matter.

The school will:

- Promote understanding and awareness of allergies through age-appropriate education to encourage empathy, inclusion, and respect.
- Ensure pupils understand that teasing, threatening, excluding, or deliberately exposing someone to an allergen is unacceptable and may constitute serious misconduct.
- Respond promptly and appropriately to all reports of bullying, discrimination, or unsafe behaviour related to allergies, in line with the school's Behaviour and Anti-Bullying Policies.

- Encourage pupils to report any concerns about bullying or unsafe behaviour, knowing they will be taken seriously and dealt with sensitively.
- Support pupils who have experienced bullying through appropriate pastoral care and, where necessary, involve parents/carers and relevant external agencies.
- Monitor incidents of allergy-related bullying to identify patterns and take proactive steps to prevent recurrence.
- Promote a culture of kindness, inclusion, and shared responsibility so that all pupils feel safe and valued regardless of their medical needs.

These measures aim to ensure that children and young people with allergies can attend school confidently, participate fully in all aspects of school life, and feel safe, supported, and included.

Minimising risk

The school is committed to taking reasonable and proportionate steps to minimise the risk of children, staff and visitors coming into contact with known allergens. While it is not possible to guarantee an allergen-free environment, the school aims to be *allergy aware* and promotes safe practices to reduce the risk of accidental exposure.

Food Provided by the School

Where food is provided by the school as part of the curriculum or for special events, staff will:

- Consider the known allergies of all pupils involved before any food is purchased or prepared.
- Check ingredient information carefully and avoid the use of known allergens where a child with a relevant allergy is participating.
- Ensure that any food tasting, cooking or food preparation activities are planned in advance and are carried out only under the direct supervision of trained school staff who are aware of the allergies and medical needs of the children taking part.

- Ensure appropriate hygiene measures are followed to reduce the risk of cross-contamination, including cleaning work surfaces, utensils and equipment before and after use.
- Make suitable alternative arrangements where necessary so that all children can participate safely.

Food Brought into School

Pupils bring food into school only for their own packed lunch. To minimise risk:

- Children are not permitted to share food, drinks, utensils or lunchbox contents with others.
- Parents are encouraged to be mindful of the needs of children with allergies when preparing packed lunches.
- The school may request that specific foods are not brought into school where this is considered a reasonable adjustment to protect a child with a severe allergy.
- Staff supervising lunchtime will remain vigilant and support children in following safe eating practices.

Airborne and Contact Allergens

Where a child has a known allergy to airborne or contact allergens, the school will carry out an individual risk assessment and implement reasonable measures to reduce the risk of exposure. Depending on the child's needs, these measures may include:

- Careful consideration of classroom resources and activities.
- Enhanced cleaning routines where appropriate.
- Sealing arrangements or environmental adjustments.
- Clear communication with relevant staff regarding identified risks.
- Measures to minimise exposure to known triggers wherever reasonably practicable.

Curriculum and School Activities

All staff planning activities are expected to consider potential allergen risks as part of the planning process. This includes, but is not limited to:

- Art and craft activities.
- Science investigations.
- Cooking and food technology activities.
- Musical activities involving natural materials.
- Activities involving plants or animals.
- Seasonal celebrations and themed events.

Alternative materials or activities will be considered where necessary to enable children with allergies to participate safely.

Educational Visits and Off-site Activities

A specific risk assessment will be completed for educational visits and off-site activities where a child with an allergy is participating. This will include consideration of:

- Known allergens that may be encountered during the visit.
- Food arrangements, including packed lunches or meals provided by external venues.
- Availability and accessibility of emergency medication.
- Staff trained to recognise and respond to allergic reactions.
- Emergency procedures and communication arrangements.

Where appropriate, discussions will take place with parents or carers before the visit to ensure suitable arrangements are in place.

Staff Awareness

All staff are expected to be aware of pupils with allergies and to follow individual healthcare plans where applicable. Relevant staff will receive appropriate training in allergy awareness, recognising the signs and symptoms of an allergic reaction, and responding in accordance with the school's emergency procedures.

Food Allergy

The school recognises that food allergies can be life-threatening and is committed to providing a safe, supportive and allergy-aware environment for all pupils. Whilst it is not

possible to guarantee an allergen-free environment, the school will take reasonable steps to minimise the risk of accidental exposure to food allergens.

The school will:

- Maintain up-to-date records of pupils with diagnosed food allergies and ensure that Individual Healthcare Plans are available to relevant staff.
- Ensure that all relevant staff are aware of pupils with food allergies and understand the procedures for preventing exposure and responding to an allergic reaction.
- Provide clear information about allergens in any food prepared or provided by the school for curriculum activities, celebrations or special events. Ingredient information will be checked before food is used, and known allergens will be avoided where necessary.
- Carefully plan and supervise all food-related activities, including cooking and food tasting, ensuring they are led by trained members of staff who are aware of the allergies of the pupils taking part.
- Take reasonable steps to prevent cross-contamination during food preparation and serving by following appropriate hygiene and food handling procedures.
- Encourage children not to share food, drinks, cutlery or lunchbox contents.
- Work in partnership with parents and carers to ensure that appropriate arrangements are in place for children with food allergies and to keep medical information up to date.
- Where a child has a severe food allergy, undertake an individual risk assessment and, where appropriate, request that particular foods are not brought into school if this is considered a reasonable and proportionate measure to reduce risk.

Children at the school bring food into school only for their own packed lunch. Parents and carers are asked to support the school's allergy-aware approach by being mindful of the needs of pupils with food allergies when preparing packed lunches. The school will communicate with families where additional precautions are required to protect an individual child.

All staff will follow the school's emergency procedures in the event of a suspected allergic reaction and ensure that prescribed emergency medication is readily accessible in accordance with the child's Individual Healthcare Plan.

Identification

The school is committed to ensuring that children, staff and regular visitors with allergies are identified promptly so that appropriate support and reasonable adjustments can be put in place.

Identification of Individuals with Allergies

Information about a child's allergy will be obtained from parents or carers during the admission process, through medical information forms and ongoing communication with families. Where appropriate, information will also be sought from the child's previous school, healthcare professionals and any relevant external agencies to ensure a smooth transition and continuity of care.

Parents and carers are responsible for informing the school promptly of any new allergy diagnosis or changes to their child's medical needs. They should provide up-to-date medical information, prescribed medication and any relevant medical documentation, including an Allergy Action Plan where applicable.

Members of staff/visitors are encouraged to inform the Headteacher of any allergies or medical conditions that may require support or emergency treatment while at work. Regular visitors, volunteers and contractors are expected to make the school aware of any significant allergies where appropriate so that suitable arrangements can be made.

Record Keeping

The school will maintain an up-to-date register of all pupils with known allergies. This record will include:

- The individual's known allergen(s).
- The nature and severity of the allergy.

- Details of any prescribed emergency medication, including whether the individual carries an adrenaline auto-injector (AAI) or other prescribed medication.
- The location of any medication kept in school.
- Details of any Individual Healthcare Plan (IHP) and/or Allergy Action Plan.
- Emergency contact information.

The register will be reviewed regularly and updated whenever new information is received. Relevant information will be shared with staff who have responsibility for the child, while maintaining appropriate standards of confidentiality and data protection.

Individual Healthcare Plans

Children with allergies that require ongoing management will have an Individual Healthcare Plan (IHP) where appropriate. This will be developed in partnership with parents or carers and, where necessary, healthcare professionals.

Where a child has been prescribed an adrenaline auto-injector (AAI), parents should provide the school with a current Allergy Action Plan completed by the child's healthcare professional. Copies of the plan will be made available to relevant staff and will accompany the child's emergency medication where appropriate.

The school will ensure that all staff who work directly with the child know how to recognise the signs and symptoms of an allergic reaction, understand the child's Individual Healthcare Plan and Allergy Action Plan, and know how to respond in an emergency.

The Individual Healthcare Plan (IHP) will detail the arrangements the school will put in place to support a child or young person with a medical condition or allergy. This will include any additional support, reasonable adjustments and procedures required to minimise risk and enable the child to participate fully in school life, as well as the management of prescribed medication and the actions to be taken in the event of an emergency.

Where children and young people have an **Allergy Action Plan** and/or **Asthma Action Plan** issued by a healthcare professional, the IHP should refer to it and the plan should

be attached it. Whenever an updated Action Plan becomes available, the child or young person's Individual Healthcare Plan should be reviewed to incorporate it.

Prescribed Adrenaline

The school recognises that prompt administration of adrenaline is essential in the treatment of anaphylaxis and that adrenaline should be administered as soon as possible, ideally within five minutes of the onset of symptoms.

Pupils who have been prescribed an adrenaline auto-injector (AAI) must have rapid access to their medication at all times. During the school day, emergency medication will be stored in the school office, which is centrally located and readily accessible from all areas of the school, including classrooms, the playground, dining areas, sports facilities and outdoor learning areas. Medication will never be locked away or stored in a location that could delay access in an emergency.

During educational visits and other off-site activities, the pupil's adrenaline auto-injector will be carried by the designated group leader or another appropriately trained member of staff and will remain with the group at all times to ensure immediate access if required.

Where appropriate, pupils may carry their own prescribed adrenaline auto-injector if this has been agreed with parents or carers and is supported by their Individual Healthcare Plan (IHP). For younger children, the medication will be carried or readily accessible to the supervising member of staff.

Parents and carers are responsible for providing the school with at least two in-date prescribed adrenaline auto-injectors where required, together with an up-to-date Allergy Action Plan completed by the child's healthcare professional. Parents are also responsible for ensuring that medication taken home at the end of the school day, where applicable, is returned to school each day and that all prescribed devices remain in date and are replaced before they expire.

The school will maintain a register of all pupils who have been prescribed adrenaline auto-injectors. This register will include:

- Confirmation that an up-to-date Allergy Action Plan has been provided.
- Details of the location of the pupil's prescribed medication.
- Expiry dates of prescribed devices.
- Any arrangements for the pupil to carry their own medication.

The school will regularly review the register and, where practicable, remind parents and carers when prescribed devices are approaching their expiry date. Staff will be informed of pupils who have prescribed adrenaline auto-injectors and will receive appropriate training in recognising the signs of anaphylaxis and the emergency procedures to follow.

School-Wide Policies – Spare Adrenaline Auto-Injectors (AAIs)

The school maintains spare adrenaline auto-injectors (AAIs) in accordance with current legislation and guidance. These are intended for use in an emergency where a pupil is known to be at risk of anaphylaxis, has been prescribed an AAI, and their own prescribed device is unavailable, inaccessible or has been administered and a further dose is required before the arrival of the emergency services.

Spare AAIs are not a substitute for a pupil's own prescribed medication. Parents and carers remain responsible for providing their child with in-date prescribed AAIs and an up-to-date Allergy Action Plan.

Spare AAIs are stored in the school office, which is centrally located and readily accessible. They are clearly labelled, stored securely but not locked away, and are available for immediate use in an emergency. The location of the spare AAIs is known to all relevant staff.

The school will ensure that spare AAIs are:

- Stored in accordance with the manufacturer's instructions.
- Checked regularly to confirm they are in date and that the solution remains clear and colourless.
- Included in the school's routine medication checks, with expiry dates recorded and monitored.
- Replaced promptly when used, damaged or approaching their expiry date.

Used or expired adrenaline auto-injectors will be disposed of safely in accordance with local healthcare waste procedures, as they contain a needle. Replacement devices will be obtained as soon as possible to ensure that the school's emergency supply remains available.

The school also maintains spare salbutamol inhalers for emergency use in line with its Asthma Policy. These are stored, monitored and replaced using the same robust procedures, with regular checks to ensure they remain in date and fit for use.

School-Wide Policies

Spare Adrenaline Auto-Injectors (AAIs)

The school maintains spare adrenaline auto-injectors (AAIs) in accordance with current legislation and Department for Education guidance. Spare AAIs are available for use in an emergency where a pupil has been diagnosed as being at risk of anaphylaxis, has been prescribed an AAI, and their own device is unavailable, inaccessible, has malfunctioned, or a second dose is required before the arrival of the emergency services.

Spare AAIs are not a replacement for a pupil's own prescribed medication. Parents and carers are responsible for providing their child with two in-date prescribed AAIs and an up-to-date Allergy Action Plan.

The school will ensure that:

- Spare AAIs are stored in clearly labelled emergency anaphylaxis kits.
- Devices are stored in pairs so that a second dose is immediately available if required.
- Spare AAIs are readily accessible and are never locked away.
- The location of the spare AAIs is known to all staff.

The school site has been organised so that no child is more than five minutes from an adrenaline auto-injector. Spare AAIs are stored in the centrally located school office, enabling rapid access from all areas of the school. The Headteacher will review storage arrangements should changes to the school site or pupil needs require additional emergency kits.

Spare AAI's are checked regularly by designated staff to ensure they remain in date, are stored in accordance with the manufacturer's instructions and that the solution remains clear and colourless. Records of expiry dates are maintained, and replacement devices are obtained promptly before expiry or immediately following use.

Used or expired AAI's are disposed of safely as clinical sharps in accordance with local healthcare waste procedures.

Educational Visits and Trips

The school is committed to ensuring that pupils with allergies are able to participate fully in educational visits, residential visits and other off-site activities.

A specific risk assessment will be completed for any pupil at risk of anaphylaxis before every visit. This will consider:

- The child's known allergens and potential risks associated with the visit.
- Food arrangements and any catering requirements.
- The availability of emergency medical services.
- The roles and responsibilities of accompanying staff.
- Emergency communication procedures.

The pupil's prescribed adrenaline auto-injectors, together with their Allergy Action Plan, will be taken on every visit and will remain with the designated member of staff responsible for the child at all times. Staff accompanying the visit will be aware of the child's allergy and those with responsibility for the pupil will be trained to recognise the signs of anaphylaxis and administer adrenaline if required.

Serious Incidents and Near Misses

All allergic reactions, administration of emergency medication, accidental exposure to allergens and allergy-related near misses will be recorded and reported in accordance with the school's procedures for managing medical incidents.

Parents or carers will be informed as soon as reasonably practicable following any allergic reaction, administration of medication or significant near miss. Where appropriate, emergency services will be contacted without delay.

Following any serious incident or near miss, the school will review the circumstances to identify any lessons learned and determine whether changes to risk assessments, Individual Healthcare Plans, staff training or school procedures are required to reduce the likelihood of a recurrence.

Parents, carers and healthcare professionals are encouraged to inform the school if an allergic reaction occurs after a child has left school and is believed to be linked to an exposure during the school day, so that appropriate investigations and improvements can be made.

Information Sharing

The school will maintain accurate and confidential records of pupils with allergies and will share relevant information only with those members of staff who need it to fulfil their duty of care.

All Individual Healthcare Plans (IHPs) and Allergy Action Plans will be stored securely within the school's Medical Google Drive folder. This folder is accessible to all members of staff to ensure that current medical information is available whenever it is needed, including details of the child's allergy, prescribed medication and emergency procedures.

To support the safe day-to-day management of pupils with allergies, an allergy awareness poster will be displayed in staff-accessible areas and other appropriate locations where it supports the safe supervision of pupils. The poster will include the child's photograph, name, known allergen(s) and any essential emergency information, providing staff with a quick visual reminder of pupils with allergies and the actions required in the event of an emergency.

Relevant information will be shared with teaching staff, teaching assistants, lunchtime supervisors, office staff and those leading clubs, educational visits and other activities

involving the pupil, ensuring that all staff understand the measures required to minimise risk and know how to respond in an emergency.

Health information will be managed in accordance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. Information will be handled sensitively, stored securely and shared on a need-to-know basis to protect pupils' privacy while ensuring their health, safety and wellbeing.

Awareness of the Allergy Safety Policy

This Allergy Safety Policy will be published on the school's website and made available to staff, parents and carers.

All staff will receive regular allergy awareness training, including recognising the signs and symptoms of allergic reactions, preventing exposure to allergens and responding appropriately in an emergency. Relevant staff will also receive practical training in the use of adrenaline auto-injectors.

The school will promote an allergy-aware culture by reminding pupils not to share food, drinks or eating utensils and by encouraging respect and understanding of the needs of children with allergies.

Where appropriate, and with the agreement of the child and their parents or carers, age-appropriate information may be shared with classmates or friends to help them understand how to seek adult assistance in an emergency. This will complement, but never replace, the school's established emergency response procedures.

Date: adopted July 2026

To be reviewed July 2027

Appendix I - First Aid for Anaphylaxis
poster

Appendix II - Epipen AAI and Text AAI
Instructions

Appendix III - Flowchart for Allergic Reaction
without use of Adrenaline Auto-Injector

Appendix IV - Flowchart for Allergic
Reaction with use of Adrenaline Auto-
Injector Appendix V - Information on
Allergies

Appendix VI - Other Support and Resources

Appendix VII - Top 14 Allergens poster

Appendix I - First Aid for Anaphylaxis poster

FIRST AID FOR ANAPHYLAXIS



Recognise the Signs of Anaphylaxis...

A Airways	B Breathing	C Circulation
• Persistent cough • Hoarse voice • Difficulty swallowing • Swollen tongue	• Difficult or noisy breathing • Wheeze or persistent cough	• 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 (1181098) Scotland (SC051610). Based on BSACI and 2023 MHRA guidance.

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ANAPHYLAXIS

HOW TO USE EPIPEN AAIS

If you think someone has 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 AAls >>



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



ANAPHYLAXIS

HOW TO USE JEXT AAIS

If you think someone has 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.

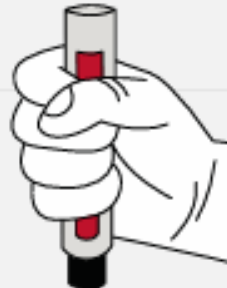
- 1. Hold the Jext AAI in the hand you write with**

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 >>

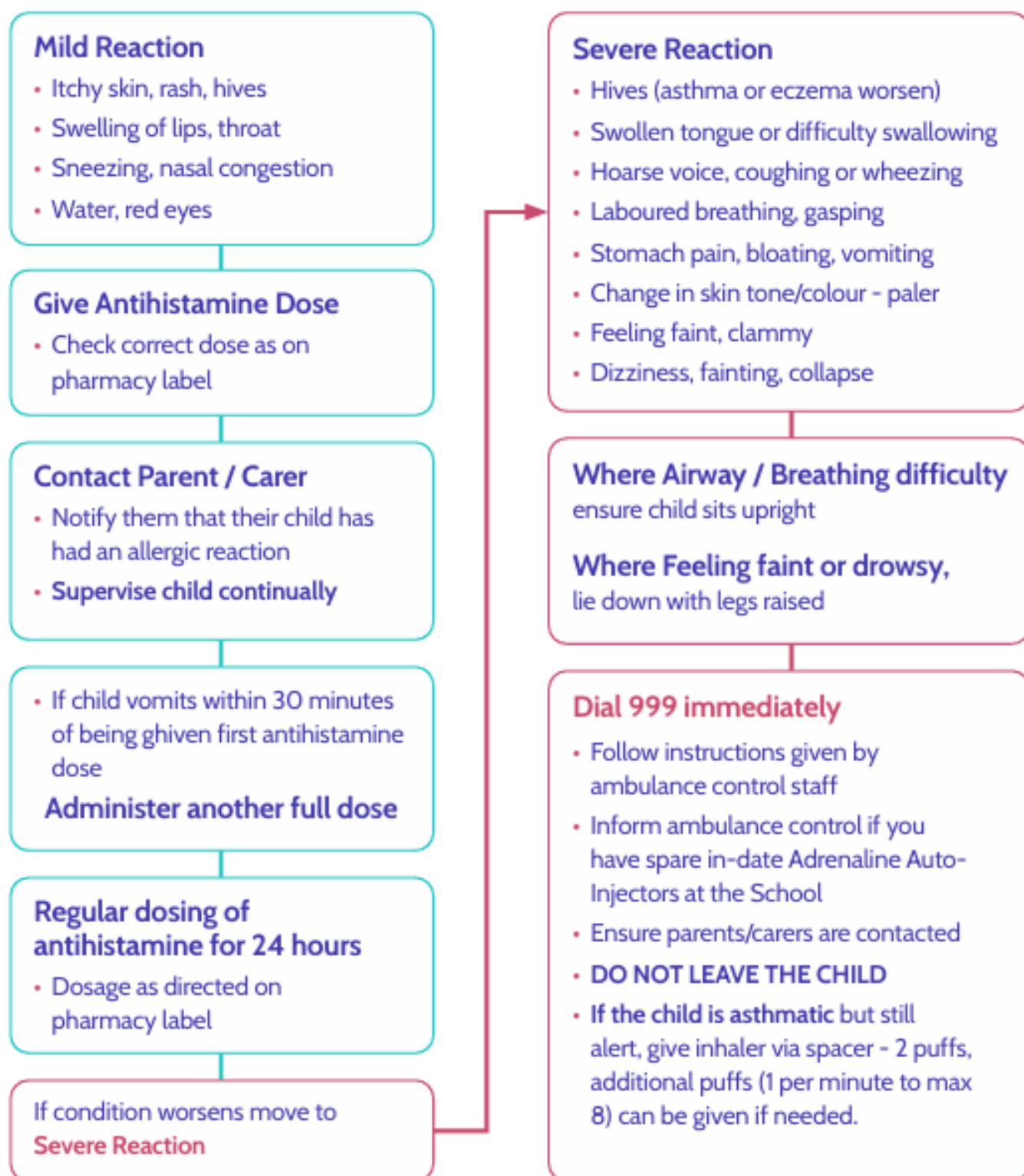


Sign up to the free expiry alert service
and receive reminders by text or email when
your Jext AAI is about to expire >>



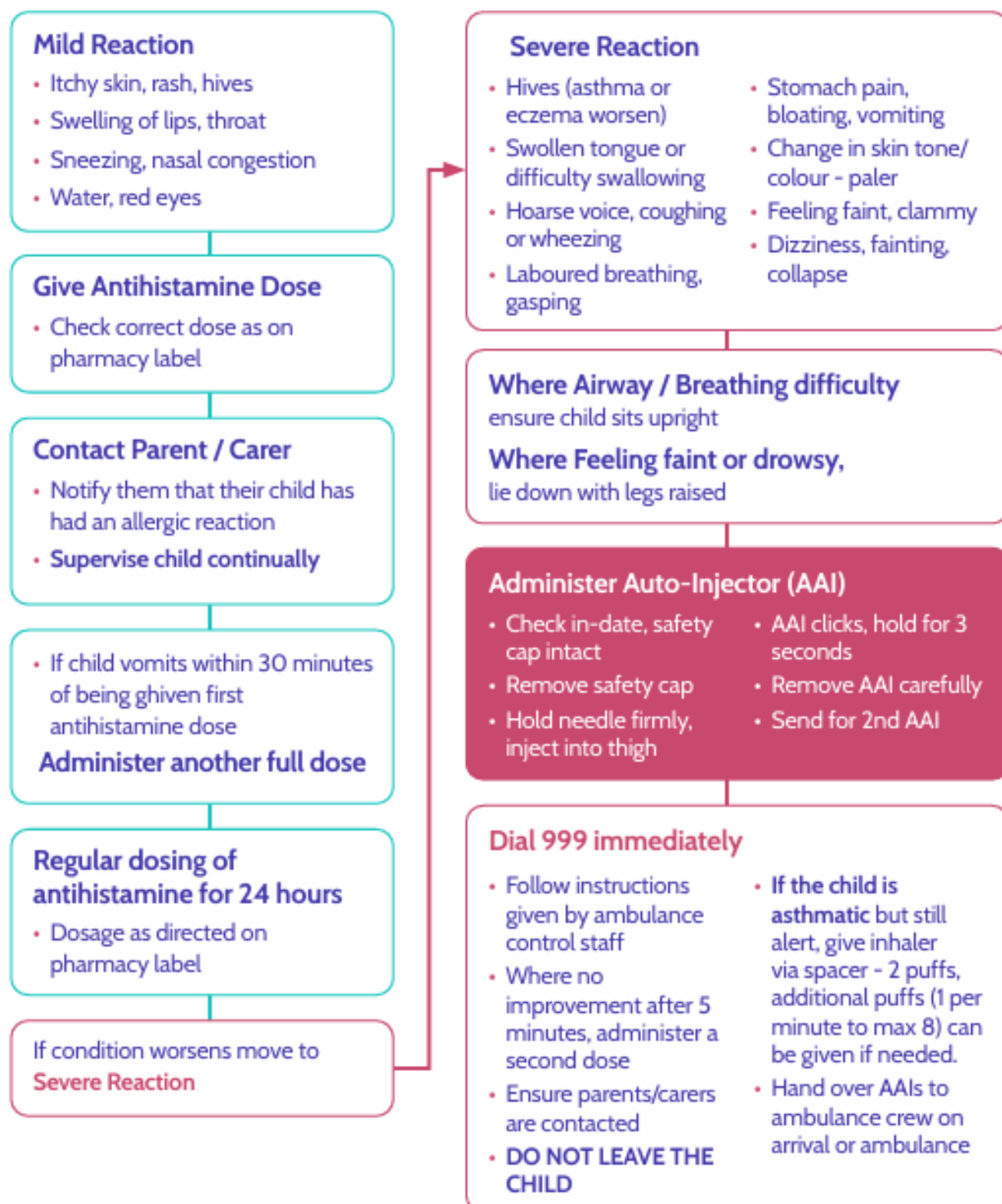
Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector.

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



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



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)

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 I (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>

- Training for Schools - <https://www.anaphylaxis.org.uk/information-training/allergywise-training/for-schools/>
- Transitioning to Secondary School - <https://www.anaphylaxis.org.uk/living-with-serious-allergies/serious-allergy-guidance-for-parents/preparing-for-and-managing-the-transition-to-secondary-school/>
- Whole school allergy and awareness management - <https://www.allergyuk.org/schools/whole-school-allergy-awareness-andmanagement>

Appendix VII - Top 14 Allergens poster



