

ALLERGY AND ANAPHYLAXIS

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The named staff members (at least 2) responsible for coordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:

Deputy Headteacher - Nick Blake

Admin Officer - Jen Lee

1. Introduction

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more severe reaction called anaphylaxis.

Anaphylaxis is a serious, life-threatening allergic reaction. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs.

Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure.

Anaphylaxis symptoms are often referred to as the ABCD symptoms:

- A – Airway: swelling of the tongue, throat or upper airway.
- B – Breathing: wheeze, difficulty breathing or noisy breathing.
- C – Circulation: dizziness, faintness, pale clammy skin or loss of consciousness.
- D – Deterioration: rapid worsening of symptoms, including progression from mild symptoms to more severe symptoms such as repeated vomiting, increasing swelling, breathing difficulties or signs of collapse.

Any deterioration in a pupil's condition should be treated as a potential sign of anaphylaxis and prompt urgent assessment and action.

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

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

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

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

2. Role and responsibilities

Parent Responsibilities

- On entry to the school, it is the parent's responsibility to inform the School Office of any allergies. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication.
- Where a pupil requires an Individual Healthcare Plan (IHP), parents will work with the school and relevant healthcare professionals to ensure an up-to-date IHP is in place. The clinician-completed Allergy Action Plan will be attached to and form part of the Individual Healthcare Plan.
- Parents are to supply a copy of their child's Allergy Action Plan (BSACI plans preferred) to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. School nurse/GP/allergy specialist.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.

Staff Responsibilities

- All teaching staff, support staff, lunchtime staff, office staff, senior leaders and any other staff working directly with pupils will complete allergy and anaphylaxis awareness training.
- Allergy and anaphylaxis training forms part of the induction process for all new staff.
- Staff have unlimited access to the school's approved online allergy training and are encouraged to revisit this training throughout the year to refresh their knowledge.
- Training records will be maintained by the School Office and monitored by the Deputy Headteacher.
- Staff (regular or cover classes) must be aware of the pupils in their care who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.
- Staff leading school trips will ensure that the class medical red bag, containing all required pupil medication and emergency supplies, accompanies the group at all times. Trip leaders will check that all necessary medication is present before departure. Pupils whose required medication is not available may not be permitted to attend the visit.
- The School Office will ensure that any associated Individual Healthcare Plan is maintained, reviewed regularly and made available to staff who have responsibility for the pupil.
- Children's allergy information, including photographs where appropriate, will be stored securely within school systems and shared with relevant staff to support safe practice.
- It is the parent's responsibility to ensure all medication is in date, however, the School Office will check medication kept at school on a

- termly basis and send a reminder to parents if medication is approaching expiry.
- The School Office keeps a register of pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of use of any AAI(s) and emergency treatment given.
- The School Office ensures that any reaction or near misses is recorded and reported internally or in accordance with RIDDOR.
- Staff with severe allergies will be supported through an individual risk assessment and appropriate workplace arrangements where required.

Pupil Responsibilities

- Pupils are encouraged to have a good awareness of their symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.
- Pupils should know that their AAIs are stored in the class red medical bag and be able to identify the adults who can access and administer them in an emergency.

3. Allergy Action Plans

Allergy Action Plans (AAPs) are clinical documents completed by a healthcare professional and provided to school by parents.

Rucstall Primary School recognises that, in accordance with Department for Education guidance, some pupils with allergies may also require an Individual Healthcare Plan (IHP).

Where an Individual Healthcare Plan is required, the clinician-completed Allergy Action Plan will be attached to and form part of the IHP rather than replacing it.

The IHP sets out:

- the pupil's medical needs;
- risk reduction measures;
- emergency arrangements;
- staff responsibilities;
- arrangements for educational visits;
- arrangements for breakfast club, after-school provision and other extended activities.

Individual Healthcare Plans will be developed in partnership with parents, healthcare professionals and school staff where appropriate.

Individual Healthcare Plans will be reviewed:

- annually as a minimum;
- whenever medical advice changes;

- following a significant allergic reaction;
- whenever a revised Allergy Action Plan is provided.

The School Office will maintain a register of pupils with allergies, Allergy Action Plans and Individual Healthcare Plans.

4. Emergency Treatment and Management of Anaphylaxis

What to look for:

Symptoms usually come on quickly, within minutes of exposure to the allergen.

Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body
- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

Staff should remain alert to deterioration following the onset of mild symptoms. Vomiting, increasing swelling, worsening breathing difficulties, sudden lethargy or any progression of symptoms should be treated seriously and may indicate developing anaphylaxis.

More serious symptoms are often referred to as the ABC symptoms and can include:

- **AIRWAY** - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- **BREATHING** - sudden onset wheezing, breathing difficulty, noisy breathing.
- **CIRCULATION** - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

The term for this more severe reaction is anaphylaxis. In extreme cases there could be a dramatic fall in blood pressure. The person may become weak and floppy and may have a sense of something terrible happening. This may lead to collapse and unconsciousness and, on rare occasions, can be fatal.

As soon as anaphylaxis is suspected, adrenaline must be administered without delay and an ambulance called. Whilst you are waiting:

- Keep the child where they are, call for help and do not leave them unattended.
- **LIE CHILD FLAT WITH LEGS RAISED** – they can be propped up if struggling to breathe but this should be for as short a time as possible.
- **USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY** and note the time given. AAls should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.
- **CALL 999** and state **ANAPHYLAXIS (ana-fil-axis)**.
- If no improvement after 5 minutes, administer second AAI.
- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

Whilst you are waiting for the ambulance, keep the child where they are. Do not stand them up, or sit them in a chair, even if they are feeling better. This could lower their blood pressure drastically, causing their heart to stop.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

5. Supply, storage and care of medication

Each pupil's prescribed AAls will be stored in their designated class medical red bag and remain readily available throughout the school day. Emergency spare medication is additionally available via the school's Kitt medical system.

The school's Kitt emergency allergy medication box is located in the First Aid Room. Access arrangements, key locations and emergency procedures are communicated to all trained staff and reviewed annually.

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 AAls 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 School Office 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 AAls 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

AAls should be stored at room temperature, away from direct sunlight, radiators, heaters and other sources of heat. Medication should not be left in vehicles or areas where excessive temperatures may occur.

During periods of hot weather, staff will monitor classroom storage locations and take appropriate steps to ensure medication remains within recommended temperature ranges.

Copies of Allergy Action Plans and Individual Healthcare Plans will be stored securely and be readily accessible to staff in an emergency.

Disposal

AAls are single use only and must be disposed of as sharps. Used AAls 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. A sharps bin is located in the deputy head teacher's office, within a locked drawer.

6. 'Spare' adrenaline auto-injectors in school

Rucstall Primary School has purchased the Kitt system which has spare AAls for emergency use in children who are risk of anaphylaxis, but their own devices are not available or not working (e.g. because they are out of date) or are experiencing anaphylaxis for the first time.

The school will maintain the Kitt system in accordance with manufacturer guidance.

Kitt training devices may be used during staff training sessions, emergency scenario practice and allergy drills to ensure staff remain confident in administering adrenaline safely.

These are kept, in the medical cupboard, in the school office.

7. Staff Training

All staff will complete allergy and anaphylaxis awareness training annually, and during induction of new staff.

Rucstall Primary School ensures that staff undertake a practical session using trainer devices.

Staff have ongoing access to online allergy and anaphylaxis training resources through the Kitt platform and may revisit training materials at any time.

Records of all completed training are maintained by the School Office.

Practical refresher sessions may be delivered using Kitt training devices during staff meetings, induction sessions and emergency preparedness activities.

8. Inclusion and safeguarding

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

8a. Breakfast Club and After-School Provision

The school recognises that food-related activities within Breakfast Club and after-school provision can present an increased risk for pupils with allergies.

Whilst external providers are responsible for pupils during their sessions, Rucstall Primary School will work collaboratively with providers to ensure relevant allergy information is shared appropriately.

Providers will be informed of pupils with significant allergies and any associated emergency procedures.

Where appropriate, access to medication, Allergy Action Plans and Individual Healthcare Plans will be maintained during these sessions.

The school will review arrangements regularly with providers to ensure appropriate safeguarding measures remain in place.

8b. Monitoring, Recording and Allergy Drills

The school will undertake periodic allergy awareness and emergency response drills.

These may include:

- recognition of allergy symptoms;
- emergency response procedures;
- use of adrenaline auto-injectors;
- communication and escalation procedures.

Outcomes from drills will be recorded and reviewed by leaders to identify any training or procedural improvements.

The Kitt online portal may be used to record, monitor and support training, emergency preparedness and policy compliance activities.

9. 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.

Parents and carers are required to notify the school of any allergies or special dietary requirements. Where a special diet is required, parents and carers will be asked to complete the catering provider's specialist diet documentation, and allergen management will be undertaken by the catering provider.

The School Office will inform the Catering Staff of pupils with food allergies and is responsible for ensuring this information is kept up to date.

Catering staff maintain an up-to-date list of pupils with food allergies in the kitchen. An orange information sheet is displayed in the kitchen to identify pupils with allergies, as orange is the nationally recognised colour associated with allergen awareness. Pupils with identified food allergies wear an orange wristband and are served their meals on a designated plate to help ensure allergens are managed safely.

10. School trips

Staff leading school trips will ensure that:

- all required pupil medication accompanies the visit;
- spare emergency medication is taken where appropriate;
- Allergy Action Plans and relevant Individual Healthcare Plans are available during the visit;
- staff accompanying the visit understand emergency procedures.

A pupil whose required emergency medication is unavailable may not be permitted to attend until safe arrangements have been confirmed.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.

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

Sporting Excursions

Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the P.E. teacher/s are fully aware of the situation. The school being visited will be notified that a member of the team has an allergy when arranging the fixture. A member of staff trained in administering adrenaline will accompany the team. If another school feels that they are not equipped to cater for any food-allergic child, the school will arrange for the child to take alternative/their own food.

Most parents are keen that their children should be included in the full life of the school where possible, and the school will need their co-operation with any special arrangements required.

11. Allergy awareness and nut bans

Rucstall Primary School strives to be a nut free school. No school can guarantee a truly allergen free environment for a child living with food allergy. But we promote a culture of allergy awareness and education.

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

Allergy awareness is promoted through the curriculum and wider school life, including:

- Personal, Social, Health and Economic (PSHE) education;
- assemblies;
- classroom discussions;

- awareness campaigns;
- events that encourage understanding of medical needs and inclusion.

Allergy safeguarding posters, emergency guidance and relevant awareness materials will be displayed in appropriate staff areas and other agreed locations across the school.

12. Record Keeping

Rucstall Primary School will maintain accurate records relating to:

- Allergy Action Plans;
- Individual Healthcare Plans;
- staff training records;
- allergy incidents and near misses;
- administration of emergency medication;
- allergy drills and monitoring activities.

Records will be reviewed regularly as part of the school's safeguarding and health and safety monitoring processes.

13. Risk Assessment

Rucstall Primary School 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.