Charitable Objects of St. Catherine's School- *The Objects for which the Company is established are to promote and provide for the advancement of education by providing, conducting, governing, carrying on and maintaining in the United Kingdom, or elsewhere, a boarding or day School or Schools for girls in which the teaching shall be in accordance with the principles of the Church of England.*

ST CATHERINE'S SCHOOL BRAMLEY

WHOLE SCHOOL ALLERGY AND ANAPHYLAXIS POLICY

'Believe… Achieve… Succeed'

Policy Holder	Linda Green and Emily Jefford
Date Approved	August 2026
Approval	Pastoral and Wellbeing Committee
Date for next review	August 2027

This policy will be reviewed annually or sooner if there are statutory revisions.

The Policy

St Catherine's School is an "Allergen Aware School" minimising the risk of severe reactions through compulsory staff training and emergency protocols.

This policy outlines the school's approach to allergy management, including how the whole-school community works to reduce the risk of an allergic reaction happening and the clear procedures in place to respond if one does. See Appendix 1: Managing Allergic Reactions below. It also sets out how we support our pupils with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy aware school.

This policy applies to all staff, pupils, parents and visitors to the school and should be read alongside these other policies: Health and Wellbeing, First Aid, Administration of Medication, Safeguarding and Child Protection.

1. What is an Allergy?

Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.

Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency. Even just a trace of food they are allergic to, can cause an allergic reaction.

People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

2. Definitions

Anaphylaxis: Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.

Allergen: A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

Most severe allergic reactions to food are caused by just 9 foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc), sesame, fish, shellfish, soya and wheat.

There are 14 allergens required by UK law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame.

Adrenaline auto-injector: Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAIs, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this Policy, we will refer to them as adrenaline pens.

Spare Adrenaline Pens: Schools are able to purchase spare adrenaline pens. These should be held as a back-up, in case pupils' prescribed adrenaline pens are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

Allergy Action Plan: A document filled out by a healthcare professional (GP or allergy specialist) and provided to school by the parents/guardians. The plan details a pupil's allergy and their treatment plan. This provides clear, emergency response instructions for managing an allergic reaction, including when and how to administer medication such as an adrenaline auto-injector and when to call emergency services.

Designated Allergy Lead: The member of staff responsible for overseeing allergy management across the school and acting as the main point of contact for pupils, parents and staff.

NEFFY: Neffy (official name in the UK is EURNeffy) is a nasal spray which delivers adrenaline. It is a needle-free alternative to an adrenaline auto-injector approved. (Neffy was approved for use in the UK in 2025 and distribution is expected from late September.

Individual Healthcare Plan: A document outlining an individual pupil's medical conditions, history, usual treatment, triggers, risks, medications and the support required in school. This document is developed by the school in partnership with parents / guardians / healthcare professionals and where appropriate, pupils. All pupils with an allergy should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.

Risk Assessment: A detailed document outlining an activity, the risks it poses, and any actions taken to mitigate those risks. Allergy should be included on all risk assessments for events on and off the school site, including educational visits, trips and sports fixtures.

Allergy Management Procedures: The school's overarching procedures for reducing allergy risks and managing pupils with allergies on a day-to-day basis, including preventative measures, staff responsibilities, and emergency arrangements.

3. Roles and Responsibilities

St Catherine's School takes a whole-school approach to allergy management.

3.1 Designated Allergy Lead

The Designated Allergy Lead is Emily Jefford, Deputy Head and Head of Pre-Prep. They report to the named Allergy Governor, John Blauth. They are responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an allergy;
- Taking decisions on allergy management across the school;
- Championing and practising allergy awareness across the school;
- Being the overarching point of contact for staff, pupils and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff
- Ensuring all staff complete the compulsory allergy and anaphylaxis online training course. A record of this completed training will be held by the Designated Allergy Lead and on Medical Tracker. All staff have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment);
- Ensuring staff, pupils and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures.
- A record of confirmation that all staff have read and understood the policy is kept on Medical Tracker.
- Reviewing the school's stock of spare adrenaline pens (check the school has an appropriate number for the setting, that they hold the correct dose, they are in date, that spare adrenaline pens are stored appropriately) and ensuring staff know where they are;

- Any allergic reactions or near-misses will be recorded on Medical Tracker and on the health and safety agenda as a standing item, to ensure discussion and actions are completed. Reporting these to the appropriate authority (e.g. under RIDDOR) where necessary and ensuring the circumstances are investigated and learnings shared;
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy; and
- Ensuring there is an anaphylaxis drill once a year for all staff, including the use of training adrenaline pens to practice.

At regular intervals the Designated Allergy Lead will check procedures and report to the Senior Leadership Team.

3.2 Health Centre Team

Senior Sister Linda Green is responsible for:

- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families (this is likely to involve liaising with the admissions team for new joiners);
- Supporting the Designated Allergy Lead with disseminating this information to all school staff, including the catering team, occasional staff and those running clubs
- Ensuring the information from families is up-to-date, and reviewed annually (at a minimum). Coordinating medication with families and ensuring medication is in date. Whilst it is the responsibility of parents/guardians to ensure medication is up to date, the Health Centre Team should also have systems in place to check this and notify the parents/guardians when they see the expiry dates are approaching in respect of medicines held by the school;
- Keeping an adrenaline pen register to include adrenaline pens prescribed to pupils and the school's stock of spare adrenaline pens, including brand, dose and expiry date. The location of spare adrenaline pens should also be documented;
- Regularly checking spare adrenaline pens are where they should be, and that they are in date, is carried out by the Health Centre Team;
- Replacing the spare adrenaline pens when necessary;
- Providing on-site adrenaline pen training for staff and pupils and refresher training as required e.g. before school trips.

3.3 Admissions Team

The admissions team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Lead and Health Centre Team to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity (before a school visit, an Open Day or Taster Days if food is offered or likely to be eaten);
- There is a clear structure in place to communicate this information to the relevant parties (i.e. Health Centre Team, Catering Team, Trip Leaders, Boarding Staff, Form Teachers/Tutors);
- Parents and applicants are informed of catering arrangements during admission events;

- Plans are made for emergency medication if the child is to be left without parental supervision.

3.4 All staff

All school staff, including teaching staff, support staff, estates staff, occasional staff (for example sports coaches, music teachers and those running breakfast and afterschool clubs) are responsible for:

- Championing and practising allergy awareness across the school;
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed;
- Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to;
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate;
- Ensuring pupils always have access to their medication or are carrying it themselves once in U2 (Year 5);
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;
- Taking part in training and anaphylaxis drills as required (at least once a year). Whilst it is the school's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a member of the Health Centre Team;
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy;
- Forwarding any communication or information that comes directly to them from parents regarding allergens to the Health Centre Team; and
- Ensuring that pupils have their medication and their Allergy Action Plan or Individual Health Care Plan with them when leaving school site, for a sports match or trip.

3.5 All parents

All parents and guardians (whether their child have an allergy or not) are responsible for:

- Being aware of and understanding the school's Allergy and Anaphylaxis Policy and considering the safety and wellbeing of pupils with allergies;
- Providing the Health Centre Team with information about their child's medical needs, including dietary requirements and allergies, history of their allergy, any previous allergic reactions or anaphylaxis. They should also inform the school of any related conditions, for example asthma, hay fever, rhinitis or eczema;
- Considering and adhering to any food restrictions or guidance the school has in place when providing food, for example in packed lunches, as snacks or for fundraising events;
- Refraining from telling the school their child has an allergy or intolerance if this is a preference or dietary choice; and
- Encouraging their child to be allergy aware.

3.6 Parents of children with allergies

In addition to point 3.5, the parents and guardians of children with allergies must:

- Work with the school to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan;
- If applicable, provide the school or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, i.e. spoon or syringe), inhalers or creams;
- Ensure medication is in-date and replaced at the appropriate time;
- Ensure their child has access to their allergy medication, including two adrenaline pens if prescribed, on the journey to and from school;
- Update St Catherine's with any changes to their child's condition and ensure the relevant paperwork is updated too;
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food to which they are allergic.

3.7 All pupils

All pupils at school should:

- Be allergy aware;
- Understand the risks allergens might pose to their peers and respect measures to support them;
- Learn how they can support their peers and be alert to allergy-related bullying;
- Older pupils will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency; and
- Must follow the school's food allergy restrictions. Food brought into school must be nut-free.

All of the above should be done in an age and capability appropriate way.

3.8 Pupils with allergies

In addition to point 3.7, pupils with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk, depending on age and capability;
- Avoiding their allergen as best as they can;
- Understanding the importance of following the school specific processes of lunch and snack services and how that mitigates risk;
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction;
- Any pupils in year U2 (Year 5) and above (where appropriate) should carry two adrenaline pens with them at all times, if age and capability appropriate. They must only use them for their intended purpose;
- Understanding how and when to use their adrenaline auto-injector;

- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy;
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies;
- Pupils permitted to leave the school site should know what to do if they have an allergic reaction off school premises. This should include how to treat themselves and raise the alarm to get help; and
- If age and capability appropriate, ensuring they have their medication with them on the journey to and from school.

4. Information and Documentation

4.1 Register of pupils with an allergy

The school has a register of pupils who have a diagnosed allergy. This includes pupils who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as pupils with an allergy where no adrenaline pens have been prescribed.

4.2 Individual Healthcare Plans

Each pupil with an allergy has an Individual Healthcare Plan. The information on this plan includes:

- Known allergens and risk factors for allergic reactions;
- A history of their allergic reactions;
- Detail of the medication the pupil has been prescribed including dose, this should include adrenaline pens, antihistamine etc;
- A copy of parental consent to administer medication, including the use of spare adrenaline pens in case of suspected anaphylaxis;
- A photograph of each pupil; and
- A copy of their Allergy Action Plan.

5. Assessing Risk

Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning, mealtimes and include it in risk assessments. Some examples include:

- Classroom activities, for example craft using food packaging, science experiments where allergens are present, food lessons or cooking;
- Bringing animals into the school, for example a dog or hatching chick eggs can pose a risk;
- Running activities or clubs where they might hand out snacks or food “treats”. Ensure safe food is provided or consider an alternative non-food treat for all pupils; and
- Planning special events, such as cultural days and celebrations with themed menus in the Dining Hall.

Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, adapt the activity. The school will ensure compliance with the Equality Act 2010.

6. Food, including mealtimes and snacks

6.1 Catering in school

The school is committed to providing a safe meal for all students, staff and visitors, including those with food allergies.

- Due diligence is carried out with regard to allergen management when appointing catering staff;
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training;
- Anyone preparing food for those with allergies will follow good hygiene practices, food safety and allergen management procedures;
- The catering team will endeavour to get to know the pupils with allergies and what their allergies are, supported by school staff;
- The catering team will endeavour to provide varied meal options to students and staff with allergies;
- The school has robust procedures in place to identify pupils with food allergies;
- Prep School pupils are supervised by staff during mealtimes. Staff, including Catering, are informed of pupils with food allergies and are responsible for ensuring that those pupils do not consume any food or drink that is not permitted;
- Senior School pupils are expected to take responsibility for managing their food allergies in accordance with their Individual Healthcare Plan. Catering and tutors are informed of pupils with food allergies and provide appropriate support and supervision where required to help ensure pupils do not consume food or drink that is not permitted;
- The counters in the Dining Hall include an allergen focused counter where all pupils with allergies or dietary requirements are directed to;
- A different colour tray will be used by all pupils with allergies/dietary requirements to make all staff aware of this;
- Photographs of pupils with “Dietary Allergies and Adrenaline Pen Users” are readily available on the Prep School Staff Portal and Senior School Staff Portal Home Page. This can be easily accessed by staff, including when the usual members of staff are absent, to support the safe identification of pupils with allergies;
- Food containing the main 14 allergens (see Allergens definition) will be clearly labelled. Other ingredient information will be available on request;
- The catering team avoid any purchase or preparation of food with nuts as an ingredient;
- For pupils or staff with allergies to food other than the “main 14” extra liaison is required between the pupil/staff, the catering team and the Health Centre;

- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging;
- Pupils and parents are encouraged not to bring in products with Precautionary Allergen Labelling or "May Contain' labelling into school;
- Food provided at breakfast club and after school club will follow these procedures.

For pupils in the **Early Years Foundation Stage** (EYFS), the school will additionally ensure that:

- Information about food allergies, intolerances and dietary requirements is obtained before admission, accurately recorded and regularly reviewed with parents/carers.
- At every meal and snack time, a designated member of staff is responsible for checking that each child's food meets their dietary requirements and is served safely;
- All Early Years staff have completed Level 2 for Food Hygiene in the Early Years course;
- Children are supervised throughout eating and drinking, remaining within sight and hearing of an adult at all times during meals and snacks;
- A member of staff who holds a current full Paediatric First Aid (PFA) qualification is present at all times when EYFS children are eating, including during mealtimes and snack times;
- Staff supervising the children eating know how to recognise the signs and symptoms of choking and allergic reactions;
- Food is prepared and served in a manner that reduces both the risk of allergen exposure and the risk of choking, taking account of children's age and stage of development.

6.2 Food brought into school

The school recognises that food brought onto the premises by pupils, parents, staff and visitors or taken offsite on a trip or sports fixture may present a risk to members of the school community with food allergies.

Everyone is expected to support St Catherine's School in maintaining a safe environment for pupils with allergies.

- Pupils, parents and staff should not bring food containing identified high-risk allergens or products with Precautionary Allergen Labelling (PAL) (e.g. "may contain" statements) where these may present a risk to pupils with known allergies;
- Food should not be shared between pupils unless agreed by a member of staff;
- Any food brought into school should be commercially prepared, supplied in its original packaging and clearly labelled with a full ingredients list. Homemade food should not be brought into school for sharing;
- Staff should be informed in advance of any commercial food intended for classroom celebrations or activities so that it can be assessed for suitability in relation to pupils' allergies;
- During educational visits, sports fixtures and other off-site activities, staff will consider the allergy needs of participating pupils when planning meals and refreshments. Parents may be asked to provide suitable food where appropriate;
- Pupils with food allergies should be encouraged to bring their own safe snacks where necessary and should not rely on food provided by others unless its ingredients have been confirmed;

- In boarding houses, food brought in by pupils, parents or visitors must comply with the school's Allergy and Anaphylaxis Policy. Boarding staff should be aware of boarders with food allergies and take reasonable steps to reduce the risk of accidental exposure;
- Food provided at school events, including parent events, fundraisers and hospitality functions, should be clearly labelled with allergen information wherever reasonably practicable. Organisers should consider the needs of those with known food allergies when planning catering and refreshments;
- The school may designate specific areas or activities as free from particular allergens where this is considered necessary following an individual risk assessment.

6.3 Food bans or restrictions

- The school is an Allergen Aware school. We have pupils with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food;
- We ask that no products containing peanuts or tree nuts are brought onto the school site;
- All commercial food coming onto school premises or taken on a school trip or to a sports fixture should be checked by parents to ensure peanuts and tree nuts are not an ingredient included in the products being provided.
- Please check the label on all foods brought into school. Common foods that contain these allergens as an ingredient include packaged nuts, cereal bars, chocolate bars, nut butters, chocolate spread, sauces.

6.4 Food hygiene for pupils

- Pupils will wash their hands before and after eating;
- Sharing, swapping or throwing food is not allowed;
- Water bottles should be clearly labelled and not shared;
- All food preparation areas are routinely cleaned;
- Boarders are expected to follow good food hygiene practices to minimise the risk of accidental allergen exposure to themselves and others:
- Boarders are expected to maintain high standards of food hygiene to reduce the risk of accidental allergen exposure when baking and preparing snacks in House. Pupils must wash their hands thoroughly with soap and water before and after eating or handling food, avoid sharing food, drinks, utensils or food containers, and ensure that all food preparation areas and equipment are cleaned after use. Pupils with food allergies should only consume food that they know is safe and must not eat food where the ingredients or method of preparation cannot be confirmed.
- Shared kitchens should be kept clean, food residues removed promptly, and appropriate measures taken to prevent cross-contamination. Any accidental exposure to an allergen or symptoms of an allergic reaction must be reported immediately to boarding staff and Health Centre.
- Pupils prescribed adrenaline pens must ensure that their medication remains readily accessible at all times in accordance with their Individual Healthcare Plan.

7. Educational visits and sports fixtures

- Staff leading the trip will have a register of pupils with allergies and details of their medication. Health Centre staff will notify the trip leader of any allergies in advance;
- Allergies will be included on the risk assessment and catering provision put in place;
- Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
- Staff accompanying the trip are trained to recognise and respond to an allergic reaction;
- Allergens will be clearly labelled on catered packed lunches;
- If attending Match Tea at another school, the member of staff in charge is responsible for ensuring that the dietary and allergy needs of pupils are met;
- See Adrenaline Pens section for School Trips and Sports Fixtures.

8. Insect Stings

The Estates Team will monitor the grounds for wasp or bee nests. Pupils (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid them. This must be reported to the Estates Team immediately to manage.
Pupils are encouraged to:

- Avoid walking around in bare feet or sandals when outside and when possible, keep arms and legs covered when appropriate;
- Keep food and drink covered

9. Animals

It is normally the dander (flakes of skin) saliva or urine that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupil with a known animal allergy should avoid the animal to which they are allergic;
- If an animal comes on site a risk assessment will be done prior to the visit;
- Areas visited by animals will be cleaned thoroughly;
- Anyone in contact with an animal will wash their hands after contact;
- If an animal lives on site, for example in a Boarding House, pupils, parents and staff will be made aware and consideration and adaptations will be made; and
- School trips that include visits to animals will be carefully risk assessed.

10. Allergic Rhinitis/ Hay Fever

The school recognises that some pupils experience seasonal pollen allergies (hay fever) or persistent nasal allergies caused by allergens such as house dust mites, moulds or animal dander. These conditions can affect pupils' wellbeing, concentration and participation in school activities.

The school will:

- Maintain an up-to-date record of pupils with diagnosed seasonal or persistent nasal allergies.
- Work with parents to ensure the school is informed of any prescribed or recommended medication required during the school day.
- Support pupils in taking prescribed medication in accordance with the school's Administration of Medicines Policy (including the administration of medicines).
- Encourage pupils to carry and self-administer their medication where appropriate and authorised.
- Take reasonable steps to minimise exposure to known allergens where practicable, for example by keeping classroom windows closed during periods of high pollen count where appropriate, ensuring classrooms are cleaned regularly to reduce dust accumulation, and avoiding unnecessary exposure to known triggers.
- Encourage pupils to wash their hands and face after outdoor activities during periods of high pollen and to avoid rubbing their eyes.
- Ensure staff are aware of pupils with significant allergies and know how to respond if symptoms worsen or if there are concerns that symptoms may indicate a more serious allergic reaction.
- Encourage parents to notify the school promptly of any changes to their child's allergy diagnosis, medication or treatment plan.

The school recognises that hay fever and persistent nasal allergies are generally managed by the pupil and their parents, with support from the Health Centre where medication or reasonable adjustments are required.

11. Inclusion and Mental Health

Allergies can have a significant impact on mental health and wellbeing. Pupils may experience anxiety and depression and are more susceptible to bullying.

- No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip;
- Pupils with allergies may require additional pastoral support including regular check-ins from their Form Teacher/ Tutor/ House Parent etc;
- Affected pupils will be given consideration in advance of wider school discussions about allergy and school allergy awareness initiatives; and
- Bullying related to allergy will be treated in line with the school's Anti-Bullying Policies.

12. Adrenaline Pens

12.1 Storage of adrenaline pens

- Pupils prescribed with adrenaline pens must have easy access to two, in-date pens at all times;
- For younger pupils, two prescribed and clearly labelled adrenaline pens are stored in the Prep staff room, which is accessible at all times;
- From U2 (Year 5) upwards, pupils are encouraged to carry their two prescribed and clearly labelled adrenaline pens, in their original containers and accompanied by their Allergy Action Plan with them at all times;
- Spot checks carried out by the Health Centre Team will be made to ensure adrenaline pens are where they should be and in date;
- Adrenaline pens must not be kept locked away;
- Adrenaline pens are sensitive to extreme temperatures. They should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator) or in a fridge; and
- Used or out of date pens will be disposed of as sharps.

12.2 Spare adrenaline pens

The school has age-appropriate spare adrenaline pens to be used in accordance with government guidance.

Two paediatric dose (0.15mg for up to age 6) and two adult dose (0.3mg for age 7 and above) adrenaline pens are stored in each location and are clearly signposted.

Spare adrenaline pens can be found in the following eight locations:

- Prep School:
    - Prep School Office
- Senior School:
    - Dining Room
    - Opposite Senior School Office
    - Anniversary Halls - sports entrance
    - The 6th Form Building - front entrance
    - Senior Boarding House - beside entrance to Health Centre
    - Junior Boarding House - entrance hall
    - Health Centre

The Allergy Lead, Emily Jefford (Deputy Head and Head of Pre-Prep); and the Senior Nurse, Senior Sister Linda Green, are responsible for:

- Deciding how many spare pens are required;
- What dosage is required, based on the Resuscitation Council UK's age-based guidance;
- Which brand(s) to buy. The school aims to buy a single brand if possible to avoid confusion;

- The purchasing of spare adrenaline pens;
- Distribution around the site and clear signage.

12.3 Adrenaline pens on off-site activities

- No child with a prescribed adrenaline pen will be able to go on a school trip without two of their own devices. It is the Trip Leader's responsibility to check they have them before departure;
- Adrenaline pens will be kept close to the pupils at all times e.g. not stored in the hold of the coach, minibus or aeroplane when travelling or left in changing rooms;
- Adrenaline pens will be protected from extreme temperatures;
- Staff accompanying the pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction; and
- Staff will consider whether to take spare adrenaline pens to off-site activities. This should be recorded as part of the risk assessment process.

13. Responding to an allergic reaction / anaphylaxis

If a pupil has an allergic reaction:

- Treat the pupil in accordance with their Allergy Action Plan;
- Instigate the school's Emergency Response Plan – Appendix 2 below;
- If anaphylaxis is suspected administer adrenaline without delay;
- Treat the pupil where they are. Lie them down with their legs raised and bring medication to them;
- Use pupil's own prescribed medication if immediately available;
- Pupil can administer the adrenaline pen themselves (if able to) or a member of staff can administer pen. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline;
- If the pupil's own adrenaline pen is not available or misfires, then use a spare adrenaline pen;
- If anaphylaxis is suspected but the **pupil does not have a prescribed adrenaline pen** or Allergy Action Plan, lie the pupil down with their legs raised, **call 999 and explain anaphylaxis is suspected**. Inform the operator that spare adrenaline pens are available and follow instructions from the operator;
- The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for "spare" adrenaline devices to be used in an emergency;
- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services again and inform them that a second dose of adrenaline has been given;
- Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better; and
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff should accompany them in an ambulance until a parent or guardian arrives.

14. Training

14.1 The school is committed to training all staff annually to give them a good understanding of allergy.

This includes:

- Understanding what an allergy is;
- How to reduce the risk of an allergic reaction occurring;
- How to recognise and treat an allergic reaction, including anaphylaxis. Staff are given the opportunity to practice with a training adrenaline pen;
- How the school manages allergy, for example Emergency Response Plan (Appendix 2) below, documentation, communication etc;
- Where adrenaline pens are kept (both prescribed pens and spare pens) and how to access them;
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying;
- Understanding food labelling; and
- Taking part in an anaphylaxis drill.

14.2 The school will carry out an anaphylaxis drill once a year.

This includes:

- An exercise simulating an event where a pupil or member of staff has an allergic reaction and testing the whole school response.

15. Asthma

It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions.

- All pupils with an asthma diagnosis must always have access to an in-date prescribed inhaler;
- Pupils will not be permitted to attend off-site activities unless they have their personal prescribed inhaler with them;
- Parents are expected to notify the Health Centre and Form Teacher/Tutor immediately if their child receives a new diagnosis or if there are any changes to their prescribed medication.

16. Reporting Allergic Reactions

The school will record all allergic reaction incidents and near misses on Medical Tracker. Each incident and near miss will be investigated immediately by The Allergy Lead and Senior Leadership Team. Allergic reaction incidents and near misses are a standing agenda item at Health and Safety meetings, where they are reviewed to identify trends, share learning, and implement any necessary actions to reduce future risk.

APPENDIX 1

MANAGING ALLERGIC REACTIONS

ALLERGIC REACTIONS VARY

Allergic reactions are unpredictable and can be affected by factors such as illness or hormonal fluctuations.

You cannot assume someone will react the same way twice, even to the same allergen.

Reactions are not always linear. They don't always progress from mild to moderate to more serious; sometimes they are life-threatening within minutes.

MILD TO MODERATE ALLERGIC REACTIONS

Symptoms include:

- Swollen lips, face or eyes
- Itchy or tingling mouth
- Hives or itchy rash on skin
- Abdominal pain
- Vomiting
- Change in behaviour

Response:

- Stay with pupil
- Call for help
- Locate adrenaline pens
- Give antihistamine
- Make a note of the time
- Phone parent or guardian
- Continue to monitor the pupil

SERIOUS ALLERGIC REACTIONS / ANAPHYLAXIS

The most serious type of reaction is called **ANAPHYLAXIS**. Anaphylaxis is uncommon, and children experiencing it almost always fully recover.

In rare cases, anaphylaxis can be fatal. It should always be treated as a time-critical medical emergency.

Anaphylaxis usually occurs within 20 minutes of eating a food but can begin 2-3 hours later.

People who have never had an allergic reaction before, or who have only had mild to moderate allergic reactions previously, can experience anaphylaxis.

RESPONDING TO ANAPHYLAXIS

Symptoms of Anaphylaxis

A – Airway	**B – Breathing**	**C - Circulation**
Persistent cough	Difficult or noisy breathing	Persistent dizziness
Hoarse Voice	Wheeze or cough	Pale of floppy
Difficulty swallowing		Sleepy
Swollen Tongue		Collapse or unconscious

IF YOU SUSPECT ANAPHYLAXIS, GIVE ADRENALINE FIRST BEFORE YOU DO ANYTHING ELSE.

APPENDIX 2

EMERGENCY RESPONSE PLAN

Step 1 – Call for Help

- Alert the nearest trained member of staff.
- The child should be lying down with legs raised.
- Send another adult to:
    - dial 999
    - collect the pupil's emergency medication and spare adrenalin auto-injector (AAI) if required
    - notify the Headteacher.

Step 2 – Administer Adrenaline Auto-Injector (AAI)

Use the child's prescribed AAI immediately – it is not necessary to remove clothing.

- Inject adrenaline into the upper outer thigh according to the manufacturer's instructions.

If unavailable, expired, damaged or ineffective, use the school's spare AAI (where appropriate).

Record:

- time given
- device used
- administrator's name**.**

Step 3 – Call 999

State: "This is suspected anaphylaxis. Adrenaline has been given."

Provide:

- school address
- exact location within school
- age of child
- known allergen if known
- time adrenaline administered.

Step 4 – Position the Child

Child will already be in the lying position with legs raised.

If breathing is difficult:

- Sit upright.

If unconscious:

- Recovery position.

Do not allow the child to walk.

Step 5 – Monitor Continuously

- Stay with the child and do not let them move or get up
- Monitor airway and breathing.
- Be prepared to commence CPR if required.
- If symptoms persist after 5 minutes and a second AAI is available, administer a second dose.
- Call 999 again and tell them a second dose of adrenaline has been administered and check help is on the way.

Step 6 – Inform Parents/Guardians

- Contact parents/guardians immediately after emergency services have been called.

Step 7 – Transfer to Hospital

All children receiving adrenaline must attend hospital by ambulance for observation, even if symptoms improve. Hand used AAI devices to the paramedics.