

Allergy Safety Policy

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Policy Statement

Heathcote Preparatory School is committed to ensuring that pupils with allergies are fully supported, safe, and included in all aspects of school life.

In line with the Department for Education (DfE) statutory guidance: Supporting Pupils at School with Medical Conditions (2015) and Independent Schools Association (ISA) guidance, the school recognises that allergies are a serious medical condition which can, in some cases, lead to life-threatening anaphylaxis.

The school:

- Welcomes pupils with allergies and supports their full participation in school life
- Aims to minimise the risk of exposure to allergens
- Ensures staff are trained and confident in managing allergic reactions
- Responds quickly and effectively to medical emergencies

Roles and Responsibilities

The Management Board will:

- Ensure arrangements are in place to support pupils with allergies and anaphylaxis.
- Monitor implementation of this policy.

The Medical Lead will:

- Maintain records of pupils with allergies.
- Monitor expiry dates of medication.
- Coordinate staff training.
- Ensure staff receive appropriate training.
- Ensure healthcare plans are implemented and reviewed.
- Undertake termly checks of all emergency medication and maintain records of expiry dates.

Staff will:

- Follow individual healthcare plans.
- Know how to access emergency medication.
- Act immediately in an emergency.

Parents will:

- Provide accurate medical information.
- Supply in-date medication.
- Update the school regarding changes.

What is an Allergy and Anaphylaxis?

An allergy is a hypersensitive immune response to a normally harmless substance (allergen), such as certain foods, insect stings, medications, or environmental triggers.

In some individuals, exposure can lead to **anaphylaxis**, a severe and potentially life-threatening allergic reaction.

During anaphylaxis:

- Chemicals are released into the bloodstream
- Blood vessels widen and blood pressure drops
- Airways narrow and breathing becomes difficult
- Swelling of the throat and tongue may occur, increasing risk of oxygen deprivation

Anaphylaxis can develop within seconds or minutes of exposure and requires immediate emergency treatment.

Common Triggers

Allergic reactions may be triggered by:

- Foods (e.g. nuts, fish, eggs, dairy, sesame, wheat)
- Insect stings or bites
- Medication
- Skin contact with allergens
- Airborne particles (e.g. dust, latex, or food proteins)

Recognition of an Allergic Reaction / Anaphylaxis

Early signs may include:

- Anxiety or distress
- Widespread red, blotchy rash (urticaria)
- Swelling of lips, face, tongue, or throat
- Puffiness around the eyes
- Itchy skin or mouth

Serious symptoms include:

- Difficulty breathing or tight chest
- Pale, cold or clammy skin
- Blue-grey colour around lips
- Dizziness or weakness
- Feeling of “impending doom”

Severe progression may include:

- Restlessness or agitation
- Gasping for air
- Loss of consciousness
- Collapse

Emergency Treatment Procedure

Anaphylaxis is a medical emergency. Staff must act immediately.

Step 1: Get Help

- Call the School Office: Radio channel 1 or call 01245 223131
- Send for a trained first aider immediately
- Ensure another staff member retrieves the pupil's emergency medication

Step 2: Medication

- Administer prescribed antihistamine (if indicated in care plan)
- If serious symptoms are present or suspected, **administer adrenaline immediately using EpiPen or Anapen**

Step 3: Call Emergency Services

- Dial **999 immediately** if anaphylaxis is suspected
- State clearly: *"Suspected anaphylaxis"*

Administration of EpiPen / Anapen

Emergency instructions are included in each pupil's individual care pack.

- Lay the pupil flat if possible (do not allow them to stand or walk)
- Raise legs slightly if comfortable
- Expose the outer thigh (through clothing if necessary)
- Remove the blue safety cap
- Place device (orange tip end) firmly against the outer thigh at a right angle
- Press firmly until a click is heard
- Administer the device in accordance with the manufacturer's instructions and current training guidance. Staff should follow the instructions printed on the device
- Remove and gently rub the injection site for 10 seconds
- Do not discard the device

After administration:

- Stay with the pupil at all times
- Monitor breathing and consciousness
- If no improvement after **5–10 minutes**, a second dose may be given (if available and trained staff are present), using the opposite thigh
- Ensure the used device is taken to hospital with the pupil

Following an Allergic Emergency

- Parents will be informed as soon as possible.
- An accident/incident report will be completed.
- The use of medication will be recorded.
- The pupil's IHCP and risk assessment will be reviewed where necessary.

Medication and Storage

- Each pupil with an allergy will have an Individual Healthcare Plan (IHCP)
- Emergency medication (EpiPen/Anapen) will be:
 - Clearly labelled with the pupil's name and class
 - Stored in an accessible emergency care pack in the classroom
 - Carried with the pupil during movement around school where appropriate

Additional storage:

- Antihistamine medication is stored securely in a locked but easily accessible staffroom cupboard

Staff Training Responsibilities

- All staff receive anaphylaxis and EpiPen training annually
- Staff must read and be familiar with pupil individual healthcare plans
- Training includes recognition of symptoms and emergency response procedures
- The Headteacher ensures training is delivered and updated regularly
- The Medical Lead is the point of contact for training coordination and support

Immediate access to emergency medication is essential at all times.

Communication and Awareness

- Allergy information is shared with all staff via staff meetings and the school information system (Heathcote Hub)
- Supply staff and support staff are informed of relevant pupils
- Catering staff are fully informed of all dietary requirements and allergies
- Hard copies of allergy information are available in the school kitchen

Inclusion and Support

Heathcote Preparatory School:

- Recognises that pupils with allergies are fully included in school life
- Works to reduce anxiety and promote confidence and independence
- Encourages participation in all activities with appropriate risk management in place
- Ensures reasonable adjustments are made where necessary

Risk Assessment and Individual Healthcare Plans

- Each pupil with a diagnosed allergy will have an Individual Health Care Plan
- Risk assessments are completed for activities, trips, and food-related events
- Plans are reviewed regularly and updated in collaboration with parents and healthcare professionals

Partnership with Parents and External Agencies

The school works closely with:

- Parents and carers
- Healthcare professionals
- Allergy specialists where appropriate
- External guidance bodies including Allergy UK and the Anaphylaxis UK charity

Commitment

Heathcote Preparatory School is committed to:

- Maintaining a safe and supportive environment for all pupils
- Acting promptly and effectively in emergencies
- Ensuring staff competence through training
- Promoting awareness and understanding of allergies and anaphylaxis across the school community

Emergency Adrenaline Auto-Injectors (Spare Devices) – From September 2026

From September 2026, in accordance with any statutory requirements arising from Benedict's Law and associated Department for Education guidance, the school will maintain emergency spare adrenaline auto-injectors on site.

In addition to pupil-specific prescribed medication, the school will ensure that:

- The school will maintain at least two in-date spare adrenaline auto-injectors on site and will review this number based on pupil need, risk assessments and legislative requirements
- These spare devices will be available for **emergency use in the event of suspected anaphylaxis**, including situations where:
 - a pupil's own device is unavailable, out of date, or misfired
 - a pupil has an undiagnosed allergy and presents with anaphylaxis symptoms
- Spare AAls will be:
 - clearly labelled and stored in an **accessible, central emergency location** in line with school emergency procedures
 - regularly checked for expiry dates and replaced before expiry
 - included within staff emergency response training and awareness briefings

Staff are already trained to understand that **prompt administration of adrenaline is the priority in suspected anaphylaxis**, and that spare AAls may be used where clinically appropriate and in accordance with emergency guidance.

This provision is intended to strengthen pupil safety, ensure rapid response in emergencies, and support compliance with evolving statutory expectations regarding allergy management in schools.

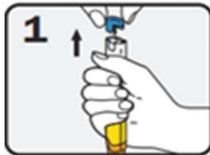
Legislation and Guidance

This policy has been written in accordance with current UK legislation and recognised national guidance relating to the care and safety of pupils with medical conditions and allergies in schools.

- The Children and Families Act 2014 (Section 100)
- Equality Act 2010
- Department for Education (DfE) Guidance (2015): Supporting Pupils at School with Medical Conditions
- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Early Years Foundation Stage (EYFS) Framework (where applicable)
- ISA Regulatory Requirements and Guidance (Independent Schools Association)
- Allergy UK Guidance
- Anaphylaxis UK Guidance

How to give EpiPen

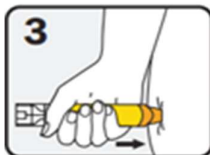
How to give EpiPen®



1 PULL OFF BLUE SAFETY CAP and grasp EpiPen. Remember: "blue to sky, orange to the thigh"



2 Hold leg still and PLACE ORANGE END against mid-outer thigh "with or without clothing"



3 PUSH DOWN HARD until a click is heard or felt and hold in place for **3 seconds**. Remove EpiPen.

Additional instructions:

If wheezy due to an allergic reaction, GIVE ADRENALINE FIRST and then asthma reliever (e.g. blue puffer) via spacer, if prescribed

Signs of Anaphylaxis

Watch for signs of ANAPHYLAXIS

(a potentially life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN DIFFICULTY IN BREATHING**

A AIRWAY

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

B BREATHING

- Difficult or noisy breathing
- Wheeze or persistent cough

C CONSCIOUSNESS

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

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1 Lie flat with legs raised (if breathing is difficult, allow person to sit)



- 2 Use Adrenaline autoinjector **without delay** (eg. EpiPen[®]) (Dose: mg)

- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")

***** IF IN DOUBT, GIVE ADRENALINE *****

AFTER GIVING ADRENALINE:

1. Stay with child/young person until ambulance arrives, **do NOT stand them up**. Keep them lying down, even if things seem to be getting better.
2. Phone parent/emergency contact. If you are on your own, call a friend or relative and ask them to come over.
3. If no improvement **after 5 minutes**, give a further adrenaline dose using a second autoinjector device, if available.

Commence CPR if there are no signs of life

You can dial 999 from any phone, even if there is no credit left on a mobile.
Medical observation in hospital is recommended after anaphylaxis.

Individual Healthcare Plan

<p>Name:</p> <p>Class:</p> <p>Date of birth:</p> <p>Address:</p>	<p>Photo</p>
<p>Allergic to:</p>	<p>Signs and Symptoms previously experienced:</p>
<p><u>Mild to Moderate Reaction:</u> Swollen lips, face or eyes Itchy/tingling mouth Mild throat tightness Hives or itchy skin rash Abdominal pain or vomiting Sudden change in behaviour</p>	<p>Treatment: (ie piriton)</p>
<p><u>Severe Reaction:</u> Severe tightness in chest Severe choking, wheezing, drooling Severe vomiting Severe croupy breathing Drooling, marked tongue/lip swelling Marked drowsiness / Loss of consciousness</p>	<p>Treatment:</p>
<p>Medication:</p> <p>Location of Medication:</p>	<p>Registered GP:</p>
<p>Emergency Contact 1:</p> <p>Parental consent to administer medication listed on this plan</p> <p>Signed: _____</p>	<p>Emergency Contact 2:</p>