



Morpeth First School Allergy Safety Policy

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Any interim changes made before next annual review and reasons for this	

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1. Statement of Intent

Morpeth First School is committed to providing a safe, inclusive and supportive environment for all children, including those living with allergies.

We recognise that allergic reactions can range from mild symptoms to severe and potentially life-threatening anaphylaxis. Effective allergy management therefore requires a whole-school approach involving school leaders, teaching and support staff, Early Years staff, administrative staff, catering staff, wraparound staff, children, parents and carers, healthcare professionals and other relevant partners.

Our approach is based upon four key principles:

- identifying children with allergies and understanding their individual needs;
- reducing the risk of accidental exposure to known allergens;
- ensuring staff are appropriately trained to recognise and respond to allergic reactions; and
- ensuring appropriate emergency medication is readily accessible when required.

Morpeth First School will take reasonable and proportionate steps to reduce the risk of exposure to known allergens whilst ensuring that children with allergies are not unnecessarily excluded from educational, social or enrichment opportunities.

Allergy safety is a shared responsibility across the school community.

This is a standalone policy and will be published on the school website. It should be read alongside the school's Supporting Pupils with Medical Conditions Policy, First Aid Policy, Health and Safety Policy, Educational Visits Policy, Safeguarding and Child Protection Policy and relevant food-safety procedures.

2. Legal and Statutory Framework

This policy has been developed with regard to current legislation and statutory guidance relating to allergy safety and supporting children with medical conditions in schools.

This includes:

- the Children and Families Act 2014, including Section 100;
- the Equality Act 2010;
- Department for Education statutory guidance relating to allergy safety in schools;
- Department for Education statutory guidance, *Supporting Pupils at School with Medical Conditions*;
- Department of Health and Social Care guidance concerning the use of adrenaline auto-injectors in schools;
- relevant food information and allergen legislation;
- relevant health and safety legislation; and

- current national medical and emergency guidance concerning allergies and anaphylaxis.

The school will have regard to the most current statutory guidance and will amend this policy and associated procedures where requirements or national guidance change.

3. Aims

Through this policy, Morpeth First School aims to:

- provide a safe environment for children with allergies;
- identify children with known allergies promptly;
- understand each child's individual needs and level of risk;
- maintain appropriate Individual Healthcare Plans (IHPs);
- minimise avoidable exposure to known allergens;
- ensure staff can recognise the signs and symptoms of an allergic reaction and anaphylaxis;
- ensure staff know how to respond appropriately in an emergency;
- maintain appropriate allergy awareness and adrenaline auto-injector training;
- ensure emergency medication can be accessed quickly when required;
- maintain appropriate spare emergency adrenaline auto-injectors;
- work collaboratively with children, parents/carers and healthcare professionals;
- consider allergy safety during lessons, meals, clubs, trips, visits and other school activities;
- record and review significant allergic incidents and near misses; and
- ensure children with allergies are included fully in school life wherever reasonably possible.

4. Leadership and Governance

The Governors have overall responsibility for ensuring that Morpeth First School meets its statutory responsibilities relating to allergy safety.

The Headteacher is responsible for ensuring that this policy is implemented effectively throughout the school.

A designated member of the Senior Leadership Team (Mrs N Fielding) will have responsibility for overseeing allergy safety within school and will act as the school's Allergy Safety Lead.

The Allergy Safety Lead will:

- oversee implementation of this policy;
- maintain oversight of children with known allergies;

- ensure appropriate Individual Healthcare Plans are in place;
- ensure relevant information is communicated appropriately to staff;
- oversee staff allergy awareness and emergency response training;
- ensure arrangements for emergency medication are effective;
- oversee arrangements for spare adrenaline auto-injectors;
- work with catering, Early Years and wraparound providers regarding allergy management;
- ensure significant allergic incidents and near misses are recorded;
- ensure incidents and near misses are reviewed and lessons are learned;
- report significant concerns to the Headteacher and Governors; and
- coordinate the annual review of this policy.

Day-to-day responsibilities may be delegated to appropriately trained members of staff. Overall oversight remains with the designated Allergy Safety Lead and Headteacher.

5. Identifying Children with Allergies

Parents and carers are responsible for informing Morpeth First School of any diagnosed or suspected allergy affecting their child.

Information provided should include, where known:

- the allergen or allergens;
- the nature and severity of the allergy;
- previous reactions;
- typical signs and symptoms;
- prescribed medication;
- whether an adrenaline auto-injector has been prescribed;
- emergency treatment required; and
- relevant advice from healthcare professionals.

Parents/carers must inform school promptly of any change to their child's diagnosis, condition, medication or treatment.

Relevant allergy information will be recorded within the school's pupil information and medical records.

Information will be made available to all staff who in order to keep the child safe.

The school will ensure that relevant allergy information is transferred appropriately when a child changes class, teacher, key stage or provision.

6. Individual Healthcare Plans

Children with diagnosed allergies who require individual arrangements will have an up-to-date Individual Healthcare Plan (IHP).

The IHP will be developed collaboratively with parents/carers and, where appropriate, the child and relevant healthcare professionals.

The plan should include, where relevant:

- the child's details;
- diagnosed allergy or allergies;
- known allergens and triggers;
- signs and symptoms of a reaction;
- the child's usual presentation;
- measures required to reduce the risk of exposure;
- medication prescribed;
- location of medication;
- emergency procedures;
- instructions regarding adrenaline auto-injectors;
- arrangements relating to meals and food;
- arrangements for trips, clubs and other activities;
- reasonable adjustments required;
- responsibilities of staff, parents/carers and, where appropriate, the child; and
- emergency contact information.

IHPs will be reviewed at least annually and sooner where:

- the child's condition changes;
- medication changes;
- the child experiences a significant allergic reaction;
- a significant near miss occurs;
- healthcare advice changes; or
- the school, parents/carers or healthcare professionals identify that existing arrangements require review.

7. Staff Training

All staff at Morpeth FirstSchool receive allergy awareness training. They also have adrenaline auto-injector training as part of this programme. Training is required as

part of induction and then repeated annually within the Safeguarding schedule of CPD and is provided by an accredited organisation.

This training includes:

- understanding allergies and anaphylaxis;
- recognising the signs and symptoms of an allergic reaction;
- recognising the signs and symptoms of anaphylaxis;
- understanding when emergency action is required;
- administering an adrenaline auto-injector;
- understanding the types of auto-injector that may be prescribed to children;
- understanding the importance of administering adrenaline promptly when anaphylaxis is suspected;
- calling 999 and communicating that anaphylaxis is suspected;
- knowing where emergency medication is stored; and
- following the school's emergency procedures.

Morpeth First School is committed to maintaining this training on an ongoing basis.

Where a child has specific or additional requirements that are not adequately covered through whole-staff training, appropriate child-specific information and/or additional training will be provided to relevant members of staff.

The school will maintain appropriate records of staff training.

New staff joining the school will be made aware of the school's allergy arrangements and the location of emergency medication as part of their induction and will undertake the relevant training.

8. Reducing the Risk of Exposure

Morpeth First School recognises that it is not possible to guarantee a completely allergen-free school environment.

The school therefore adopts a risk-reduction approach rather than making a general claim that the school is entirely free from a particular allergen.

Reasonable precautions will include:

- ensuring staff know about children with significant allergies where this information is necessary for their safety;
- maintaining appropriate handwashing practices;
- cleaning surfaces appropriately;
- managing food preparation and serving carefully;
- considering allergens when planning lessons and activities, for example in D and T, Science and craft;

- avoiding unnecessary use of known allergens where a child is at significant risk;
- discouraging children from sharing food;
- discouraging the sharing of eating utensils and drinking bottles;
- considering allergy risks when organising celebrations and events;
- considering allergy arrangements within breakfast and wraparound provision;
- considering allergy arrangements for extracurricular activities; and
- completing individual risk assessments where appropriate.

Children with allergies should not be unnecessarily isolated from their peers.

Risk-management arrangements should balance appropriate safety measures with the child's right to participate fully in school life.

9. Food and Catering

Allergy safety forms an essential part of the school's catering arrangements.

Parents and carers have an important responsibility to ensure that the school and catering team have accurate and up-to-date information about their child's allergies and dietary requirements. As well as completing medical information for the school office, Parents and carers must ensure that all allergy and dietary information relating to their child is recorded accurately on School Grid and updated promptly whenever there is a change.

Parents and carers should not rely solely on informing a member of staff verbally. Any new allergy, change to an existing allergy, dietary requirement or other relevant medical information must also be updated on SchoolGrid and communicated directly to the school.

Those responsible for preparing and serving food will be provided with appropriate information regarding children with food allergies to keep them safe.

Appropriate procedures will be maintained for:

- identifying children with allergies;
- ensuring allergy and dietary information recorded on SchoolGrid is available to the catering team;
- providing allergen information;
- food preparation and storage;
- serving meals;
- cleaning;
- utensils and equipment;
- minimising cross-contact;
- Food Sourcing and supplier controls;
- substitutions and menu changes; and

- effective communication between parents/carers, catering staff and school staff.

The catering unit risk assessment process will use the FSA allergen management checklist and will be reviewed at least Termly, following an incident or when there has been changes in kitchen operations. Findings and actions will be documented and shared with relevant staff. Prepacked foods will be labelled with a full list of ingredients and allergens and allergen information will be given to pupils, parents, carers, staff and visitors on request.

Children with food allergies should be able to access suitable meals wherever reasonably possible.

Parents and carers are responsible for checking that the allergy and dietary information held for their child on SchoolGrid remains accurate and current. Where a child's allergy or dietary requirements change, SchoolGrid must be updated without delay and the school should be informed.

Staff must never guess whether a food is safe for a child with an allergy. Where there is any uncertainty about whether a meal or food item is suitable, it must not be given to the child until its suitability has been confirmed.

10. Food Brought into School

Allergy safety will be considered when food is brought into school.

This includes food associated with:

- curriculum activities;
- cooking;
- fundraising events (see below);
- fairs;
- parties (see below);
- rewards;
- cultural celebrations; and
- activities provided by external organisations.

Parents are discouraged from bringing in food/cakes and treats, for individual classes, especially without prior permission due to the risk of allergens being introduced inadvertently. Parents and carers must follow any allergy-related arrangements communicated by the school.

Where necessary, specific restrictions may be introduced for a particular class, year group, activity or area of school following an individual assessment of risk.

The school reserves the right to refuse food being brought onto the premises where it presents an unacceptable risk to a child.

While we will take steps to try and encourage parents/carers contributing items for fundraising events to avoid including common allergens or providing an allergen list for donated items, Morpeth First School acknowledges that it would be impossible to police the accuracy of this, or for the school/volunteers to police this fully for such

events. While the school will always encourage inclusion, it will be the parents/carers responsibility when accompanying their child to assess the risks and decide whether foods are suitable. If a member of staff is responsible for accompanying the child at such event, they must be aware of the child's allergy status and avoid allowing the child to eat and drink items without the express permission of the parent.

School parties – All parents/carers are requested to follow the instructions of the class teacher in regard to donating food for parties, including avoiding certain allergens. This will generally consist of parents sending in small amount of plated or boxed food for their own child. If any child suffers from an allergy, their plate will be kept separate from everyone else's to avoid cross contamination. Following this system also avoids the stigma of a child feeling different due to their allergy.

11. Curriculum Activities

Staff must consider allergy risks when planning activities involving food or other potential allergens.

This may include:

- cooking and baking;
- food tasting;
- science investigations;
- art and craft activities;
- sensory activities;
- gardening;
- animal-related activities; and
- celebrations or themed events.

Staff should consider the known allergy needs of children participating in an activity before introducing potential allergens.

Reasonable adjustments will be made so that children with allergies can participate safely wherever possible.

12. Adrenaline Auto-Injectors

Children who have been prescribed adrenaline auto-injectors (AAIs) should have their prescribed devices available in school in accordance with their Individual Healthcare Plan and current medical guidance. We recommend that each child has 2 auto injectors in case of failure of one of the devices, or if a second dose is necessary.

At Morpeth First School, adrenaline children's personal auto-injectors are stored in the cupboard in the staffed main office which is unlocked and available to all staff during the school day. Pupil's personal AAI devices are stored in named boxes containing a photo of the child and the IHP. There may also be antihistamine

contained in the box as an initial precaution if this is stated on the IHP. Staff are made aware through training and induction arrangements that emergency medication is located there. Expiry dates are written clearly on a sign on the door and these are checked termly by the named First Aider (A Moody) to ensure medication is in date. Parents are informed in advance of the expiry date so that they can renew medication. Emergency medication will be:

- clearly identifiable;
- stored safely and appropriately;
- readily accessible to staff in an emergency;
- kept in its original packaging where appropriate;
- checked regularly; and
- monitored to ensure it remains within its expiry date.

Emergency AAls must not be locked away or stored in a manner that would create an unnecessary delay in accessing them.

Parents/carers remain responsible for providing prescribed medication for their child as agreed with the school and for replacing medication when required.

The school will undertake routine checks of medication held on site and will notify parents/carers where prescribed medication is approaching expiry or requires replacement.

Where a child is sufficiently mature and competent to carry their own medication, arrangements may be agreed through the child's Individual Healthcare Plan.

13. School Emergency Adrenaline Auto-Injectors

Morpeth First School maintains spare, in-date adrenaline auto-injectors for emergency use in accordance with current statutory and medical guidance.

The school's spare emergency AAls are stored centrally in the school Office.

The school will ensure that:

- staff know where emergency AAls are located;
- the Office is accessible so that medication can be retrieved quickly;
- devices are stored appropriately;
- expiry dates are checked routinely;
- devices are replaced before expiry;
- any device that is used is replaced as soon as practicable; and
- appropriate records are maintained.

School emergency AAls supplement, rather than replace, medication prescribed to individual children.

Emergency AAls will only be used in accordance with current legislation, statutory guidance and the school's emergency procedures.

14. Recognising Anaphylaxis

Anaphylaxis is a serious and potentially life-threatening allergic reaction.

Symptoms can develop rapidly and may include:

- swelling of the tongue or throat;
- difficulty swallowing;
- difficulty breathing;
- wheezing;
- persistent coughing;
- noisy breathing;
- a hoarse voice;
- dizziness;
- collapse;
- becoming pale, floppy or unresponsive; or
- a sudden significant change in behaviour or responsiveness.

Skin symptoms such as hives, itching or flushing may also occur, but they are not always present.

Staff must not wait for every possible symptom to appear before responding to suspected anaphylaxis.

15. Emergency Response

Where anaphylaxis is suspected, staff must act immediately.

The priority is the prompt administration of adrenaline in accordance with the child's emergency plan and current emergency guidance.

Staff should:

1. Administer an adrenaline auto-injector without unnecessary delay where anaphylaxis is suspected.
2. Call 999 and clearly state that anaphylaxis is suspected.
3. Follow the child's emergency allergy plan where available.
4. Keep the child appropriately positioned and supervised.
5. Follow current emergency guidance regarding the administration of a second dose if symptoms do not improve or symptoms return.
6. Ensure the child is transferred into the care of ambulance professionals.
7. Contact the child's parent/carer.
8. Record the incident and the action taken.

A child who has received adrenaline must be assessed by emergency medical professionals.

The child must not simply return to lessons because their symptoms appear to have improved.

In an emergency, staff should act promptly. Delay in administering adrenaline during suspected anaphylaxis can be dangerous.

16. Educational Visits, Trips and Residential

Having an allergy should not automatically prevent a child from participating in a school trip, residential or extracurricular activity.

Allergy safety will form part of the planning and risk-assessment process through the EVOLVE system.

Trip leaders must ensure that:

- relevant allergy information is available;
- appropriate medication accompanies the child;
- medication remains readily accessible;
- staff understand the child's emergency arrangements;
- catering arrangements have been considered where relevant;
- emergency arrangements are understood;
- access to emergency medical assistance has been considered; and
- the child's IHP and any individual risk assessment are followed.

Where medication is normally stored in the school Office, appropriate medication must be removed and taken with the child for the duration of the visit where required.

Medication must remain readily accessible and must not be stored somewhere that would create a delay during an emergency.

For residential visits, arrangements relating to meals, accommodation, activities, medication and emergency healthcare will be considered in advance.

Parents/carers will be consulted where additional arrangements are required.

17. Early Years

Morpeth First School recognises that younger children may be less able to:

- identify allergens;
- communicate early symptoms;
- manage their own medication;
- resist sharing food; or
- understand the seriousness of their allergy.

Early Years staff will therefore maintain appropriate supervision and ensure allergy information is incorporated into children's individual care arrangements.

Allergy safety will be considered across Nursery, Reception, breakfast provision, extended care and other Early Years activities.

18. Breakfast Club, Wraparound Care and Extracurricular Clubs

The school's allergy arrangements apply to school-operated wraparound provision, clubs and other activities.

Relevant information about children's allergies will be communicated appropriately to staff responsible for them.

Where provision is delivered by an external provider on the school site, appropriate allergy information, emergency procedures and responsibilities will be agreed with that provider, subject to information-sharing and data-protection requirements.

The school will seek to ensure that children with allergies are able to access wraparound and extracurricular opportunities wherever reasonably possible.

19. Supply Staff, Visitors, Volunteers and Contractors

Morpeth First School will have arrangements to ensure that supply and temporary staff receive relevant information about children whose allergies they may need to manage.

Visitors, volunteers and contractors will be informed of allergy-related arrangements where their activities could present a risk.

External organisations providing food or activities involving potential allergens must comply with appropriate school allergy-safety arrangements.

20. Pupil Awareness

Children will be taught, at an age-appropriate level, that allergies can be serious.

Children will be encouraged to:

- wash their hands appropriately;
- avoid sharing food and drinks;
- respect other children's medical needs;
- tell an adult immediately if another child appears unwell;
- never interfere with another child's medication; and
- understand why particular safety arrangements may be necessary.

Deliberately exposing another child to a known allergen, tampering with medication or bullying related to an allergy will be treated seriously and managed through the school's behaviour and safeguarding procedures.

21. Responsibilities of Parents and Carers

Parents and carers are expected to:

- provide accurate and current information regarding their child's allergy, including on Schoolgrid;
- provide relevant medical information where required;
- participate in developing and reviewing their child's IHP;
- provide prescribed medication as agreed;
- ensure medication supplied for their child is in date;
- replace medication when required;
- notify school immediately of changes to diagnosis, medication or treatment;
- provide current emergency contact details; and
- work collaboratively with the school.

Parents/carers are encouraged to raise any concerns regarding their child's allergy management promptly so that these can be addressed.

22. Responsibilities of Children with Allergies

Children will be encouraged, according to their age, maturity and ability, to understand and take increasing responsibility for managing their allergy.

Where appropriate, children will be encouraged to:

- know their allergens;
- avoid sharing food;
- recognise their early symptoms;
- tell an adult immediately if they feel unwell;
- know where their medication is located; and
- carry their own emergency medication where this has been formally agreed.

A child's ability to self-manage does not remove the school's responsibility to provide appropriate support.

23. Allergic Incidents and Near Misses

Morpeth First School will formally record significant allergic reactions and allergy-related near misses.

A near miss may include an incident in which a child was at risk of exposure to a known allergen but harm was avoided.

Records should include, where relevant:

- the date, time and location;
- the child involved;
- the allergen or suspected allergen;
- the circumstances surrounding the incident;
- symptoms experienced;

- action taken;
- medication administered;
- staff involved;
- emergency-services involvement;
- communication with parents/carers; and
- immediate action taken to reduce the likelihood of recurrence.

Significant incidents and near misses will be reviewed by the Allergy Safety Lead and/or Headteacher.

The purpose of this review is to identify learning and strengthen future arrangements.

Following a review, the school may amend:

- the child's IHP;
- individual risk assessments;
- catering arrangements;
- staff training;
- supervision arrangements;
- storage or accessibility of medication;
- emergency procedures;
- communication arrangements; or
- this policy.

Significant incidents will be reported to Governors and other relevant organisations or authorities where required.

24. Record Keeping and Confidentiality

Medical and allergy information is sensitive personal information and will be managed in accordance with the school's data-protection arrangements.

Relevant information will nevertheless be shared with members of staff where this is necessary to protect a child.

Confidentiality must not prevent essential safety information being provided to those responsible for caring for a child.

The school will maintain appropriate records relating to:

- identified allergies;
- Individual Healthcare Plans;
- prescribed medication;
- school emergency AAls;
- medication and expiry-date checks;
- staff training;

- significant allergic incidents; and
- significant near misses.

25. Inclusion and Equality

Morpeth First School is committed to ensuring that children with allergies are able to participate fully in school life.

Reasonable adjustments will be made where required and unnecessary restrictions will be avoided.

This applies to:

- lessons;
- school meals;
- trips and visits;
- residential;
- clubs;
- performances;
- celebrations;
- sporting activities;
- wraparound provision; and
- social experiences.

Risk assessments should focus on how an activity can be undertaken safely rather than automatically excluding a child because of their allergy.

26. Communication

Morpeth First School will promote appropriate allergy awareness across the school community.

This policy will be:

- published on the school website;
- available to parents and carers;
- available to staff;
- included within relevant staff induction and training arrangements; and
- reviewed at least annually.

Relevant child-specific information will be communicated to members of staff who require it to fulfil their responsibilities safely.

27. Ongoing Commitment to Allergy Safety

Morpeth First School recognises that effective allergy management requires more than the publication of a policy.

The school therefore makes an ongoing commitment to:

- maintain whole-staff awareness of allergies and anaphylaxis;
- continue adrenaline auto-injector training through the school's first-aid training programme;
- renew and refresh this training alongside scheduled first-aid training;
- ensure new staff receive appropriate allergy information as part of their induction;
- maintain accessible emergency medication within the school medical room;
- routinely check emergency medication and expiry dates;
- maintain appropriate and up-to-date Individual Healthcare Plans;
- communicate relevant allergy information to staff;
- work closely with parents/carers;
- record and review significant allergic incidents and near misses; and
- continually review the effectiveness of the school's allergy-safety arrangements.

28. Monitoring and Review

The Allergy Safety Lead and Headteacher will monitor implementation of this policy.

Monitoring will include consideration of:

- staff training;
- Individual Healthcare Plans;
- emergency medication arrangements;
- adrenaline auto-injector availability;
- expiry-date checks;
- allergic incidents;
- near misses;
- catering arrangements;
- feedback from parents/carers; and
- changes to statutory or medical guidance.

The Governors will maintain appropriate oversight of the school's arrangements for allergy safety.

This policy will be formally reviewed at least annually.

An earlier review will take place where:

- there is a serious allergic incident;

- a significant near miss identifies a weakness in existing arrangements;
- statutory or medical guidance changes; or
- the Headteacher or Board of Trustees considers a review necessary.

29. Our Commitment

At Morpeth First School, allergy safety is a shared responsibility.

Through effective communication, careful risk management, accessible emergency medication, appropriate Individual Healthcare Plans, ongoing staff training and prompt emergency action, we will work to ensure that children with allergies are safe, included, known and valued.

Our aim is not simply to manage risk, but to ensure that children with allergies are able to participate fully and confidently in the abundance of opportunities available at Morpeth First School.

Appendices

30. Recognition and management of allergic reaction

Recognition and management of an allergic reaction/anaphylaxis

Signs and symptoms include:

Mild-moderate allergic reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

ACTION:

- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine according to the child's allergy treatment plan
- Phone parent/emergency contact



Watch for signs of ANAPHYLAXIS (life-threatening allergic reaction):

AIRWAY:	Persistent cough Hoarse voice Difficulty swallowing, swollen tongue
BREATHING:	Difficult or noisy breathing Wheeze or persistent cough
CONSCIOUSNESS:	Persistent dizziness Becoming pale or floppy Suddenly sleepy, collapse, unconscious

IF ANY ONE (or more) of these signs are present:

1. Lie child flat with legs raised:
(if breathing is difficult, allow child to sit)  
2. Use Adrenaline autoinjector* **without delay**
3. Dial 999 to request ambulance and say ANAPHYLAXIS



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

After giving Adrenaline:

1. Stay with child until ambulance arrives, do **NOT** stand child up
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement **after 5 minutes, give a further dose** of adrenaline using another autoinjector device, if available.

Anaphylaxis may occur without initial mild signs: **ALWAYS use adrenaline autoinjector FIRST in someone with known food allergy who has SUDDEN BREATHING DIFFICULTY** (persistent cough, hoarse voice, wheeze) – even if no skin symptoms are present.

31. Allergy Action plan template

(See also School 'Supporting children with medical conditions' policy)

Name:

DOB:

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
- Collapse/unconscious

C CONSCIOUSNESS

- Persistent dizziness
- Pale or floppy
- Suddenly sleepy

(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.

Mild/moderate reaction:

Swollen lips, face or eyes

Itchy/tingling mouth

Mild throat tightness

Hives or itchy skin rash

Abdominal pain or vomiting

Sudden change in behaviour

Action

to take:

Stay with person, call for help if needed

- Locate adrenaline autoinjector(s)

Give antihistamine:

.....

(If vomited, can repeat dose)

Phone parent/emergency contact

Do not take a shower to help with itchy skin, this can worsen the reaction

Emergency contact details:

1) Name:.....



2) Name:.....



Parental consent : I hereby authorise school staff to administer the medicines listed on this plan, in accordance with Department of Health Guidance on the use of A&A in schools.

Signed:

Print name:

Date:

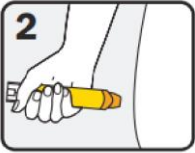
Consent is required for children under 16 years (and for young people over 16 unable to give consent themselves) except in an unforeseen emergency

For more information about managing anaphylaxis in schools and “spare” adrenaline autoinjectors, visit: sparepensinschools.uk

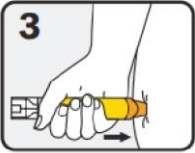
How to give EpiPen®



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



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



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

This is a medical document to be completed by a healthcare professional. It must not be altered without their permission. This document provides medical authorisation for schools to administer a ‘spare’ back-up adrenaline autoinjector if needed, as permitted by the Human Medicines (Amendment) Regulations 2017. During travel, adrenaline auto-injector devices must be carried in hand-luggage or on the person, and NOT in the luggage hold. This action plan and medical authorisation to carry emergency autoinjectors has been prepared by:

Sign & print name:

Hospital/Clinic:

..... Date:

32. Incident Log Template

Allergy Incident or Near Miss form

Following a near miss, reaction or anaphylaxis a thorough review needs to be undertaken to understand why the incident happened and to identify the measures needed to prevent future occurrences.

Completed by		Role		Date	
Date of incident		Type of incident	Near miss/reaction/anaphylaxis		
Location of incident		Person affected	Student/employee		
What happened – the cause?					
Were AAls administered?	Yes No				
What action was taken?					
What were the contributory factors?					
What needs to happen in future to avoid a recurrence?					

Are there any training needs?	Yes No		
Does the policy need reviewing?	Yes No		
Have staff (and students) involved been debriefed?	Yes No	Have staff (and students) involved been offered support?	Yes No
Does the student have an allergy action plan?	Yes No	Has the allergy action plan been updated if needed?	Yes No
Does the student have an IHP?	Yes No	Has the IHP been updated?	Yes No
Has replacement medication been obtained?	Yes No		
Is this RIDDOR reportable?	Yes No		
Parent/staff comments			
Date reported to manager			
Manager's comments			
Manager's signature			
Form completer's signature			

33. Legal Requirements & Labelling Standards

School food provision falls under both education and food safety laws, meaning kitchens must track and declare ingredients precisely. [\[1\]](#)

The 14 Major Allergens

Caterers must legally identify and manage the 14 statutory allergens: [\[1, 2, 3\]](#)

- Celery, Cereals containing gluten, Crustaceans, Eggs, Fish, Lupin, Milk, Molluscs, Mustard, Tree nuts, Peanuts, Sesame, Soya, and Sulphur dioxide. [\[1\]](#)

Prepacked for Direct Sale (PPDS) Food

Under **Natasha's Law**, any food packaged on the school premises before a pupil selects or orders it (e.g., grab-and-go sandwiches, boxed salads, wrapped cakes) must feature a physical label. [\[1, 2\]](#)

- **The Label Requirements:** Must include the explicit **product name** and a **full ingredients list**.
- **Visual Emphasis:** Every one of the 14 allergens present in the ingredients must be highlighted using bold text, italic text, or a contrasting color. [\[1, 2, 3, 4, 5\]](#)

Non-Prepacked & Plated Foods

For hot meals served straight from the counter, full labels are not legally required on the plate. However, the school must make allergen information available: [\[1, 2, 3\]](#)

- **In Writing:** Maintained via an up-to-date allergen matrix, a clearly marked menu board, or digital sheets.
- **Signposting:** Clear notices or posters must be displayed at the counter, directing pupils and staff to ask servers for full allergen details. [\[1, 2, 3\]](#)

34. References

- Children and Families Act 2014 (Section 100)
- Equality Act 2010
- Food Information Regulations 2014
- Health and Safety at Work Act 1974
- Department for Education (DfE), "Supporting pupils at school with medical conditions" (2017)
- Food Standards Agency (FSA), "Allergen Guidance for Food Businesses" (2021)
- Ofsted Inspection Framework
- British Dietetic Association, Guidance on Allergen Management and Safe Food Preparation
- Allergy UK, School Allergy Policy Resources
- Anaphylaxis Campaign, Allergy Action Plan and Emergency Response Guidance
- Northumberland County Council Health and Safety and Food Safety Guidance

- Morpeth First School Safeguarding and Child Protection Policy
- Morpeth First School Health and Safety Policy
- Morpeth First School Supporting Pupils with Medical Conditions Policy