SUTTON VALENCE SCHOOL
SINCE 1576

Allergy and Anaphylaxis Policy

(Prep School and Senior School)

Author: Ms Lauren Austen
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Aims

Sutton Valence School is committed to providing a safe, inclusive and supportive environment for all pupils, staff and visitors with allergies.

The School recognises that allergies can have a significant impact on health, wellbeing and participation in school life. Some allergies may result in anaphylaxis, which is a potentially life-threatening medical emergency requiring immediate treatment. The School is committed to reducing the risk of exposure to allergens, supporting pupils to manage their allergies safely, and ensuring staff are able to respond appropriately in an emergency.

The aims of this policy are to:

- Promote a culture of allergy awareness across the whole school community.
- Reduce the risk of exposure to known allergens.
- Support pupils with allergies to participate fully and safely in school life.
- Ensure rapid and effective treatment of allergic reactions and anaphylaxis.
- Provide clear guidance on roles and responsibilities.
- Ensure compliance with statutory guidance and relevant legislation.

This policy should be read alongside:

- Medical Conditions Policy
- First Aid Policy
- Safeguarding Policy
- Anti-Bullying Policy
- Educational Visits Policy
- Health and Safety Policy
- Data Protection Policy

This policy applies to all pupils, staff, governors, volunteers, visitors and contractors.

The policy will be reviewed annually and following any significant allergy-related incident or near miss. It will be published on the School website and made available on request.

Definitions

Allergy

An allergy is a medical condition in which the body's immune system reacts abnormally to a substance that is normally harmless.

Allergic reactions may be triggered by:

- Food
- Medication
- Insect venom
- Latex
- Animal dander
- Pollen
- Other environmental allergens

Anaphylaxis

Anaphylaxis is a severe allergic reaction which can be life-threatening and must always be treated as a medical emergency. It commonly affects the airway, breathing and circulation.

Adrenaline Auto-Injector (AAI)

An Adrenaline Auto-Injector (AAI) is a device used to administer adrenaline as emergency treatment for anaphylaxis.

Examples include:

- EpiPen
- Jext
- Other licensed adrenaline auto-injectors

Throughout this policy the term AAI will be used.

Allergy Action Plan

A document completed by a healthcare professional setting out a person's diagnosed allergy, symptoms and emergency treatment.

Individual Healthcare Plan (IHP)

A school document that outlines the arrangements required to support a pupil safely within school and during school activities.

The School will use the Department for Education Individual Healthcare Plan template and accompanying guidance.

Allergy Safety Culture

Sutton Valence School adopts a whole-school approach to allergy management.

The School will:

- Promote awareness and understanding of allergies.
- Encourage open communication regarding allergies and medical needs.
- Support pupils in developing age-appropriate independence and self-management skills.
- Promote inclusion and participation in school activities.
- Challenge allergy-related bullying or discriminatory behaviour.

The School recognises that allergies can affect emotional wellbeing and may increase anxiety. Appropriate pastoral support will be offered where required.

Bullying relating to allergies will be managed in accordance with the School's Anti-Bullying Policy.

Roles and Responsibilities

Governing Body

The Governing Body will nominate a governor with oversight of allergy management arrangements.

The governor will receive periodic updates from the Designated Allergy Leads regarding policy implementation, training, incidents and compliance with statutory guidance.

The Named Allergy Governor does not have operational responsibility for allergy management.

Designated Allergy Leads (DALs)

Prep School: James Watkins **-** Deputy Head and Designated Safeguarding Lead

Senior School: Lauren Austen - Assistant Head (Safeguarding) and Designated Safeguarding Lead

The DALs are responsible for:

- Leading implementation of this policy.
- Overseeing allergy management across the School.
- Acting as a point of contact for allergy-related concerns.
- Monitoring allergy records and healthcare plans.
- Ensuring appropriate communication of allergy information.
- Coordinating staff training.
- Ensuring annual anaphylaxis drills take place.
- Reviewing incidents and near misses.
- Monitoring the provision of spare AAIs.

School Nurses and Relevant Administrative Staff

School Nurses and relevant office staff are responsible for:

- Collecting and maintaining allergy information.
- Coordinating Individual Healthcare Plans and Allergy Action Plans.
- Maintaining records of prescribed and spare AAIs.
- Monitoring medication expiry dates.
- Supporting staff training.
- Liaising with parents regarding updates to medical information.

All Staff

All staff must:

- Read and follow this policy.
- Participate in required allergy training.
- Be aware of the allergies of pupils in their care.
- Consider allergy risks when planning activities.
- Know how to recognise allergic reactions and anaphylaxis.
- Know how to access emergency medication.
- Know how to summon assistance and emergency services.
- Promote inclusion and challenge allergy-related bullying.

Parents and Carers

Parents and carers must:

- Inform the School of diagnosed allergies and medical conditions.
- Provide accurate and up-to-date medical information.
- Supply prescribed medication when required.
- Ensure medication remains in date.
- Inform the School of any changes to their child's condition.
- Work collaboratively with the School regarding allergy management.

Pupils

Pupils are expected to:

- Follow agreed allergy management arrangements.
- Respect the allergies of others.
- Not share food where doing so may increase risk.
- Inform a member of staff if they feel unwell.
- Carry prescribed AAIs where agreed and developmentally appropriate.

Identification of Allergies

The School maintains a register of pupils with diagnosed allergies. Information may be gathered through:

- Admissions processes.
- Medical questionnaires.
- Information provided by parents and carers.
- Previous educational settings.
- Healthcare professionals.
- Allergy Action Plans.
- Individual Healthcare Plans.

Records will include:

- Known allergens.
- Severity and nature of allergy.
- Prescribed medication.
- Requirement for an Individual Healthcare Plan.
- Details of emergency treatment.

The School encourages staff to note significant allergies that may require consideration within emergency arrangements.

Visitors attending events, fixtures or activities are encouraged to notify the School of significant allergies where appropriate.

Individual Health Care Plans (IHPs)

The School will use the Department for Education Individual Healthcare Plan template. An Individual Healthcare Plan will normally be completed where a pupil:

- Has been prescribed an AAI.
- Has a history of anaphylaxis.
- Requires adjustments beyond ordinary school arrangements.
- Is considered by the School to be at increased risk because of their allergy.

The IHP may include:

- Personal details and photograph.
- Details of diagnosed allergies.
- Known allergens and triggers.
- Signs and symptoms.
- Prescribed medication.
- Emergency procedures.
- Educational visit arrangements.
- Boarding arrangements where applicable.
- Reasonable adjustments.
- Associated Allergy Action Plans and Asthma Action Plans.

IHPs will be reviewed:

- At least annually.
- Following any allergic reaction requiring medical intervention.
- Following any significant change in condition or treatment.
- During transition between school phases where appropriate.

Information Sharing and Confidentiality

The School recognises that allergy information is sensitive personal data and will be managed in accordance with UK GDPR and the School's Data Protection Policy.

Relevant allergy information will be shared with staff who require it to keep pupils safe and fulfil their responsibilities. This may include:

- Teaching staff.
- Pastoral staff.
- Catering staff.
- Sports staff.
- Boarding staff.
- Educational visit leaders.
- First aiders.

Where appropriate and proportionate, relevant allergy information may also be shared with contractors, external providers and visiting staff responsible for supervising pupils.

Information will be shared on a need-to-know basis and in a manner that respects pupils' dignity and privacy.

Minimising Allergy Risks

All staff planning activities must consider allergy risks. Allergy risks may arise during:

- Classroom activities.
- Science experiments.
- Art and design activities.
- Food preparation and cooking.
- Educational visits.
- Sporting activities.
- Boarding activities.
- Forest School.
- Cultural celebrations and events.
- Activities involving animals.

Suitable control measures and reasonable adjustments will be implemented wherever necessary.

Pupils with allergies will not be excluded unnecessarily from educational activities because of their medical condition unless the risk associated with the activity is deemed to make it unsuitable to attend.

Food and Catering

The School works closely with catering providers to minimise the risks associated with food allergies. The School will:

- Comply with all relevant food allergen legislation.
- Provide allergen information where required.
- Ensure catering staff receive appropriate training.
- Maintain systems for identifying pupils with food allergies and special dietary requirements.
- Communicate relevant information to those preparing or serving food.

The School is an allergy-aware environment.

While it is not possible to guarantee that any environment is completely allergen-free, the School will take reasonable steps to reduce the risk of accidental exposure. The School may restrict or discourage specific foods where risk assessment indicates that this is appropriate.

Parents, pupils and staff are expected to comply with allergen guidance issued by the School.

Food sharing may be restricted where doing so increases allergy risks.

Where celebratory food is permitted, it may be subject to additional requirements regarding packaging and ingredient information.

Food Hygiene

The School promotes good food hygiene practices.

Pupils will be encouraged to:

- Wash hands before eating.
- Wash hands after eating.
- Keep eating areas clean.
- Avoid sharing food.
- Dispose of food waste responsibly.

Boarding staff will implement appropriate arrangements to minimise allergen risks in shared kitchen and food preparation areas.

Educational Visits, Sporting Fixtures and Off-Site Activities

Pupils with allergies will be supported to participate fully and safely in educational visits and other off-site activities. Visit leaders must:

- Review allergy information.
- Review Individual Healthcare Plans where relevant.
- Consider allergy risks within risk assessments.
- Ensure emergency medication accompanies the pupil.
- Ensure appropriate supervision is available.

Notify external providers or schools of any pupil allergies and those with an IHP.

Pupils prescribed AAIs must have access to two prescribed AAIs throughout the activity.

Boarding Provision

Boarding houses will maintain suitable arrangements for:

- Safe food storage.
- Management of allergenic foods.
- Shared kitchen use.
- Access to emergency medication.
- Communication of allergy information to boarding staff.
- Appropriate supervision of pupils according to age and independence.

Boarding staff will receive relevant allergy awareness and emergency response training.

Animals and Environmental Allergens

The School recognises that allergies may arise from:

- Animal dander.
- Insect venom.
- Pollen.
- Mould.
- Other environmental triggers.

Where animals are brought onto site, appropriate risk assessments will be completed. Pupils with environmental allergies will be supported through reasonable adjustments where necessary.

The Estates Team will monitor and respond appropriately to identified insect nests and other environmental risks.

Adrenaline Auto-Injectors (AAIs)

Pupils prescribed AAIs must have rapid access to two in-date devices at all times.

The exact arrangements for carrying or storing prescribed AAIs will be determined according to age, maturity, risk and individual circumstances. These arrangements will be documented within the pupil's Individual Healthcare Plan.

AAIs must:

- Be readily accessible.
- Not be locked away.
- Be stored according to manufacturer guidance.
- Be protected from extremes of temperature.
- Be monitored regularly for expiry.

Used and expired AAIs will be disposed of safely in accordance with medical waste procedures.

Spare Adrenaline Auto-Injectors (AAIs)
The School maintains spare AAIs in accordance with current Department for Education guidance.

Spare AAIs:

- Are stored in clearly designated locations.
- Are stored in pairs.
- Are checked regularly.
- Are replaced prior to expiry.
- Are available for emergency use in accordance with national guidance.

The School aims to ensure that pupils are no more than five minutes from appropriate adrenaline devices wherever reasonably practicable, including during sporting activities, boarding activities and educational visits.

The locations of spare AAIs are maintained in operational procedures and reviewed regularly by the Designated Allergy Leads and School Nurses.

Responding to an Allergic Reactions and Anaphylaxis

See Appendix 1 on recognising and responding to an allergic reaction.

All allergic reactions must be treated seriously.

Where anaphylaxis is suspected:

- Administer adrenaline immediately.
- Call 999.
- Follow the individual's Allergy Action Plan where available.
- Keep the individual under constant supervision.
- Lie the individual flat with legs raised unless breathing difficulties dictate an alternative position.
- Administer a second AAI after five minutes if symptoms persist or worsen.
- Ensure transfer to hospital for medical assessment.

If in doubt, staff should administer adrenaline and seek emergency medical assistance immediately. Delaying adrenaline administration where anaphylaxis is suspected can increase risk.

Any member of staff may administer an AAI in an emergency.

Unacceptable Practice

The School will not:

- Exclude pupils from activities solely because they have an allergy.
- Delay administration of adrenaline where anaphylaxis is suspected.
- Leave a pupil experiencing a severe allergic reaction unattended.
- Prevent pupils from accessing prescribed medication.
- Require parents to attend School to administer emergency treatment.
- Expect pupils to manage risks beyond their age or developmental capability.

Training

All staff who are responsible for supervising pupils will receive annual allergy awareness and emergency response training.

Training will include:

- Understanding allergies and allergic conditions.
- Recognising allergic reactions and anaphylaxis.
- Administration of AAIs.
- Emergency procedures.
- Understanding Individual Healthcare Plans and Action Plans.
- The difference between allergy, intolerance and coeliac disease.
- Minimising exposure to allergens.

- Reporting incidents and near misses.
- Inclusion and wellbeing considerations.

Appropriate induction arrangements will be in place for:

- New staff.
- Agency staff.
- Supply staff.
- Regular volunteers.

The School will maintain records of completed training.

Supply staff, agency staff and visiting staff will be provided with relevant allergy information and emergency procedures before assuming responsibility for pupils.

The School will undertake at least one anaphylaxis drill each year.

Asthma

The School recognises the close relationship between asthma and severe allergic reactions.

Pupils with asthma should maintain good asthma control and have access to prescribed inhalers. Where asthma support is required, this will be documented through the appropriate healthcare planning process.

Emergency asthma inhalers are maintained in accordance with School procedures.

Reporting Allergic Reactions

The school will record all allergic reaction incidents and near-misses. Incidents are logged using the Evolve system in line with the school's reporting procedures.

Reported incidents are reviewed by relevant staff (e.g. DALs, named governor, school nurses, catering manager); investigated as appropriate, and discussed to identify any learning or required actions.

Where relevant, near-misses may also be recorded on CPOMS on the individual pupil's file where there is a safeguarding concern or where patterns of concern are identified.

Outcomes may include updates to risk assessments, Individual Healthcare Plans (IHPs), staff guidance, or procedures to reduce the risk of recurrence.

Monitoring and Review

This policy will be reviewed:

- Annually.
- Following changes to legislation or statutory guidance.
- Following a significant allergy-related incident or near miss.

The Governing Body will receive appropriate assurance regarding implementation of the policy and the effectiveness of allergy management arrangements.

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 prescribed or spare AAIs
- 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.

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

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

Responding to Anaphylaxis

SYMPTOMS OF ANAPHYLAXIS

A – Airway

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

B – Breathing

- Difficult or noisy breathing
- Wheeze or cough

C - Circulation

- Persistent dizziness
- Pale or floppy
- Sleepy
- Collapse or unconscious

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

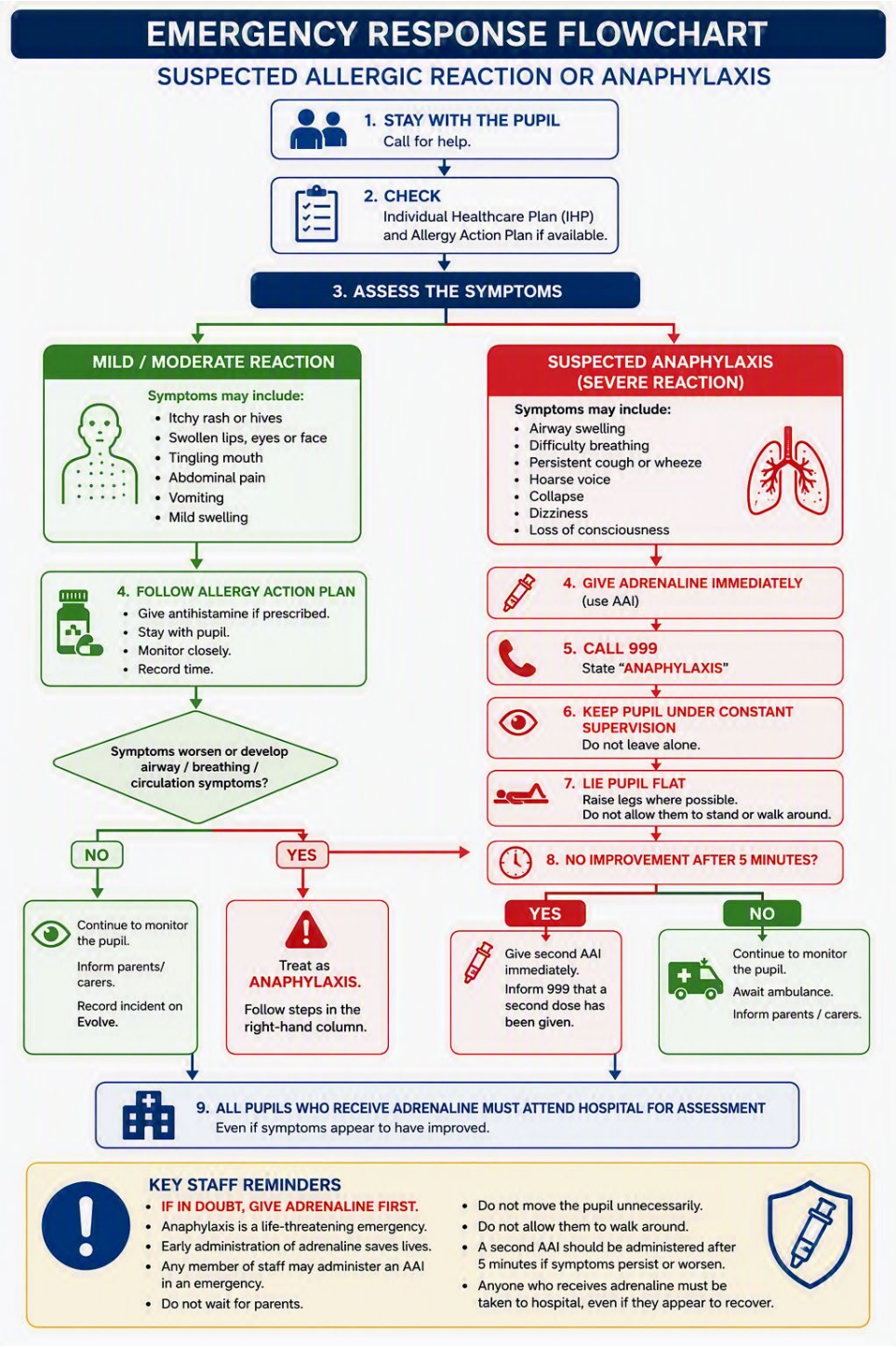
DELIVERING ADRENALINE

1. Take the medication to the patient, rather than moving them.
2. The patient should be lying down with legs raised. If they are having trouble breathing, they can sit with legs outstretched.
3. It is not necessary to remove clothing but make sure you're not injecting into thick seams, buttons, zips or even a mobile phone in a pocket.
4. Inject adrenaline into the upper outer thigh according to the manufacturer's instructions.
5. Make a note of the time you gave the first dose and call 999 (or get someone else to do this while you give adrenaline). Tell them you have given adrenaline for anaphylaxis.
6. Stay with the patient and do not let them get up or move, even if they are feeling better (this can cause cardiac arrest).
7. Call the pupil's emergency contact.
8. If their condition has not improved or symptoms have got worse, administer a second AAI after 5 minutes, using a second AAI. Call 999 again and tell them you have given a second dose and to check that help is on the way.
9. Start CPR if necessary.
10. Hand over used devices to paramedics and remember to get replacements.

For more information see the Government's **Guidance for the use of adrenaline auto-injectors in schools.**

Appendix 2

Emergency Response Flowchart: Suspected Allergic Reaction or Anaphylaxis



A copy of the School's Emergency Response Flowchart (Appendix 2) will be displayed alongside spare AAIs, in first aid locations, boarding houses, sports facilities and staff areas.