



Brentwood School

Allergy Awareness & Anaphylaxis Policy

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	Safeguarding Policy		

ALLERGY AWARENESS & ANAPHYLAXIS POLICY

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1. Introduction

Brentwood School is committed to providing a safe and healthy environment for all its employees, pupils, parents and visitors. The School attaches the highest priority to ensuring that all the operations within the school environment are delivered in a manner that is safe and healthy for all. This includes the management of allergies whilst at school or during any school related activity off-site to ensure that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential and feel safe in an inclusive learning environment.

2. Purpose

The purpose of this policy is to:

1. To reduce the risk of any pupil, parent, member of staff or visitor suffering a severe allergic reaction whilst at school or attending any school-related activity off-site.
2. To ensure staff are able to recognise and respond to severe allergic reactions should they arise.
3. To set out how Brentwood School will support pupils and staff with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

3. Definitions

What are Allergies?

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

What is anaphylaxis?

Anaphylaxis is a severe systemic allergic reaction which may be fatal. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes often include foods, insect stings, or drugs and in some cases there is no identifiable trigger. Anaphylaxis is characterised by rapidly developing life-threatening airway / breathing / circulatory problems usually associated with skin or mucosal changes.

Common UK Allergens

It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens. Common UK Allergens include: Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen, dust and Animal Dander.

4. Allergy awareness

In accordance with the approach advocated by The Anaphylaxis campaign and Allergy UK, Brentwood School cannot guarantee a blanket ban on any particular allergen as the School cannot guarantee a truly allergen free environment. For example, the school requires that foods containing nuts should not be brought into or consumed in the school, sold through any vending machine or provided in our catering provision; however, a risk remains with products or ingredients brought onto the school site that state that they 'may contain' nuts because they were manufactured in a facility where nuts are handled.

The School adopts an approach of continually working towards creating a culture of **allergy awareness** where the school community are aware of:

- what allergies are
- the importance of avoiding allergens (where there is a risk of allergic reaction) and how best to minimise risk of severe allergic reactions
- the signs of symptoms of severe allergic reactions
- the importance of acting quickly and knowing what to do in an emergency

In order to build a culture of allergy awareness, the school maintains a suitable training programme for staff (See section 6.) and teaches pupils' age appropriate allergy awareness through the wellbeing and PSHE curriculum.

5. Roles and Responsibilities

Allergy management requires a collective effort by **the whole school community**. Specific areas of responsibility are outlined as follows:

a. Staff Responsibilities

- To read and understand this policy and;
- Be able to recognise the range of signs and symptoms of an allergic reaction
- Understand the rapidity with which anaphylaxis can progress to a life threatening reaction, and that anaphylaxis may occur with prior mild symptoms
- Understand the need to administer adrenaline without delay as soon as anaphylaxis occurs, before the patient might reach a state of collapse (after which it may be too late for the adrenaline to be effective) and know how to administer adrenaline if the person displaying symptoms is unable to administer it themselves.
- Understand that adrenaline is administered via Adrenaline auto-injectors (AAI) such as an EpiPen or Jext or in some cases is administered by an adrenaline nasal spray such as Neffy. ***Emergency adrenaline of either type, will for the purposes of brevity be referred to as an AAI in this policy (as this is currently the most common method of administration).***

- To be aware of pupils in their care who have known allergies (since an allergic reaction could occur at any time) and can check on iSAMS if a pupil has allergies (or any medical needs).
- EYFS and KS1 staff are responsible for taking the prescribed AAI (kept in the classroom) along with the pupil for all sessions outside the classroom or immediate classroom vicinity.
- KS2 staff should ensure that pupils have collected (or arrived with) their prescribed AAI before going to forest school, cooking lessons, Science lessons, PE/Games/swimming, any other lessons where food products may be used (but not necessarily consumed) or activities that are more than 5 minutes away from the Medical room.
- Are aware of how/where to access emergency AAI's on the school campus.

In addition, all staff:

- Will complete an online training module and anaphylaxis training either on joining or as required. See section 6 further details.

b. The School Medical Team will:

- Check all notifications received through the enrollment process of medical requirements including allergies. Requirements will be processed, added onto iSAMS and the Catering team will be notified of pupils with food allergies. Where a pupil is diagnosed later on in the year the same information will be requested and processed in the same way.
- Will maintain a register of pupils who have been prescribed an AAI and a record of use of any AAI(s) and emergency treatment given.
- Ensure that Allergy Action Plans are in place and maintained as required and that for those pupils moving on to Senior from Prep appropriate changes are made to support the transition and expectations of independence.
- Will offer a point of contact or support should a member of staff have any questions about allergy management including how to administer an AAI.
- Will maintain the supply of onsite emergency AAI's (see section 9).
- The Prep School Medical Team will also maintain the appropriate storage and distribution of prescribed AAI's and will contact parents to replace pens when needed (see section 9).
- Will help to manage allergies such as hay fever in accordance with the School's administration of medicine protocol.

c. Parent responsibilities

- Parents must inform the school medical team of any pupil allergies on entry to the school. This information should include all previous severe allergic reactions, history of anaphylaxis and details of all prescribed medication.

- Parents are also responsible for informing the school if any allergies are diagnosed after the pupil has started the school.
- Parents are to supply a copy of their child's Allergy Action Plan ([BSACI plans](#) preferred) to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. school nurse/GP/allergy specialist.
- Parents are responsible for ensuring that any required medication supplied is in date, and replaced as necessary.
- Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.
- Parents of Prep School Pupils must ensure that an AAI is available to and from their journey to school.
- Snacks provided to pupils must not contain nuts. This includes any snacks that are consumed during the school day or that are consumed during after school activities or trips and visits.
- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.

d. Pupil Responsibilities

- All Pupils are encouraged to be aware of likely symptoms and to let an adult know as soon as they suspect they are having an allergic reaction.
- All pupils must not bring into school any foods containing nuts.
- All pupils should avoid sharing snacks.
- **Senior School Pupils**
 - are able to administer their own auto-injectors
 - must take responsibility for carrying **2 AAIs** on their person at all times, this includes their journey to and from school.
 - if in any doubt, should check with catering staff before purchasing food in the Tuck Shop or selecting their lunch choice.
- **Prep School Pupils**
 - KS2: pupils must collect their AAI from the Medical room before forest school, cooking lessons, Science, PE/Games/swimming or activities that are more than 5 minutes away from the Medical room.

e. Wraparound

- Staff escorting EYFS and KS1 pupils to wraparound must ensure that they bring along red medibags for pupils with prescribed pens.
- On arriving at wraparound, KS2 pupils will first be sent to the medical office to collect their medibag and are unable to eat until they do.
- A 'light tea' is provided at wraparound and any special dietary requirements are shared and cross checked with the caterer.

- The caterer provides allergen information on the dishes served. If there is however any doubt and the catering team is not available, the food in question is not given to the pupil.
- Pupils are not permitted to bring or consume their own snacks at wraparound.

f. Catering & Tuck Shop

- The school caterers are to comply with the Food Information Regulations 2014. These state that allergen information relating to the 'Top 14' allergens must be available for all food products.
- The school menu is to be available for parents and pupils to view in advance.
- At least one Allergy Champion will be available at every service in order to provide information on allergens when requested.
- The Catering team will receive from the School Medical Team notifications of specific dietary requirements (including allergens) via iSAMS to help manage provision of catering safely.
- The Catering team will then ask families for further information relating to all allergies, intolerances or faith related dietary requirements in order to make necessary adjustments or provision.
- Where a pupil's dietary needs are complex, parents/carers are encouraged to meet with the Catering Manager to discuss their child's needs.
- Senior School pupils will self identify to catering staff if they suffer from an allergy.
- Prep School pupils will wear a lanyard to indicate if they suffer from an allergy and the Catering team will work with the school's lunchtime staff to deliver a safe service.
- Tuck shop staff are to check there is no risk of allergic reaction before making a sale (For easy identification, Allergen information appears on the till system when a pupil presents their card).
- The Catering Team will ensure that Catering staff have received allergy training in accordance with company requirements and that key staff are aware of the school's allergy management policy.

g. Boarding

- Boarding Staff are to be aware of the medical needs of Boarders, including allergies and allergy action plans.
- All Boarders are discouraged from bringing into the house any food products containing nuts.
- Boarders with prescribed AAls will be prescribed an additional 3rd and 'spare' pen which is safely stored by Houseparents at the Boarding House.
- Where necessary a risk assessment is carried out by the House staff with the support of the Health & Safety Compliance Officer and the School Medical Team, in order to mitigate levels of risk and make necessary adjustments.

- Boarding Staff encourage and support Allergy awareness amongst the Boarding community and prioritise the provision of a safe home environment for all Boarders.

h. Food and Nutrition

- The department has a specific policy on allergy management and AAls which is followed within the department. A copy is available to pupils and parents on request.
- Departmental staff are trained to recognise the 14 most common allergens and the best practices to prevent cross contamination of these allergens.
- The use of Nuts and Sesames are strictly banned from being used within Food lessons.
- Recipe planning is carefully undertaken. Allergy risks are clearly identifiable in recipes used within the subject. These risks are documented, used by staff but are also available to pupils. Each recipe is adapted to be suitable for those with allergies and dietary restrictions.
- Working with the SAN and parents/guardians, the department also collects and maintains information on pupils with allergies and dietary requirements as and when they join the school. Pupils are not permitted to cook within the food room until we have all of this information.
- Pupils who do need an AAI, must carry this with them into a Food lesson at all times. If the student is participating in a practical, they will need to place their AAI in a clear box on the teachers desk as blazers are not worn during a practical.

i. Science Departments

- Food items can be used in science classrooms and in order to manage any risks associated with potential allergens, risk assessments are carried out for the use of food in practical work and mitigations are applied as required on a class by class basis.
- Medical Registers are linked to risk assessments to ensure that food items are either removed or that suitable alternatives are provided accordingly.
- Procedures are regularly reviewed.

j. Events and visits

All school events including, but not limited to; Charity/fundraising, fetes, performances, open days and visits that have a catering provision or involve the distribution or sale of food must operate in accordance with this policy and;

- Food containing nuts must be avoided, this includes pre packed or homemade foods.
- If there is a catering provision at the Event or visit and the attendee list is external, it is imperative that steps should be taken to request allergen information so that this can be provided to the catering team. Information requested should include information on food intolerance or special dietary requirements.

k. Exams

Part of the preparation for exams will include communicating with families and staff to ensure that pupils with allergies are prepared, and are reminded of the following:

- Exams staff are aware of which children have allergies and which in particular carry AAI's.
- The closest location of emergency AAI's is known by staff (see section 9).
- If there are any concerns regarding a pupil who may have complex medical requirements then the Exams office should contact the SAN in advance for support.
- On entering the exam room, all prescribed emergency medication **MUST** be handed to the Exam staff present so that this can be held at the front of the room in a designated box. Medication must be clearly labelled with the name of the pupil.

l. Trips & Visits, including CCF and sporting fixtures (offsite)

- Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication or will hold medication for pupils in the Prep School. Pupils unable to produce their required medication may not be able to attend the excursion. AAI pens must include a copy of the Allergy Action plan.
- All activities on the school trip are to be risk assessed in advance where possible to see if they pose a threat to pupils with severe allergies and alternative activities planned to ensure inclusion. Trip leaders may also need to conduct dynamic risk assessments whilst on the trip itself, to mitigate the risk of threat.
- All trips or visits for the EYFS must include a member of staff that has been suitably trained in first aid (paediatric first aid).
- For all other year groups, the need for a first aid trained staff member (also suitably trained in how to administer an AAI) should be assessed. Where a first aid trained staff member is not deemed as necessary, an 'appointed person' should instead take on responsibilities related to the provision of first aid (including the administration of emergency medication).
- Staff leading overnight school trips are to ensure that food requirements for pupils with allergies are considered at all stages of the trip. Where necessary, the Trip Leader will discuss food requirements with the pupil or parent (where the pupil is under 16) and jointly decide upon an appropriate plan for the pupil's meals (if the trip involves meals offsite).
- Trips requiring packed lunches or snacks to be brought from home will be subject to the same restrictions as school and any food items containing nuts will not be allowed.
- The Prep school has x2 school trip back up anaphylaxis kits and the PE department have x2 anaphylaxis kits for away fixtures. This helps to mitigate where families can only access a limited number of AAI pens from their GP.

Please also refer to the Trips & Visits Policy.

m. PE, Games & Swimming (onsite, including activities during lunch and outside of school hours)

- Staff should ensure that before participating in a PE, Games or swimming session, pupils have their emergency medication to hand. For EYFS and KS1 pupils, staff will be directly responsible for this.
- All snacks provided to pupils by the school must not contain nuts.
- When hosting sporting events or fixtures that the school is catering for, any special dietary requirements of the visiting school(s) must be sought and shared with the catering team.
- Staff are trained in accordance with requirements set out in section 6.

6. Training

A key part of our collective effort towards the management of allergies and mitigation of risk associated with severe allergic reactions is to maintain a suitable programme of training across the school. It is also important to remember that in an emergency medical situation all staff are expected to take appropriate action. In order to support this the following Training Programme will be delivered across the school and will be reviewed and updated as required: The training programme will be coordinated and monitored by the School compliance team.

Training method	All staff	Designated staff in high risk areas*
A Informal briefing session delivered at INSET (annually)	✓	
B Read and understand the School Policy on Allergy Management	✓	
C Complete the online iHASCO module every 3 years - 'Schools: Children with Allergies/Anaphylaxis'	✓	
<p>D Practical training on administering AAls This will depend on the level of risk/need associated with the role and the most suitable option from the following will be made available: either</p> <ul style="list-style-type: none"> - A short informal session with the School Medical team (using trainer device) - The 3 day course on First Aid (which includes Anaphylaxis) (qualification) - The 1 day course on Anaphylaxis (qualification) 		✓

***Designated staff in high risk areas (where allergy awareness is a higher priority) will complete all of the training methods listed in the table above as part of the schools strategy to help mitigate the risk of anaphylaxis. This will include the following staff:**

- Teachers/Form Tutors/Hoy/HoD – with pupils that have an allergy management plan and severe allergies
- Boarding House staff
- Lunch time – Midday Assistants
- Sports/PE/Fixtures – First Aid Trained staff
- School trips or visits – EVCs and trip leaders (as required and based on risk assessment)
- Sports Centre Duty Managers
- Food Technology – Teachers and Technicians
- CCF staff (based on risk assessment)
- Events – Event Coordinators
- Wraparound staff

In addition to this list of designated staff, all staff can make a request for further training (item D) if they feel they would like to further support the school's efforts. Any requests for further training should be made to the training coordinator.

7. Allergy Action Plans

These are reviewed once a year and updated every time a pupil's needs change.

Allergy action plans are designed to function as Individual Healthcare Plans for children with allergies, providing medical and parental consent for schools to administer medicines in the event of an allergic reaction, including consent to administer a spare adrenaline auto-injector.

Brentwood School recommends using the British Society of Allergy and Clinical Immunology ([BSACI Allergy Action Plan](#)) to ensure continuity. This is a national plan that has been agreed by the BSACI, the Anaphylaxis Campaign and Allergy UK.

It is the parent/carer's responsibility to complete the allergy action plan with help from a healthcare professional (e.g. GP/School Nurse/Allergy Specialist) and provide this to the school.

8. Emergency Treatment and Management of Anaphylaxis

What to look for?

A person who is having a **severe allergic reaction** could exhibit some or all of the following symptoms:

Mild/Moderate:

- May be clingy and frightened, complaining of feeling unwell
- Sneezing and coughing
- Nausea, vomiting, stomach ache
- Blotchy or generalised rash, which may be itchy
- Flushed face and neck
- Strange metallic taste in mouth

Severe:

- Swallowing difficulties
- Swelling of the throat, mouth or lips
- Unable to talk
- Difficulty in breathing, blue colour to lips
- Pale looking and clammy
- Collapse and unconsciousness

Anaphylaxis is likely if all of the following 3 things happen:

- **sudden onset** (a reaction can start within minutes) **and rapid progression of symptoms**
- **life threatening airway and/or breathing difficulties** and/or **circulation problems** (e.g. alteration in heart rate, sudden drop in blood pressure, feeling of weakness)
- **changes to the skin** e.g. flushing, urticaria (an itchy, red, swollen skin eruption showing markings like nettle rash or hives), angioedema (swelling or puffing of the deeper layers of skin and/or soft tissues, often lips, mouth, face etc.) Note: skin changes on their own are not a sign of an anaphylactic reaction, and in some cases don't occur at all

If the pupil has been **exposed to something they are known to be allergic to**, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. **Adrenaline** is the mainstay of treatment and it starts to work within seconds. Adrenaline should be administered by an **injection into the muscle** (intramuscular injection)

What does adrenaline do?

- It opens up the airways by reducing swelling
- It raises the blood pressure

Adrenaline must be administered with the **minimum of delay** as it is more effective in preventing an allergic reaction from progressing to anaphylaxis than in reversing it once the symptoms have become severe.

Permission to administer an AAI in an emergency

Written parental permission for staff to administer either the prescribed pen or a spare pen is included in the pupil's Allergy Action Plan. Consent is also requested for all pupils via the Pupil Health questionnaire where permission is sought for the use of emergency medication. A copy of this is held with the School Medical team and in an emergency will not need to be checked before administering an AAI.

If anaphylaxis is suspected **in an undiagnosed individual** (who would not have a prescribed AAI) call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

ACTION:

- Stay with the child/individual and call for help. **DO NOT MOVE THEM OR LEAVE THEM UNATTENDED**
- Remove trigger if possible (e.g. Insect stinger)
- To help administer the AAI lie the child/individual flat (with or without legs elevated). If by doing so breathing becomes more difficult then move to a sitting position
- **USE ADRENALINE WITHOUT DELAY** and note time given. (inject at upper, outer thigh through clothing if necessary) **REMEMBER – 'IF IN DOUBT, GIVE'**
- CALL **999** and state **ANAPHYLAXIS**
- If no improvement after 5 minutes, administer second adrenaline auto-injector
- If no signs of life commence CPR
- Phone parent/carer as soon as possible

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

9. Supply, storage and care of medication

Prep School

For pupils in Prep prescribed AAls are stored as follows:

EYFS/KS1 – AAls are kept in the pupils' classroom.

KS2 – AAls are kept in the medical room.

In both cases, the anaphylaxis kit is stored safely, not locked away so it is accessible to all staff. The kit will be stored in a red bag with the pupil name clearly marked, a photo and allergy action plan included.

AAls should be stored at room temperature, protected from direct sunlight and temperature extremes.

The Prep School Medical team is responsible for checking that the AAls held in classrooms or the Medical room are within the expiry date. These checks are carried out on a monthly basis and where needed parents will be contacted to arrange replacement in good time.

Senior School

From Y7 pupils will be expected to assume complete responsibility for their emergency kit under the responsibility of their parents. They will need to carry their own **two** adrenaline injectors on them at all times. It is the responsibility of the pupil's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled.

Symptoms of anaphylaxis can come on very suddenly, so school staff need to be prepared to administer medication if the young person cannot.

Medication should be stored in a rigid box and clearly labelled with the pupil's name and a photograph.

The pupil's medication storage box should contain:

- adrenaline injectors i.e. EpiPen® or Jext® (two of the same type being prescribed)
- an up-to-date allergy action plan
- antihistamine as tablets or syrup (if included on plan)
- spoon if required
- asthma inhaler (if included on plan).

Parents are encouraged to subscribe to an externally provided expiry alert service for the relevant adrenaline auto-injectors their child is prescribed, to make sure they can get replacement devices in good time.

Disposal

AAls are single use only and must be disposed of as sharps. Used AAls can be given to ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin.

'Spare' Adrenaline Auto Injectors in the school

Brentwood School has purchased spare generic adrenaline auto-injector (AAI) devices for emergency use in children who are at risk of anaphylaxis. These can be used in an emergency situation where the pupil's own device(s) are not available, not working or are unusable (expired).

Spare AAIs are stored in a rigid plastic box and are clearly labelled 'Emergency Anaphylaxis Adrenaline Pen'. They are kept safely, not locked away and are accessible to all staff in the following locations:

Prep School

Medical Room Higgs Building
Higgs Building (Ground floor)
Foundation Office
North Building – 2nd floor (Food tech)
North Building – Main Reception
Dining Hall
PE Dept (South Prep)

Senior School

Dining Hall
Sanatorium
Heseltines – Staff changing room
Headmasters Reception
Food & Nutrition Department
Courage Hall Staff room
Benugo Cafe (Boarding House)

10. Risk Assessment

Brentwood School will conduct a detailed risk assessment on a biennial basis (or sooner if required) to help identify any gaps in our systems and processes for keeping safe staff and pupils with allergies, including new joining staff and pupils and those newly diagnosed.

11. Useful Links

Anaphylaxis Campaign	https://www.anaphylaxis.org.uk
AllergyWise training for schools	https://www.anaphylaxis.org.uk/information-training/allergywise-training/for-schools/

AllergyWise training for Healthcare Professionals	https://www.anaphylaxis.org.uk/information-training/allergywise-training/for-healthcare-professionals/
Allergy UK	https://www.allergyuk.org
Spare Pens in Schools	http://www.sparepensinschools.uk
Official guidance relating to supporting pupils with medical needs in schools:	http://medicalconditionsatschool.org.uk/documents/Legal-Situation-in-Schools.pdf
Education for Health	http://www.educationforhealth.org
Food allergy quality standards (The National Institute for Health and Care Excellence, March 2016)	https://www.nice.org.uk/guidance/qs118
Anaphylaxis: assessment and referral after emergency treatment (The National Institute for Health and Care Excellence, 2020)	https://www.nice.org.uk/guidance/cg134?unlid=22904150420167115834
Guidance on the use of adrenaline auto-injectors in schools (Department of Health, 2017)	https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf