LEIGHTON PARK
FOUNDED 1890

Allergy and Anaphylaxis Policy 2026-27

1. Statement of Intent

Leighton Park School is committed to providing a safe, inclusive, and supportive environment for all students, including those with allergies and at risk of anaphylaxis.

The school recognises that anaphylaxis is a potentially life-threatening condition requiring immediate recognition and rapid intervention. This policy sets out a whole-school approach to minimise risk, ensure preparedness, and deliver an effective emergency response.

The school's intent is to:

- Prevent exposure to known allergens where reasonably practicable
- Ensure all students with allergies are supported through personalised care planning
- Equip all staff with the knowledge, skills, and confidence to respond effectively
- Promote a culture of vigilance, inclusion, and shared responsibility
- Ensure that adrenaline is administered without delay in an emergency

This policy reflects current best practice and aligns with evolving national guidance for the management of anaphylaxis in educational settings.

2. Scope

This policy applies to:

- All students (including day and boarding students)
- All staff (teaching, support, pastoral, catering, estates, temporary and agency staff)
- Volunteers, visitors, and external providers operating on site
- All school activities, including:
    - On-site learning and Co-Curricular activities
    - Boarding provision
    - School trips, visits, and sports fixtures
    - Off-site or residential activities

The policy covers:

- Prevention and management of allergic reactions
- Emergency response to suspected anaphylaxis
- Storage, access, and use of adrenaline auto-injectors
- Training, communication, and governance arrangements

3. Policy Structure

This document sets out the school's overarching approach to supporting students with allergies and anaphylaxis. Detailed operational procedures and clinical guidance are provided in supporting policies, protocols, and appendices, including:

- Administration of Medication Policy
- First Aid Policy
- Medical Conditions Policy

All staff are expected to be familiar with both this policy and the relevant supporting procedures applicable to their role.

4. Governance, Oversight and Accountability

The school maintains robust governance arrangements to ensure effective implementation and continuous improvement.

Governance Structure

- The Designated Allergy Lead has operational oversight
- The Senior Leadership Team (SLT) provides strategic oversight
- The Health and Safety Committee reviews policy implementation and risk

5. What is an Allergy?

An allergy is an immune system response to a substance that is typically harmless to most people. Instead of ignoring the substance, the body reacts by releasing histamine, which triggers symptoms of an allergic reaction.

While many allergic reactions are mild and result in minor discomfort, some can be severe and lead to anaphylaxis—a potentially life-threatening medical emergency requiring immediate intervention.

Although individuals can develop allergies to a wide range of substances, the most common triggers for serious allergic reactions include certain foods, insect stings (such as from bees or wasps), latex, and medications.

6. Definitions

ANAPHYLAXIS: Anaphylaxis is a severe and potentially life-threatening allergic reaction that requires immediate medical attention and should always be treated as a medical emergency.

ALLERGEN**:** An allergen is a substance that is typically harmless to most people but can trigger an allergic reaction in others. Individuals can be allergic to a wide range of substances, though the most common allergens include certain foods, medications, Animal dander (skin flakes from animals with fur or feathers) and pollen.

Less commonly, allergens may include latex and insect stings, such as those from bees or wasps.

Most severe food-related allergic reactions are caused by just nine key foods: eggs, milk, peanuts, tree nuts (e.g. hazelnuts, cashews, pistachios, almonds, walnuts, pecans, Brazil nuts, macadamia nuts), sesame, fish, shellfish, soya, and wheat.

In the UK, fourteen allergens are legally required to be clearly identified on pre-packed food labels. These are:

- Celery
- Cereals containing gluten.

- Crustaceans
- Eggs
- Fish
- Lupin
- Milk
- Molluscs
- Mustard
- Peanuts
- Tree nuts
- Soya
- Sulphites (or sulphur dioxide)
- Sesame

ADRENALINE AUTO-INJECTOR: Adrenaline pens are single-use devices that deliver a pre-measured dose of adrenaline to treat anaphylaxis. They are designed to be injected into the upper, outer thigh muscle, providing rapid relief during a severe allergic reaction.

These devices are commonly referred to as Adrenaline Auto-Injectors (AAIs), adrenaline pens, or by their brand names—EpiPen, Jext, and Emerade. While all three are licensed for use in the UK, Emerade is currently unavailable due to a product recall related to misfiring incidents.

For consistency throughout this policy, all such devices will be referred to as Adrenaline Pens.

ALLERGY ACTION PLAN**:** An Allergy Action Plan is a personalised medical document completed by a qualified healthcare professional. It outlines an individual's specific allergies and provides clear guidance on how to manage them, including steps to take in the event of an allergic reaction.

INDIVIDUAL HEALTHCARE PLAN**:** An Individual Healthcare Plan is a detailed document that outlines a student's medical condition, history, treatment requirements, associated risks, and emergency action plan. It should be developed collaboratively by the school, parents, or carers, and, where appropriate, the student themselves.

All students with a diagnosed allergy must have a health care plan in place. This plan should be read alongside their Allergy Action Plan where possible to ensure a comprehensive understanding of their needs and the appropriate response in case of an allergic reaction.

RISK ASSESSMENT**:** This is a structured document that identifies potential hazards associated with a specific activity and outlines the measures taken to reduce or eliminate those risks. Allergy-related risks must be considered and included in all risk assessments, whether the activity takes place on or off the school site, to ensure appropriate safeguards are in place for students with allergies.

SPARE PENS**:** Since 2017, schools have been permitted to purchase spare adrenaline pens for emergency use. These devices serve as a backup in situations where a student's prescribed adrenaline pen is unavailable or has malfunctioned. They may also be used to treat individuals experiencing anaphylaxis who do not have a prescribed adrenaline pen.

7. Roles and Responsibilities

Leighton Park School takes a whole-school approach to allergy management.

7.1 DESIGNATED ALLERGY LEAD (DAL)

The Designated Allergy Lead is Sally Saunders, Senior Assistant Head: Community and Wellness.

The lead Governor is TBC

They report into the Headteacher. They are responsible for:

- Ensuring the safety, inclusion, and wellbeing of students with allergy.
- Taking decisions on allergy management across the school
- Championing and practising allergy awareness across the school
- Being the overarching point of contact for staff, students and parents with concerns or questions about allergy management
- Ensuring allergy information is recorded, up-to-date and communicated to all staff (although they have ultimate responsibility, the collation of information may be delegated to another member of staff, for example the school nurse or administrator)
- Making sure all staff are appropriately trained, have good allergy awareness and realise their role in allergy management (including what activities need an allergy risk assessment)
- Ensuring staff, students and parents have a good awareness of the school's Allergy and Anaphylaxis Policy, and other related procedures.
- Reviewing the stock of the school's spare adrenaline pens (check the school has enough and the locations are correct) and ensuring staff know where they are.
- Keep a record of any allergic reactions or near-misses and ensure an investigation is held as to the cause and put in place any learnings.
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy
- Ensuring there is an Anaphylaxis Drill once a year as a minimum.

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

7.2 SCHOOL MEDICAL TEAM (HEALTH CENTRE)

The Director of Medical Services is responsible for:

- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Health Care Plans) and information from families (this is likely to involve consulting with the Admissions Team for new joiners)
- Disseminating to all school staff, including the Catering Team, occasional staff and staff running clubs

- Ensuring the information from families is up-to-date, and reviewed annually (at a minimum)
- Coordinating medication with families. Whilst it is the parents and carers responsibility to ensure medication is up to date, the nursing team should also have systems in place to check this and notify the parents when they see the expiry date is approaching.
- Keeping an adrenaline pen register to include Adrenaline Pens prescribed to students and Spare Pens, including brand, dose, and expiry date. The location of Spare Pens should also be documented.
- Regularly checking spare pens are where they should be, and that they are in date (at a minimum of monthly)
- Replacing the spare pens when necessary
- Providing on-site adrenaline pen training for other members of staff and students and refresher training as required e.g. before school trips.

7.3 ADMISSIONS TEAM

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

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity (this should be in place before a school visit, an Open Day, or Taster Days if food is offered or likely to be eaten)
- There is a clear structure in place to communicate this information to the relevant parties (i.e. school nursing team, catering team)
- Visitors (for example at Open Days and events) are aware of the catering set up and if food is to be offered and plans for medication if the child is to be left without parental supervision. At Leighton Park students always carry their emergency medication with them. For younger students visiting this will be kept with their teacher or if no teacher presents our school staff will carry it for them.

7.4 ALL STAFF

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

- Championing and practising allergy awareness across the school
- Understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed
- Being aware of students with allergies and what they are allergic to
- Considering the risk to students with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate.
- Ensuring students always have access to their medication and are encouraged to always carry it on their person.
- Being able to recognise and respond to an allergic reaction, including anaphylaxis.

- Taking part in training and anaphylaxis drills as required (at least once a year) and to tell a manager if you have not received any in the last 12 months.
- Considering the safety, inclusion, and wellbeing of students with allergies always
- Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy.

7.5 ALL PARENTS

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

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

7.6 PARENTS OF CHILDREN WITH ALLERGIES

In addition to point 4.5, the parents and carers of children with allergies should:

- Collaborate with the school to fill out an Individual Health Care Plan and provide an accompanying Allergy Action Plan
- If applicable, provide the student with two labelled adrenaline pens and any other emergency medication, for example antihistamine (with a dispenser, i.e. spoon or syringe), inhalers or creams.
- Ensure medication is in-date and replaced at the appropriate time.
- Update school with any changes to their child's condition and ensure the relevant paperwork is updated too.
- Provide the school with an up-to-date photograph of their child when they join and sign the care plan for it to be shared appropriately as part of their allergy management.
- Support their child to understand their allergy diagnosis and to advocate for themselves and to take reasonable steps to reduce the risk of an allergic reaction occurring e.g. not eating the food to which they are allergic.

7.7 ALL STUDENTS

All students at the school should:

- Be allergy aware.
- Understand the risks allergens might pose to their peers.
- Learn how they can support their peers and be alert to allergy-related bullying.

- Older students will learn how to recognise and respond to an allergic reaction and to support their peers and staff in case of an emergency.
- If students are likely to be buying or bringing in food from home, they should check with their teacher or the Health Centre for guidance on this first.

7.8 STUDENTS WITH ALLERGIES

In addition to point 4.7, students with allergies are responsible for:

- Knowing what their allergies are and how to mitigate personal risk.
- Avoiding their allergen as best as they can
- Understand that they should notify a member of staff if they are not feeling well or suspect they might be having an allergic reaction.
- Always carry two adrenaline auto-injectors with them. They must only use them for their intended purpose.
- Understand how and when to use their adrenaline auto-injector.
- Talking to the Designated Allergy Lead or a member of staff if they are concerned by any school processes or systems related to their allergy.
- Raising concerns with a member of staff if they experience any inappropriate behaviour in relation to their allergies.
- Students permitted to leave the school site (such as boarding students at a weekend or evening) should know what to do if they have an allergic reaction off school premises. This should include how to treat themselves and raise the alarm to get help.

8. Information and Documentation

8.1 REGISTER OF STUDENTS WITH AN ALLERGY

The school has a register of students who have a diagnosed allergy which is stored on the staff portal under the medical Folder. This includes children who have a history of anaphylaxis or have been prescribed adrenaline pens, as well as students with an allergy where no adrenaline pens have been prescribed.

8.2 Each student with a diagnosed allergy has an Individual Health Care Plan. The information on this plan includes:

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

9. Assessing Risk

Allergens can appear in unexpected places, so it is essential that all staff—including visiting staff—consider allergy risks during activity planning and include them in

relevant risk assessments. Examples of activities where allergens may be present include:

- Classroom activities: such as crafts using food packaging, science experiments involving allergenic substances, or food technology and cooking lessons.
- Animal interactions: bringing animals into school, such as dogs or hatching chicks, may pose allergy risks.
- Clubs and extracurricular activities: where snacks or food treats are distributed. Safe food options must be provided, or non-food alternatives considered to ensure inclusion.
- Special events: including cultural celebrations, themed days, or school-wide gatherings where food or materials may contain allergens.
- Student inclusion must be prioritised alongside safety. Students with allergies should not be excluded from activities; instead, activities should be adapted where necessary to ensure their participation in a safe and supportive environment.

10. Food, including Mealtimes and Snacks

10.1 CATERING IN SCHOOL

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

- Due diligence is conducted regarding allergen management when appointing catering staff.
- All catering staff and other staff preparing food will receive relevant and appropriate allergen awareness training.
- Anyone preparing food for students with allergies will follow good hygiene practices, food safety, and allergen management procedures.
- The catering team will endeavour to get to know the students with allergies and what their allergies are supported by all school staff.
- The school has robust procedures in place to identify students with food allergies; these include a visual check from a member of staff familiar with the students who have allergies. Photos of students with allergies are also available. Students should present to a food champion at the Oakview food counter so they can be provided with an appropriate allergen-free meal.
- Food containing the main fourteen allergens (see Allergens definition) will be clearly identified for students, staff, and visitors to see. Other ingredient information will be available on request.
- Food packaged to go will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging.
- Where changes are made to the ingredients this will be communicated to students with dietary needs by the Catering Team and/or Health Centre.
- Products with Precautionary Allergen Labelling (PAL) or "may contain" labelling will be treated as containing the allergen for the purposes of allergy

management These products will not be provided to students with known allergies to the allergen.
- For avoidance of doubt our catering department Oakview do not use nuts as an ingredient in their food.
- For any cake bake sales or sale of food on site, this is overseen by a member of staff who has the list of students with known allergies and all ingredients are clearly labelled.

10.2 FOOD BROUGHT INTO SCHOOL

Leighton Park School is committed to ensuring the safety and inclusion of all students, particularly those with food allergies. Food brought into school—whether by students, staff, parents, or visitors—must be managed carefully to minimise the risk of allergic reactions.

10.2.1 GENERAL PRINCIPLES

- All food brought into school must have clear ingredient labelling, especially for pre-packed items.
- Precautionary Allergen Labelling (PAL) (e.g. "may contain") will be treated as if the allergen is present. Such items must not be given to students with relevant allergies.
- Staff must be aware of students' allergies and follow Individual Health Care Plans and Allergy Action Plans when planning or supervising food-related activities.
- Where possible, non-food alternatives are encouraged to celebrate birthdays inclusively.
- Students must not share food brought from home.
- Staff supervising snacks must be trained in allergen awareness and know which students have allergies.
- All food served or sold at school events must be clearly labelled with allergen information.
- Homemade items must include a written list of ingredients.
- Organisers must ensure allergy-safe options are available and avoid high-risk allergens (e.g. nuts, sesame).
- Communication about food safety must be included in event planning and publicity.

10.2.2 BOARDING HOUSES

- Food brought into boarding houses by students or families must be checked by staff before being stored or consumed.
- Boarding staff must maintain a list of students with allergies and ensure safe food storage practices.
- Communal snacks or treats must be labelled and approved before distribution.
- Homemade or shop-bought cakes must be accompanied by a full list of ingredients.

- Cakes containing nuts, peanuts, sesame, or other high-risk allergens must not be brought into the boarding house.

10.2.3 SCHOOL TRIPS AND SPORTS FIXTURES

- Risk assessments for all off-site activities must include allergy considerations.
- Staff must carry emergency medication, including adrenaline pens, and be trained in their use.
- Packed lunches and snacks must be checked for allergens, and students with allergies must be provided with safe alternatives.

10.2.4 STAFF RESPONSABILITIES

- All staff involved in food handling or supervision must complete allergy awareness training.
- Staff must be familiar with students' Health Care Plans and know how to respond to allergic reactions.
- The Director of Medical Services and Designated Allergy Lead (DAL) will oversee compliance with this policy and provide support as needed.

10.3 FOOD BANS OR RESTRICTIONS

Whilst we try to reduce the risk of allergens on site where possible, it is impossible to enforce and can lead to a sense of complacency or false sense of security. We regularly remind everyone to be allergy aware and to remain vigilant.

- This school is an Allergen Aware school. We have students with a wide range of allergies to different foods, so we encourage a considered approach to bringing in food.
- We try to restrict nuts as much as possible on the site and check all foods coming into the kitchen.
- All food coming onto school premises or taken on a school trip or to a match should be checked to ensure nuts are not an ingredient in another product. Common foods that contain these goods as an ingredient include packaged nuts, cereal bars, chocolate bars, nut butters, chocolate spread, and sauces.

10.4 FOOD HYGIENE FOR STUDENTS

- Students will wash their hands before and after eating.
- Sharing, swapping, or throwing food is not allowed.
- Water bottles and packed lunches should be clearly labelled.
- Our boarding houses have access to food prep areas for the students, so we aim to raise awareness with these students on allergies within the boarding house, checking ingredients, as well as limiting cross contamination (cleaning up after themselves) and encouraging safe storage of foods. Equipment used should be clean and washed in the dishwasher afterwards. For students with allergies or if they are concerned about cross contamination, they can have access to their own separate utensils.

11. School Trips and Sports Fixtures

- Staff leading the trip will have a register of students with allergies with medication details.

- Allergies will be considered on the risk assessment and catering provision put in place.
- Consult with the parents if the trip requires an overnight stay.
- Staff (and some students, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction (such as in the case of Duke of Edinburgh expeditions (DofE)
- Allergens will be clearly labelled on catered packed lunches.
- A spare autoinjector will be provided to staff for emergency use.
- Refresher allergies and anaphylaxis training will be offered by the Health Centre to staff before any trip takes place.
- If attending Match Tea at another school, details of their dietary requirements will be sent ahead to ensure they have a safe meal.
- See Adrenaline Pens section for School Trips and Sports Fixtures

12. Insect Stings

Students with a known insect venom allergy should:

- Avoid walking around in bare feet or sandals when outside and when possible, keep arms and legs covered.
- Avoid wearing strong perfumes or cosmetics.
- Keep food and drink covered.

The school Estates Manager will monitor the grounds for wasp or bee nests. Students (with or without allergies) should notify a member of staff if they find a wasp or bee nest in the school grounds and avoid them.

13. Animals

It is normally the dander that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

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

14. ALLERGIC RHINITIS/ HAYFEVER

Leighton Park School recognises the impact that seasonal pollen allergies (Hayfever) and persistent nasal allergies (such as those caused by house dust mites or other environmental allergens) can have on student wellbeing, concentration, and

participation in school life. The following measures are in place to support affected students:

14.1 Seasonal Pollen Allergy (Hayfever)

- Keep classroom windows closed during peak pollen times to reduce exposure.
- Encourage students to wear sunglasses outdoors to minimise eye irritation.
- Promote regular hand and face washing after being outdoors to remove pollen particles.
- Encourage parents to give a daily antihistamine at home and/or nasal spray or eye drops as required.
- Should a student forget their medication and be struggling with symptoms, the student can visit the Health Centre for assessment and treatment.
- All medications are securely stored, and staff are trained in their administration.
- Collaborate with parents/carers to ensure consistency between home and school.

14.2 Persistent Nasal Allergy (e.g. House Dust Mites)

- Minimise the use of soft furnishings (e.g. carpets, curtains, cushions) in classrooms.
- Use dust-mite-proof covers on mattresses and pillows in boarding houses if a student is struggling with their symptoms.
- Clean classrooms regularly using high-filtration vacuum cleaners and damp dusting techniques.
- Maintain good ventilation and avoid cluttered storage areas that trap dust.
- Encourage parents to give a daily antihistamine at home and/or nasal spray or eye drops as required.
- Should a student forget their medication and be struggling with symptoms, the student can visit the Health Centre for assessment and treatment.
- All medications are securely stored, and staff are trained in their administration.
- Collaborate with parents/carers to ensure consistency between home and school.

15. INCLUSION AND MENTAL HEALTH

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

- No child with allergies should be excluded from taking part in a school activity, whether on the school premises or a school trip.

- Students with allergies may require additional pastoral support including regular check-ins from their Tutor/ House Staff etc.
- Affected students will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives.
- Bullying related to allergy will be treated in line with the school's anti-bullying policy.

16. ADRENALINE PENS

16.1 STORAGE OF ADRENALINE PENS

- Students prescribed with adrenaline pens will have easy access to two, in-date pens always. They should always carry them with them.
- Spot checks will be made to ensure adrenaline pens are with the student and in date.
- Adrenaline pens must not be kept locked away.
- Adrenaline pens should be stored at moderate temperatures (see manufacturer's guidelines), not in direct sunlight or above a heat source (for example a radiator)
- Used or out of date pens will be disposed of as sharps.

16.2 SPARE PENS

This school has seven spare adrenaline pens in emergency response kits (orange labelled box) to be used in accordance with government guidance.

The adrenaline pens are clearly signposted and are stored in the following locations:

1. Health Centre (main waiting room on the wall opposite the entrance/exit door)
2. Fryer Boarding House Duty Room (at the back centre of the room above the low-level glass cabinet)
3. Reckitt Boarding House Duty Room (at the back centre of the room to the left-hand side of the window above the low-level glass cabinet)
4. School Boarding House Duty Room (as you go in the door on the left-hand side above the low-level glass cabinet)
5. Oakview Dining Hall (in the office on the shelf in front of you which is located behind the pudding counter)
6. Old School Reception (on the end of the receptionist desk closest to the door to the staffroom)
7. Grove House Sixth Form Centre entrance foyer

The Director of Medical Services is responsible for:

- Assessing and determining if spare autoinjectors are required for trips and providing them as required.
- Making sure the sports department hold spare autoinjectors and inhalers to take on fixtures as required.
- All autoinjectors are EpiPen 300mcg as all students are aged 11+ years.

- The purchasing of spare adrenaline pens which can be obtained at low cost from a local pharmacy.
- Distribution around the site and clear signage

16.3 ADRENALINE PENS ON SCHOOL TRIPS AND SPORTS FIXTURES

- No child with a prescribed adrenaline pen will be able to go on a school trip without two of their own pens.
- Adrenaline pens will be always kept close to the students e.g. not stored in the hold of the coach when travelling or left in changing rooms.
- Adrenaline pens will be protected from extreme temperatures.
- Staff accompanying the students will be aware of students with allergies and be trained to recognise and respond to an allergic reaction.
- Spare pens will be taken to sporting fixtures and on trips.

RECOGNISING AN ALLERGIC REACTION

Mild/moderate reaction:

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

If the reaction is mild, antihistamine should be given from the allergy response emergency box. Dosage is detailed on the back of the box.

SUSPECT ANAPHYLAXIS IF:

- Difficulty breathing / wheeze
- Swelling of tongue/throat
- Collapse, dizziness
- Sudden severe symptoms after allergen exposure

17. RESPONDING TO AN ANAPHYLAXIS

- Summon help – ask another member of staff to grab the nearest allergy response emergency box and inform reception (you may need to ask a student to obtain help if no other staff local to you):
    - Health Centre Waiting Room
    - Fryer Boarding House Duty Room
    - Reckitt Boarding House Duty Room
    - School Boarding House Duty Room
    - Oakview Dining Hall (Staff Office)
    - Old School Reception
    - Grove House Sixth Form Centre foyer
- Do not move the person. Keep them lying down with legs raised unless breathing is impaired. Do not allow standing or walking.

- If you do not know where their prescribed autoinjector is located, please use one of the school spare autoinjectors. If the person does not have a prescribed autoinjector and if in doubt, administer adrenaline immediately. Do not delay treatment.
- Administer adrenaline immediately to their outer thigh (e.g., EpiPen or Jext).
- Note time of administration immediately after giving adrenaline.
- Please give the used autoinjector to the paramedic crew when they arrive.
- The other member of staff should call 999/112 and state "anaphylaxis" clearly.
- Please also inform the Health Centre if you can so they can support you – 0118 987 9566.
- Monitor airway/breathing/circulation and do not leave them alone at any time.
- The student will not be moved until a medical professional/paramedic has arrived, even if they are feeling better.
- A second dose can be given after 5 minutes if no improvement.
- Notify parents as soon as you can.

See appendix 1 on recognising and responding to an allergic reaction and appendix 2 for the protocol.

18. TRAINING

19.1 The school is committed to training all staff annually to give them a good understanding of allergy. This includes:

- Understanding what an allergy is
- How to reduce the risk of an allergic reaction occurring
- How to recognise and treat an allergic reaction, including anaphylaxis
- How the school manages allergy, for example Emergency Response Plan, documentation, communication etc
- Where adrenaline pens are kept (prescribed pens on the student's person and spare pens around school) and how to access them
- The importance of inclusion of students with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying
- Understanding food labelling
- Taking part in an anaphylaxis drill

19.2 The school will conduct an anaphylaxis drill at a minimum of annually. This includes:

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

19. ASTHMA

It is vital that students with allergies keep their asthma well controlled because asthma can exacerbate allergic reactions. Please see our Asthma Policy for further information.

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 do not always progress from mild to moderate to more serious; sometimes they are life-threatening within minutes.

20. MONITORING AND REVIEW

The Director of Medical Services will monitor health care provision for all students and staff. The information may help identify training or other needs and be useful for investigative or insurance purposes.

This policy will be reviewed annually or earlier if required due to changes in guidance or incidents. The governing body will monitor implementation and effectiveness.

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Sign off:	Governor: TBC
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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.

Leighton Park School Emergency Response Plan: Anaphylaxis

1. Purpose

To ensure a swift, coordinated, and effective response to an anaphylaxis incident involving any member of the school community—students, staff, or visitors—on or off school premises.

2. Immediate Response Protocol

Recognizing Anaphylaxis

Treat as anaphylaxis if ANY of the following occur:

- **Airway:** swelling of tongue/throat, difficulty swallowing, hoarse voice
- **Breathing:** wheeze, persistent cough, difficulty breathing
- **Circulation:** dizziness, collapse, pale/clammy, unconsciousness
- **Rapid worsening** after allergen exposure

Remember

- Adrenaline is **safe and lifesaving**
- Delay is more dangerous than giving it unnecessarily

Initial Actions

- Summon help – ask another member of staff to grab the nearest allergy response emergency box and inform reception (you may need to ask a student to obtain help if no other staff local to you):
    - Health Centre Waiting Room
    - Fryer Boarding House Duty Room
    - Reckitt Boarding House Duty Room
    - School Boarding House Duty Room
    - Oakview Dining Hall (Staff Office)
    - Old School Reception
    - Grove House Sixth Form Centre foyer
- Do not move the person. Keep them lying down with legs raised unless breathing is impaired. Do not allow standing or walking.
- If you do not know where their prescribed autoinjector is located, please use one of the school spare autoinjectors. If the person does not have a prescribed autoinjector and if in doubt, administer adrenaline immediately. Do not delay treatment.

- Administer adrenaline immediately to their outer thigh (e.g., EpiPen or Jext).
- Note time of administration immediately after giving adrenaline.
- Please give the used autoinjector to the paramedic crew when they arrive.
- The other member of staff should call 999/112 and state “anaphylaxis” clearly.
- Please also inform the Health Centre if you can so they can support you – 0118 987 9566.
- Monitor airway/breathing/circulation and do not leave them alone at any time.
- The student will not be moved until a medical professional/paramedic has arrived, even if they are feeling better.
- A second dose can be given after 5 minutes if no improvement.
- Notify parents as soon as you can.

3. Roles and Responsibilities

- First Responder (nearest staff member): Stay with the person, keep them calm, administer adrenaline.
- Medication Runner: Retrieve the person’s autoinjector from their known storage location and bring it to the scene or if this is not available or accessible, grab an orange allergy response box that holds a spare EpiPen from one of the locations listed above.
- Emergency Services Liaison: Ensure gates are open (inform reception and caretakers), direct paramedics to the exact location.
- Family Contact Lead: Notify the student’s family or next of kin using emergency contact details.
- Crowd Control Lead: Move other students or staff away from the scene to maintain privacy and reduce distress.
- Hospital Escort: Accompany the person to hospital if adrenaline has been administered (preferably a staff member familiar to them).

4. Communication and Alerting

- Staff should use mobile phones to raise the alarm. If required, a sensible student can be asked to run to reception or nearest area to obtain help.
- Ensure reliable signal coverage across the school.
- If alone, administer adrenaline first, then call 999, the Health Centre and emergency contacts.
- Maintain a clear communication protocol for off-site incidents (e.g., trips, transport).

5. Off-Site and Out-of-Hours Incidents

Staff supervising trips or events must have:

- Emergency contact list and medical information
- Spare autoinjectors if required.

- Mobile phone with signal
- Trained staff present.
- Access to emergency medication - they should check that students have two autoinjectors with them that are in date where they have been prescribed to use one.
- Clear emergency procedures

6. Post-Incident Actions

Medical Follow-Up

- All individuals who receive adrenaline must be taken to hospital.
- Ensure replacement adrenaline pens are obtained urgently.

Debrief and Support

- Conduct a staff debrief to review the response.
- Offer emotional support to witnesses and responders.
- Provide age-appropriate reassurance and education to students.

Incident Review

- Update the individual's health care plan if needed.
- Review and improve the Emergency Response Plan based on lessons learned.

7. Prevention and Education

- Maintain up-to-date medical records and care plans.
- Conduct regular staff training on anaphylaxis recognition and response.
- Educate students on allergy awareness and respectful behaviour.
- Ensure food safety protocols are followed in canteens and events.

8. Recovery and Community Support

- Acknowledge the emotional impact of the incident.
- Offer counselling or wellbeing support to affected individuals.

Communicate with the school community to:

- Reassure them of safety measures.
- Reinforce allergy awareness.
- Celebrate effective response and teamwork.