Himbleton CE Primary School and Nursery

Nurture, Nature, Knowledge:

Enabling inquisitive thinkers and inspired learners with kind hearts.

"Faith, Hope, Love…the greatest of these is Love." (Corinthians 13:13)

"So in everything, do unto others what you would have them do to you." (Matthew 7:12)

"Wise men and women are always learning, always listening for fresh insights." (Proverbs 18:15)

Allergy Safety Policy

2026 – 2027

September 2026

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Aims and Scope

This policy aims to:

- Set out Himbleton CE Primary School and Nursery's approach to allergy safety, including reducing the risk of exposure and the procedures in place in case of allergic reaction;
- Make clear how our school supports pupils with allergies to ensure their wellbeing and inclusion;
- Promote and maintain allergy awareness among the school community.

Legislation and Guidance

This policy is based on the Department for Education (DfE)'s statutory guidance on allergy safety in schools and supporting pupils with medical conditions at school, the Department of Health and Social Care's guidance on using emergency adrenaline auto-injectors in schools, and the following legislation:

- The Food Information Regulations 2014
- The Food Information (Amendment) (England) Regulations 2019

Roles and Responsibilities

The Governing Body

The governing body is responsible for ensuring:

- Risks relating to pupils with allergy are included in the risk register and actively managed;
- The school has an allergy safety policy which sets out:
  - Arrangements to reduce the risk of individuals coming into contact with their known allergens
  - Emergency response plans for cases of anaphylaxis

The governing board delegates the day-to-day implementation of this policy to the allergy safety lead.

Allergy safety lead

The nominated allergy safety lead is Mrs Kirsty Shaw, Headteacher and DSL.

They're responsible for:

- Implementing this allergy safety policy;
- Reviewing the allergy safety policy at least annually, updating it when needed, and making sure it is published;
- Promoting and maintaining allergy awareness across our school community;
- Developing and reviewing arrangements for the safe storage and disposal of adrenaline devices (AD);
- Ensuring:
  - All allergy information is up to date and readily available to relevant members of staff;
  - All pupils who require support with allergies have an up-do-date individual healthcare plan (IHP);
  - Requesting that all pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional and, where issued, are attached to their the child's individual IHCP;
  - All staff receive regular allergy awareness training;
  - All staff are aware of the school's policy and procedures regarding allergies;

- Relevant staff are aware of what activities need an allergy risk assessment;
- Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
    - What lessons there are to learn;
    - Any potential changes to the medical conditions and/or allergy safety policies and/or to any pupil's IHP.

Headteacher

The headteacher is responsible for:

- Deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHP is required to specify arrangements that reflect the pupil's circumstances.

Designated Staff Volunteers

Miss Sue Woodward and Mrs Annette Ford are responsible for:

- Checking spare ADs are present and in date on a monthly basis;
- Making sure that replacement ADs are obtained when expiry dates approach;
- Liaising with parents and carers when replacement ADs are required.

Teaching and Support Staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils;
- Maintaining awareness of our allergy safety policy and procedures;
- Being able to recognise the signs of severe allergic reactions and anaphylaxis;
- Being aware of specific pupils with allergies in their care;
- Reducing the risk to pupils with known allergies coming into contact with known allergens;
- Ensuring the wellbeing and inclusion of pupils with allergies;
- Reporting any allergic reaction or case of anaphylaxis to the allergy safety lead;
- Ensuring that ADs and care plans are taken with the pupil to the playground/playing field/forest school/educational visits and trips;
- Ensuring that ADs and care plans are taken with the pupil in the case of an emergency which requires the evacuation of the building, including a fire drill.

Parents/Carers

Parents/carers are responsible for:

- Being aware of our school's allergy safety policy;
- Providing the school with up-to-date details of their child's medical needs, dietary requirements, and any history of allergies, reactions and anaphylaxis;
- If required, providing their child with 2 in-date adrenaline auto-injectors and any other medication, including inhalers, antihistamine etc., and making sure these are replaced in a timely manner;
- Following the school's guidance on food brought in to be shared;
- Updating the school on any changes to their child's condition.

Pupils with allergies

If age-appropriate, these pupils are responsible for:

- Being aware of their allergens and the risks they pose;
- Carrying their AD on their person and only using it for its intended purpose (if appropriate, depending on age);
- Understanding how and when to use their AD (if appropriate, depending on age);
- Informing a member of staff if they are aware of coming into contact with a known allergen.

Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers;
- Cooperate and respond to instructions to support their peers and staff in the case of an emergency.

Identifying Individuals at Risk

Allergy is a spectrum of different allergic diseases. Reactions occur when a susceptible person is exposed to something (an "allergen") they are allergic to. Common allergic conditions include:

- Hay fever (allergic rhinitis), triggered by allergens carried in the air, such as pollen, house dust mite, animal fur/feathers, or mould;
- Skin allergies (e.g. eczema, contact dermatitis, contact urticaria/hives) caused by contact with allergens including house dust mite, pollen and substances like nickel, latex and some chemicals;
- Food allergy, which can cause symptoms ranging from mild itching in the mouth to "whole body" reactions including anaphylaxis;
- Asthma which may be triggered by airborne allergens;
- Allergy to insect stings and medicines.

Identifying pupils at risk

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any allergy the pupil has and whether they carry medication. Where a pupil has a new diagnosis and/or has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a reminder to parents/carers at the start of each year asking them to update their child's medical information as necessary.
- Review their child's medical details on the parent portal on Arbor to ensure that they are correct;
- Ask that parents/carers proactively inform us by either phone call to the school on 01905 391231 or an email to Mrs Stewart in the school office – office@himbleton.worcs.sch.uk if their child's medical needs change during the school year.

Identifying staff and visitors at risk

- All staff are required to complete a medical screening form in advance of their start date as part of induction and are required to update their medical records held in the school office if there are any changes.

- Staff will be required to share information about allergies with other employees, including any medication and ADs required so that any emergency procedures can be implemented immediately.
- Visitors will be asked if they have any allergies. Wherever possible, this will be in advance of their visit.
- Volunteers, including governors, who support educational visits, will be asked to share information about any allergies and to ensure that they have any required medication with them

Individual healthcare plans (IHCPs)

Pupils should have an IHCP if they:

- Have an allergy which has a functional impact on them in the school environment;
- They are at risk of harm as a result of their allergy; and
- Require arrangements which are additional to or different from those made generally.

It is not necessary for a pupil to have a formal diagnosis of allergy for them to have an IHCP. Healthcare professionals may decide that it is more appropriate to accept that the child shows symptoms, rather than proceeding to a formal diagnosis.

The IHP will set out the additional and/or different arrangements that will be in place for supporting the pupil. The school will make every effort to make sure that arrangements are put in place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

Not all children with an allergy will require an IHCP, for example if they have an allergy to penicillin. Some allergies will have little or no impact on the pupil while they are at school, or pose no risk to the pupil. Some allergies will not require arrangements which are additional to or different from those made generally.

The headteacher is responsible for deciding (in discussion with the parents/carers and any relevant healthcare professionals) whether a pupil's allergy can be managed through the adjustments made under the school's medical conditions policy or whether an IHCP is required to specify arrangements that reflect the pupil's circumstances.

The school will consider the following principles:

- If the arrangements or support which a pupil requires would be available to any pupil as part of normal policies, an IHCP may not be required
- If the pupil only needs non-prescription medication and the school's medical conditions policy would permit them to carry and administer it, an IHCP may not be required

IHCPs will be reviewed at least annually and more frequently if the pupil's needs have changed. Where a pupil moves on to a new school, their IHCP will be shared as part of the transition.

Allergy and asthma action plans

All pupils who have a known allergy to a food or insect stings should be issued with an appropriate allergy action plan by their healthcare professional.

All pupils who have asthma should be issued with an asthma action plan by their healthcare professional.

The plans include medical and parental consent for staff to administer emergency medicines, including adrenaline for anaphylaxis or reliever inhaler in the event of an asthma attack.

The allergy action plan and/or asthma action plan should be attached to the pupil's IHCP. Whenever the allergy action plan is updated, the pupil's IHCP should be reviewed to incorporate it.

Register of pupils with known allergies

The school maintains a register of pupils who have a known allergy and information is on the pupil information sheets. The register includes:

- Known allergens and risk factors for anaphylaxis;
- Whether a pupil has been prescribed ADs (and if so, what type and dose);
- Where a pupil has been prescribed an AD, whether parental consent has been given to administer emergency medication;
- A photograph of each pupil to allow a visual check to be made.

The register is kept in the school office and the catering team have an up to date list of pupils with food intolerances and allergies, including adaptations to menus, as provided directly by parents and carers. These registers can be checked quickly by any member of staff as part of initiating an emergency response.

Allowing all pupils to keep their ADs, where appropriate, with them will reduce delays and allows for confirmation of consent without the need to check the register.

Assessing Risk

The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as food technology;
- Science experiments involving foods;
- Crafts using food packaging;
- Off-site events and school trips;
- Any other activities involving animals or food, such as animal handling experiences or baking.

A risk assessment for any pupil at risk of an allergic reaction will also be carried out where a visitor requires a guide dog or if animals are used as part of the curriculum.

Minimising Risk

Hygiene procedures

- Pupils are reminded to wash their hands before and after eating;
- Sharing of food, food containers and food utensils is not allowed;
- Pupils have their own named water bottles, and lunch boxes provided to pupils with food allergies will be clearly labelled with the name of the child for whom they are intended;
- Where food is not directly provided by the school, parental engagement and permission will be sought in advance.

Catering

The school is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff provided by Aspens' Catering receive appropriate training by the company and are able to identify pupils with allergies;
- The school will engage with caterers to understand the controls in place to ensure that food service complies with relevant requirements;
- School menus are available for parents/carers and pupils to view with ingredients clearly labelled, and catering staff are available to discuss the provision of allergy safe meals with parents/carers;

- Separate menus for pupils with allergens will be available for pupils with allergies and food intolerances; these will be chosen by parents/carers via the online booking system;
- Catering staff and school staff will have daily updated lists of food ordered, including special menus, and will ensure that these are delivered directly to the pupil;
- Where changes are made to school menus, we will make sure these comply with legislation and continue to meet any special dietary needs of pupils
- Food allergen information relating to the 'top 14' allergens is displayed on the packaging of all food products, allowing pupils and staff to make safer choices. Allergen information labelling will follow all legal requirements that apply to naming the food and listing ingredients, as outlined by the Food Standards Agency (FSA);
- Where food is provided by the school, such as a breakfast club or during wraparound care/after school club, staff will understand how to read labels for food allergens;
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination;
- Cookery clubs will ensure that they comply with providing safe food options; after school club providers will be informed by the school and parents/carers if their child has any allergies and will ensure that any ingredients are safe for pupils with allergies.

Insect bites/stings

When outdoors:

- Shoes must always be worn;
- Food and drink should be covered;
- Pupils should inform a member of staff if they become aware of a wasps' nest within the school grounds so that this can be made safe.

Animals

- Dogs are not allowed onto school grounds and any dogs brought to school must stay behind the school gates in a place where they are unable to jump up at pupils when they are arriving at or leaving school;
- Parents and carers will be informed if an animal is to be brought onto the school ground, for example as part of a visitor for curriculum purposes or a guide dog to assist a visitor with a sight impairment;
- All pupils will always wash hands after interacting with animals to avoid putting pupils with allergies at risk through later contact;
- Pupils with animal allergies will not interact with animals.

Visits and trips

- No pupils with allergies will be excluded from taking part in any activities or educational visits;
- The school will plan accordingly for all visits and trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received appropriate training
- The school will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in a school trip
- Pupils at risk of anaphylaxis should have their own ADs with them (if appropriate, depending on age);
- Staff trained to administer adrenaline in an emergency will be present on the school trip
- Appropriate measures will be taken in line with the school's AD protocols for off-site events and school trips (see section 'The use of ADs off school premises').

Procedures for Handling an Allergic Reaction

- All staff are trained to recognise the signs of both mild and severe allergic reactions (known as anaphylaxis) and respond appropriately;
- Staff are trained in the administration of adrenaline to minimise delays in an emergency;
- An ambulance will always be called when an AD has been used, even if the pupil has responded well to the adrenaline;
- If the pupil has an allergy action plan, this must be followed;
- A spare school AD device will only be used if:
  - The pupil does not have a prescribed AD
  - The pupil's prescribed AD is not available or misfires.

Adrenaline Devices (ADs/AAIs)

Following the Department of Health and Social Care's Guidance on using emergency adrenaline auto-injectors in schools, our school's procedures for Ads are as follows:

Prescribed ADs

Pupils who are prescribed ADs are encouraged to keep them near or on their person at all times if this is appropriate, including when travelling to or from the school and on school trips. In the event that a pupil is not able to carry their AD with them, this will be carried by a named adult. It is recommended that two devices are carried at all times. Pupils with prescribed ADs will be required to have an AD in school at all times and parents are responsible for ensuring that they are in date.

If a pupil cannot keep their ADs with them in the classroom (due to age or other considerations), then the devices will be stored:

- In the first aid box within each classroom which is unlocked and accessible at all times
- **No more than** 5 minutes away from where they may be needed
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- In the care of a trained member of staff whilst on the playground, field, PE lessons or during educational visits

A copy of the pupil's allergy action plan is kept alongside their medication, as it includes instructions on how it should be used in an emergency.

A record of administered medication will be completed and kept, as well as shared with an ambulance crew/medical professionals, parents/carers, when pupils have been provided with prescribed adrenaline. Care plans will also be shared with medical professionals following the use of the AD in an emergency.

Spare ADs and inhalers

Please note: current regulations only allow schools to purchase adrenaline auto-injectors (AAIs/ADs) as spare devices. Non-injectable adrenaline devices (nasal spray) may be prescribed to individuals but cannot currently be stocked as a spare device. If an individual who is prescribed nasal adrenaline suffers anaphylaxis, a school's spare ADs may be used in an emergency. Schools can purchase an emergency asthma reliever inhaler which can only be used if the pupil's prescribed inhaler is not available and where written consent has been obtained.

The allergy safety lead is responsible for sourcing spare ADs [and an emergency asthma reliever inhaler] and ensuring they are stored according to the guidance.

4 spare Epipen ADs (2 Ads of 2 different dosages) will be sourced locally wherever possible, ensuring best value in accordance with the financial arrangements.

(based on Resuscitation Council UK's age-based criteria, see page 11 of the AAI guidance)

Spare ADs will be stored:

- In an appropriate central location – the school office - that is unlocked and accessible to **staff only** at all times;
- **No more than** 5 minutes away from where they may be needed;
- Kept at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature.

Spare ADs will be kept:

- In pairs, in case a second one is necessary;
- Separate from any pupils' prescribed ADs and clearly labelled to avoid confusion;
- In a specially designed kit so that it is immediately visible.

Miss Woodward and Mrs Ford are responsible for:

- Checking monthly that spare ADs [and the emergency asthma reliver inhaler] are present and in date;
- Obtaining replacement ADs when the expiry date is near.

Disposal

ADs can only be used once. Once an AD has been used, it will be disposed of in line with the manufacturer's instructions (for example, in a sharps bin for collection by the local council).

Using spare ADs in an emergency situation without prior consent

The Human Medicines (Amendment) Regulations 2017 do not require consent to have been obtained for spare adrenaline devices to be used in an emergency.

The school will obtain advance consent from parents/carers or pupils via a template consent form for spare adrenaline devices to be used, so that in an emergency, consent can be assumed to be in place.

However, in an emergency situation, anyone may take reasonable action to save a life without checking whether prior consent has been given. This avoids potentially fatal delays in treatment.

Use of ADs off school premises

Pupils at risk of anaphylaxis who are able to administer their own adrenaline should carry their own ADs with them on school trips and off-site events.

A designated staff member, usually the class TA, will carry a pupil's AD and care plan in the medical box and will ensure that the pupil knows who to report to in the case of an allergic reaction or an emergency.

Serious Incidents and 'Near Misses'

A **serious incident** is any event relating directly to a medical condition (including allergy) in which a pupil, member of staff or visitor with a medical condition or allergy is harmed or is placed at an immediate and significant risk of harm, including situations requiring emergency medication, urgent clinical intervention or attendance by emergency services.

A **'near miss'** is an event relating directly to a medical condition (including allergy) that did not result in harm but had the clear potential to do so – for example, where an error, omission, or system failure could reasonably have led to a serious incident had circumstances been only slightly different.

Incident recording

The school will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded in the accident book and using the school's 'Incident/Near Miss' reporting form, including the following information:

- Who was affected
- What happened, when and where
- Why the incident occurred (as far as is known)
- How staff and pupils responded and what was done to support the individual
- Whether emergency services were called
- How the incident concluded
- What procedures or arrangements need to be put in place to ensure that lessons are learnt;
- Any actions that have been implemented, by who and when.

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons. Lessons learnt will be shared with staff.

Incident reporting

The parents/carers of a pupil aged up to 16 will be notified of the incident or 'near miss' as soon as possible.

The school will share the report with the pupil's parents/carers, the pupil or the individual involved.

They will be given the opportunity to discuss what happened and to contribute their views to the consequent lessons learned review. The school will then confirm what we have learnt from the incident and outline any actions we are taking as a result.

In some cases, the impact of exposure to an allergen at school may be delayed and not recognised until the pupil is at home. This means that incident reporting is not limited to staff – the pupil, parents/carers or others (such as healthcare professionals) will need to report to the school if there has been an incident with a delayed reaction.

Staff will always share the incident report with the headteacher who is also the allergey safety lead. They The allergy will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil's IHCP. Any learning will be shared appropriately with staff so they can act on them and reduce the chance of an incident reoccurring.

The school will also share the report with other agencies in the following circumstances:

With the Health and Safety Executive (HSE): incidents which arise directly out of the way the school carried out a work activity which results in death or immediate hospitalization. For example, where a pupil has suffered harm after consuming an allergen due to incorrect preparation of food by a member of staff. [See how to make a RIDDOR report]

In the event that the incident or 'near miss' was related to the delivery of a care plan or action plan issued by a healthcare professional, the relevant healthcare professional will be notified. Any incident or 'near miss' will be recorded using the school's Incident and Near Miss reporting template.

Allergy Awareness

Staff training

The school ensures that all staff expected to be present during times when pupils are scheduled to be on site receive allergy awareness training at least annually. New starters will complete this training as part of their induction. At Himbleton CE Primary School and Nursery, allergy and anaphylaxis training is provided by The Key for School Leaders.

This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers. It also includes catering staff and others who may oversee pupils at breakfast or after-school clubs. It does not include contractors carrying out work with no pupil-facing role such as builders, electricians or other ad hoc maintenance personnel.

The school has purchased 'training pens' from EpiPen and so staff can practise safely.

The school will conduct allergy safety drills annually. This is a simulated case of anaphylaxis to test out how staff respond, without risk to any individual. The results of the drill will be recorded and used to inform the ongoing review of this policy.

Allergy awareness training will ensure that all staff:

- Have an awareness of allergy, the risks it poses, how allergic reactions can occur and how to manage it;
- Understand that allergy includes multiple conditions (food allergy, asthma, eczema, hay fever, others), which can co-exist;
- Understand the difference between food allergy, coeliac disease and food intolerance;
- Know where to find information on allergy triggers;
- Can identify the range of symptoms of allergic reactions;
- Understand and can recognise anaphylaxis;
- Know how to respond in an emergency, including:
    - Calling emergency services and informing parents/carers
    - How to locate and administer emergency medication
    - How to use the medication/device in an emergency
- Understand the impact allergy can have on a pupil's wellbeing;
- Understand the school's allergy safety policy;
- Know how to check whether an individual is on the record of those with known allergy, and how to use an allergy or asthma action plan;
- Understand their responsibilities in reducing the risk of individuals with known allergy coming into contact with their known allergens;
- Understand how to report an allergic reaction or case of anaphylaxis (whether an incident or a 'near miss').

Awareness of allergy safety policy

This allergy safety policy will be published on the school's website and shared with parents/carers at the start of the school year.

All staff should be aware of and understand the policy as part of annual allergy awareness training.

Pupils will be aware of the school's allergy awareness and safety policy and procedures as part of RSHE lessons and through classroom activities/lunchtime arrangements and ongoing discussion and teaching about individual needs.

Children will be taught about allergy safety through RSHE lessons, discussions in class settings and during collective worship.

Wellbeing

At Himbleton CE Primary School and Nursery, we are aware that pupils with allergies can experience bullying and may also suffer from anxiety and depression relating to their allergy. In line with our school's anti-bullying and behaviour policies, pupils with allergies will be supported with their mental health and wellbeing.

Pupils with allergies will have additional support through:

- Pastoral care;
- Regular check-ins with trusted adults, including the pupil's class teacher and TA;
- Reassurance that steps are being taken to minimise the risks of exposure to allergen and that robust measures are in place in the event of anaphylaxis.

The school will respond to any instance of bullying in line with its behaviour and anti-bullying policies.

Wellbeing support following an incident or 'near miss'

The school recognises that an incident or a 'near miss' is a serious event with a potential impact not only on the pupil but their family, those involved in responding. and any witnesses. The school will provide support to those involved.

The school will support staff involved in any incident or 'near miss'.

See the 'Serious Incidents and Near Misses' section of the policy for more detail on incidents and 'near misses'.

Information Sharing

Information about an individual's health is considered special category data under UK GDPR. It will therefore be handled in line with our data protection policy.

Monitoring and Review

This policy will be reviewed by the Allergy Lead/Headteacher at least annually, in response to changes to legislation and guidance or more frequently if a serious incident or a 'near miss' identifies an area for improvement. Any changes made to this policy will be communicated to all members of staff and parents/carers. All members of staff and parents/carers are required to familiarise themselves with this policy. At every review, this policy will be approved by the full governing body.

The scheduled review date for this policy is **September 2027.**

Links With Other Policies

This policy links to the following policies and procedures:

- Behaviour Policy
- Safeguarding and Child Protection Policy
- Complaints policy

- Health and Safety Policy
- SEND Policy
- Inclusion Policy
- Inclusion Strategy
- Supporting Pupil with Medical Conditions Policy
- Asthma Policy
- Data Protection Policy
- School Food and Nutrition Policy

Appendix A – Symptoms and Emergency Procedures

FIRST AID FOR ANAPHYLAXIS

Allergy School

Recognise the Signs of Anaphylaxis...

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

B Breathing
- Difficult or noisy breathing
- Wheeze or persistent cough

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

An allergic reaction can escalate to anaphylaxis which is potentially life-threatening.
Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

ANAPHYLAXIS: ACTIONS TO TAKE

If any one or more of the above ABC symptoms are present, take these steps.

1. Administer an Adrenaline Auto Injector (AAI) without delay

Inject the AAI into the top of the outer thigh. If you're in doubt that it is anaphylaxis but one or more ABC symptoms are present, **give the AAI, it will not harm them.**

2. Dial 999 and say anaphylaxis ('ana-fill-axis')

Stay with the person until the ambulance arrives. **DO NOT let them stand up and walk around.**

3. The person should lie down immediately

If the person is not already lying down, they should do so, with legs raised if possible. If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.

4. Inject a second AAI into the outer thigh if there are no signs of improvement after 5 minutes

If there is no sign of life, start CPR immediately until help arrives.

Please learn these steps. This is life-saving information.
You never know when you will need to act in an anaphylaxis emergency.

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

Empower · Include · Protect
AllergySchool.org.uk

Registered charity England & Wales (1181098) Scotland (SC051610). Based on BSACI and 2023 MHRA guidance.

Appendix 2 - Template for Consent Form for Emergency Use of AD/AAI

NEIGHT HILL
HIMBLETON
DROITWICH
WORCS.
WR9 7LE
Telephone: 01905 391231
Website: www.himbleton.worcs.sch.uk
HEADTEACHER: Mrs Kirsty Shaw

CONSENT FORM - USE OF EMERGENCY AUTO INJECTOR/AAI/AD (ADRENALINE)

Child's name: ……..

Class: ……

Date: ……

1. I confirm that my child has been diagnosed as having allergies.
2. My child will be provided with the prescribed medication/an AD/AAI which will always be kept in school which I will replace when it has expired.
3. In the event of my child displaying symptoms of anaphylaxis, and if their AD/AAI is not working/is out of date/mis-fires/is not available, I consent for my child to receive adrenaline from the emergency AD/AAIs held by the school for such emergencies.

Signed (parent/carer): …… Date: ……

Name (parent/carer): ……

Parent/carer address and contact details:

……

……

……

Telephone: ……

Email: ……