

Linden Primary School

Allergy Safe Policy



Status

Statutory X

Recommended ☐

Good Practice ☐

Purpose

At Linden Primary School, the aims of our first aid policy are to:

- Set out our school'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 & 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](#)

Consultation

Staff and governors.

Links with other policies

Health & Safety Policy

Child Protection & Safeguarding Policy

First Aid Policy

Supporting children with medical needs policy

Monitoring and Evaluation

Annually X

Every 3 years ☐

Other ☐ _____

Headteacher ☐ Governing Body X

Other ☐ _____

Linden Primary School	
Date Issued	September 2026
Head Teachers Signature	
Chairperson Signature	
Reviewed	September 2027

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1. Roles & Responsibilities

The governing board

The governing board is responsible for ensuring:

- Ensure the school has a strategic vision for the management of allergy risk assessment and emergency procedures
- Ensure the school's arrangements to identify and safeguard the wellbeing of pupils, because of their own or someone else's allergy, are robust and effective
- Ensure that the school provides appropriate training, information, instruction, induction and supervision on a regular basis to enable everyone to stay safe regarding allergies and their management. .
- Ensure adequate resources for managing allergies are available
- Ensure appropriate material is available on the school website for parent/carers highlighting how the school is managing pupils/students with allergies
- Monitor the effectiveness of this Policy to ensure it remains fit for purpose
- 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 the Designated Safeguarding Lead and Deputy Head teacher, Sasha Davidson.

They're responsible for:

- Implementing this allergy safety policy
- Reporting to the Headteacher regarding pupils with allergies
- 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
- Liaise with parents/carers of pupils with known declared allergies to produce a risk assessment for their child that includes sharing of information, allergy management, risk minimisation and emergency actions.
- 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-to-date individual healthcare plan (IHP)
 - All pupils with a known food or insect sting allergy have up-to-date allergy action plans issued by a medical professional
 - All staff receive annual 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
 - Ensure that up-to-date allergy information for pupils is accessible to catering teams
 - Ensure medication is stored securely in a first aid cabinet and clearly labelled with the pupils' name

- Serious incidents and 'near misses' relating to allergy safety are recorded and reported as appropriate, and to consider and share with staff:
 - What lessons are there 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:

- Providing, as far as practicable, a safe and healthy environment in which people at risk of allergic reaction and anaphylaxis can participate equally in all aspects of school life and are not subject to bullying because of their condition
- 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.
- Ensuring all visitors, volunteers, work experience students, sub-contractors are made aware of the school's commitment to allergy management as part of Safeguarding
- Ensuring the curriculum contains age-appropriate content so all pupils/students can learn about allergies and how everyone can support those who have them
- Ensuring an adequate risk assessment is undertaken prior to any school trips, excursions or offsite extra curricula activities for pupils/students who have allergies
- Reporting to the Board of Governors/Trustees regarding the management of allergies within the school

School Business Manager and Resources Manager

Magda Reynolds and Lorraine Tyndall are responsible for:

- Checking spare Adrenaline Auto-Injectors (AAIs) are present and in date on a monthly basis
- Making sure that replacement AAIs are obtained when expiry dates approach
- Arranging for the correct disposal of out-of-date AAIs

Teaching and support staff

All teaching and support staff are responsible for:

- Maintaining awareness of our allergy safety policy and procedures
- Completing appropriate anaphylaxis training and be confident to respond to an allergy emergency
- Any food-related activities must be supervised with due caution whilst following best practice for storing, preparing, cooking and serving food
- 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

- Any staff leading on a school trip must check that all pupils/students with medical conditions, including allergies, are carrying their medication (those unable to produce their required medication would not be able to attend the excursion)
- Staff leading a school trip, excursion or off-site extra curricula activity must ensure they carry all relevant emergency supplies with them

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
- Providing any other written medical documentation, instructions and medications as directed by a health professional
- If required, meet with the Designated Safeguarding Lead and Catering Manager to discuss any specific requirements relating to your child's allergy
- 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
- 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
- Knowing where their Adrenaline Device is stored
- As soon as they suspect they are experiencing signs of allergic reaction, tell an adult.
- Understanding how and when to use their Adrenaline Device

Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers

2. 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

At Linden Primary School 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 in-year, 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 [via Bromcom]. This information will also be reviewed with parents at the Autumn and Spring term Parent's Consultation meetings.

We ask that parents/carers proactively inform us by either phone call to the school (01452 527020) or an email to the main office (admin@linden.gloucs.sch.uk) if their child's medical needs change during the school year.

Identifying staff and visitors at risk

At Linden Primary School we will:

- Ask new staff to provide details of their allergies in advance of their start date
- Ask staff to inform Headteacher and Deputy Headteacher if there are any changes to their health or medical conditions – this will be amended on the MIS system as well as on our medical board
- Ask visitors to confirm that they have no allergies or, provide details of their allergies on entry to the school via our Inventory system and communication with office staff signing them in

Individual healthcare plans (IHP)

Pupils (& staff) should have an IHP 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/staff members to have a formal diagnosis of allergy for them to have an IHP. Healthcare professionals may decide that it is more appropriate to accept that the child/individual 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/staff member. Linden Primary 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/staff who are new to our school.

Not all children/individuals with an allergy will require an IHP. Some allergies will have little or no impact on the pupil/individual while they are at school, or pose no risk to the pupil/individual. 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/individual'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/individual's circumstances.

The school will consider the following principles:

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

IHPs will be reviewed at least annually and more frequently if the pupil's/individual's needs have changed. Where a pupil moves on to a new school, their IHP 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 IHP. Whenever the allergy action plan is updated, the pupil's IHP should be reviewed to incorporate it.

Register of pupils with known allergies

In-line with our 'supporting pupils with medical conditions' policy, Linden Primary School maintains a register of pupils who have a known allergy. 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 on Microsoft Teams Sharepoint, on the medical board in the staffroom, in the main office and in the kitchen, where it be checked quickly by any member of staff as part of initiating an emergency response.

*Allergy information will only be shared on a need-to-know basis in accordance with UK GDPR and data protection legislation.

3. Assessing risk

Linden Primary School will conduct a risk assessment for any pupil at risk of anaphylaxis taking part in:

- Lessons such as D&T, involving food items
- 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 for any children allergic to dog hair – in-line with our School Dog Mentor risk assessment and policy.

4. Minimising Risk

Hygiene procedures

At Linden Primary School, we will take the following measures to prevent contamination in our school:

- 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 water bottles, and lunch boxes. In addition, water and cups are provided in the lunch hall.
- Any school provided packed lunch will be clearly labelled with the name of the child for whom they are intended and/or with specific dietary requirements
- Food preparation and serving will be separate for any pupils who have allergies. This will be in-line with individual menu plans
- Where food is not directly provided by the school, parental engagement and permission will be sought in advance

Catering

Linden Primary School is committed to providing safe food options to meet the dietary needs of pupils with allergies.

- Catering staff receive appropriate training and are able to identify pupils with allergies
- Leaders will engage with the Catering Manager and kitchen staff 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
- 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, staff will understand how to read labels for food allergens
- Catering staff follow hygiene and allergy procedures when preparing food to avoid cross-contamination

Animals (including Dog Mentor)

Linden Primary School is committed to maintaining high hygiene procedures for all pupils and the following control measures are in place:

- All pupils will always wash hands after interacting with animals for their own safety and 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
- 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 an individual risk assessment for any pupil at risk of anaphylaxis taking part in a school trip – this will be shared with parents ahead of the trip taking place
- Pupils at risk of anaphylaxis should have their own ADs with them
- 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

5. 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
- 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

6. Adrenaline Devices (ADs)

Linden Primary School follows the Department of Health and Social Care's Guidance on using [emergency adrenaline auto-injectors in schools](#).

Prescribed ADs

Pupils who are prescribed ADs are encouraged to keep them near or on their person at all times including when travelling to or from the school and on school trips. It is recommended that two devices are carried at all times. Pupils with prescribed ADs should take them home with them at the end of each school day, 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 Main School Office, ensuring that an AD is:

- In an appropriate central location that 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

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.

Anytime an AD is used, a record of this will be added to CPOMs on the child's profile and parents/carers will be informed.

Spare ADs and inhalers

Current regulations only allow schools to purchase adrenaline auto-injectors (AAIs) 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 AAIs 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.

Under the direction of the allergy safety lead, the School Business Manager and Resources Manager are responsible for sourcing spare ADs (and an emergency asthma reliever inhaler) and ensuring they are stored according to the guidance and this policy.

Where will the Ads be sourced?	Kitt Medical
Number of Ads required?	2 on-site at all times 2 x 150mg 2 x 300mg
Which brand of AD will be purchased?	Jext
Dosage requirements	Under 6 years old – 150mg dose Age 6-12 years- 300mg dose

Spare AAIs will be kept:

- In pairs, in case a second one is necessary
- Separate from any pupils' prescribed ADs and clearly labelled to avoid confusion

ADs can only be used once. Once an AD has been used, it will be disposed of in a sharps bin.

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.

Linden Primary School will obtain advance consent from parents/carers or pupils 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.

7. 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.

Linden Primary School will record all serious incidents and 'near misses'

Incident recording

Linden Primary School will record serious incidents and 'near misses' relating to allergy safety as soon as is feasible. The incident will be recorded on an 'Allergy Incident' form (Appendix.3) and will be uploaded onto CPOMs, 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
- Any further actions

The school will approach serious incidents and 'near misses' in a 'no blame' spirit of seeking to learn lessons and this policy will be formally reviewed following any serious allergy incident or significant near miss.

Incident reporting

The parents/carers will be notified of the incident or 'near miss' as soon as possible. The school will share the report with the pupil's parents, 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.

With the Headteacher, the allergy safety lead will consider whether the allergy safety arrangements in place were appropriate or if changes are needed to this policy and/or the pupil's IHP. 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.

8. Allergy awareness

Staff training

Linden Primary 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 safeguarding induction. This includes permanent staff, temporary staff, supply teachers, peripatetic staff, agency workers and regular volunteers - The School Business Manager will liaise with all providers of supply staff to ensure training compliance of their staff prior to them working with the school.

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 will conduct allergy safety drills. 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. Appropriate communications will be regularly shared with pupils, at an age-appropriate level, to explain our approach to allergy safety and sharing specific, known allergy risks relevant to our school if appropriate. This will be supported by posters and information displayed in the school building. This policy will be reviewed annually, or more frequently in the event of an incident or near miss where improvements can be suggested.

Wellbeing

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

- No child with allergies will be excluded from taking part in a school activity, whether on the school premises or a school trip.
- Pupils with allergies may require additional pastoral support including regular check-ins from their class teacher
- Affected pupils 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

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.

Appendix .1.

Mandatory content of allergy awareness and emergency response training – use this information to assess the suitability of training completed by staff, including those externally contracted or provided by an agency.

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
how to locate and administer emergency medication (adrenaline for anaphylaxis, asthma reliever inhaler for an asthma attack)
training on how to use the medication/device in an emergency (whether prescribed to a given person or a school's "spare" adrenaline devices)
Understand the impact allergy can have on a child or young person's wellbeing
Understand the school, college or setting'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")

FIRST AID FOR ANAPHYLAXIS



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.

ANAPHYLAXIS

HOW TO USE EPIPEN AAI

If you think someone is have an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Remove the blue safety cap

Grasp the EpiPen in your dominant hand and remove the blue safety cap by pulling straight up. Remember: Blue to the Sky, Orange to the Thigh!

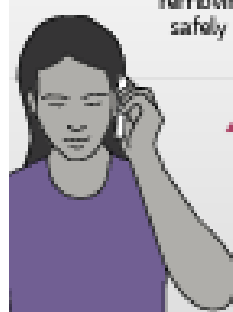


2. Position the orange tip

Hold the EpiPen at 90°, approximately 10 cm away from the leg, with the orange tip pointing towards the outer thigh.

3. Administer the EpiPen AAI

Job the EpiPen firmly in to the outer thigh at a right angle. Hold firmly for 3 seconds, before removing and safely discarding.



4. Once the EpiPen AAI has been administered call 999

Ask for an ambulance and say "ana-a-fill-a-ais".

5. Lie the person down with legs raised 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.

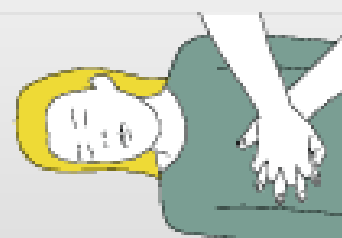


6. If there are no signs of improvement after 5 minutes, use a second EpiPen AAI

The person should remain still and lying down until the ambulance arrives. Don't try to get up, even if you start to feel better.

7. Start CPR

If there are no signs of life, start CPR immediately until help arrives.



For more information
on EpiPen AAI >>



Sign up to the free expiry alert service
and receive reminders by text or email when
your EpiPen is about to expire >>



ANAPHYLAXIS

HOW TO USE JEXT AAIS

If you think someone has an anaphylactic reaction, give the AAI without delay. It will not harm them.

Always consider anaphylaxis in a food-allergic person even if there are no signs of a rash, hives or swelling.

1. Hold the Jext AAI in the hand you write with Hold with your thumb closest to the yellow cap. Pull off the yellow cap with your other hand.	5. Once the Jext AAI has been administered call 999 Ask for an ambulance and say "ana-fill-aids". 
2. Place the black injector tip against the outer thigh Hold the injector at a right angles (approx. 90°) to the thigh.	6. Lie the person down with legs raised 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. 
3. Push the black tip as hard as you can into the outer thigh Wait until you hear a 'click' confirming the injection has started, then keep it pushed in. Hold the injector firmly in place against the thigh for 10 seconds (a slow count to 10) then remove. The black tip will extend automatically and hide the needle. 	7. If there are no signs of improvement after 5 minutes, use a second Jext AAI The person should remain still and lying down until the ambulance arrives. Don't try to get up, even if you start to feel better.
4. Massage the injection area for 10 seconds	8. Start CPR If there are no signs of life, start CPR immediately until help arrives. 

For more information
on Jext AAIs >>

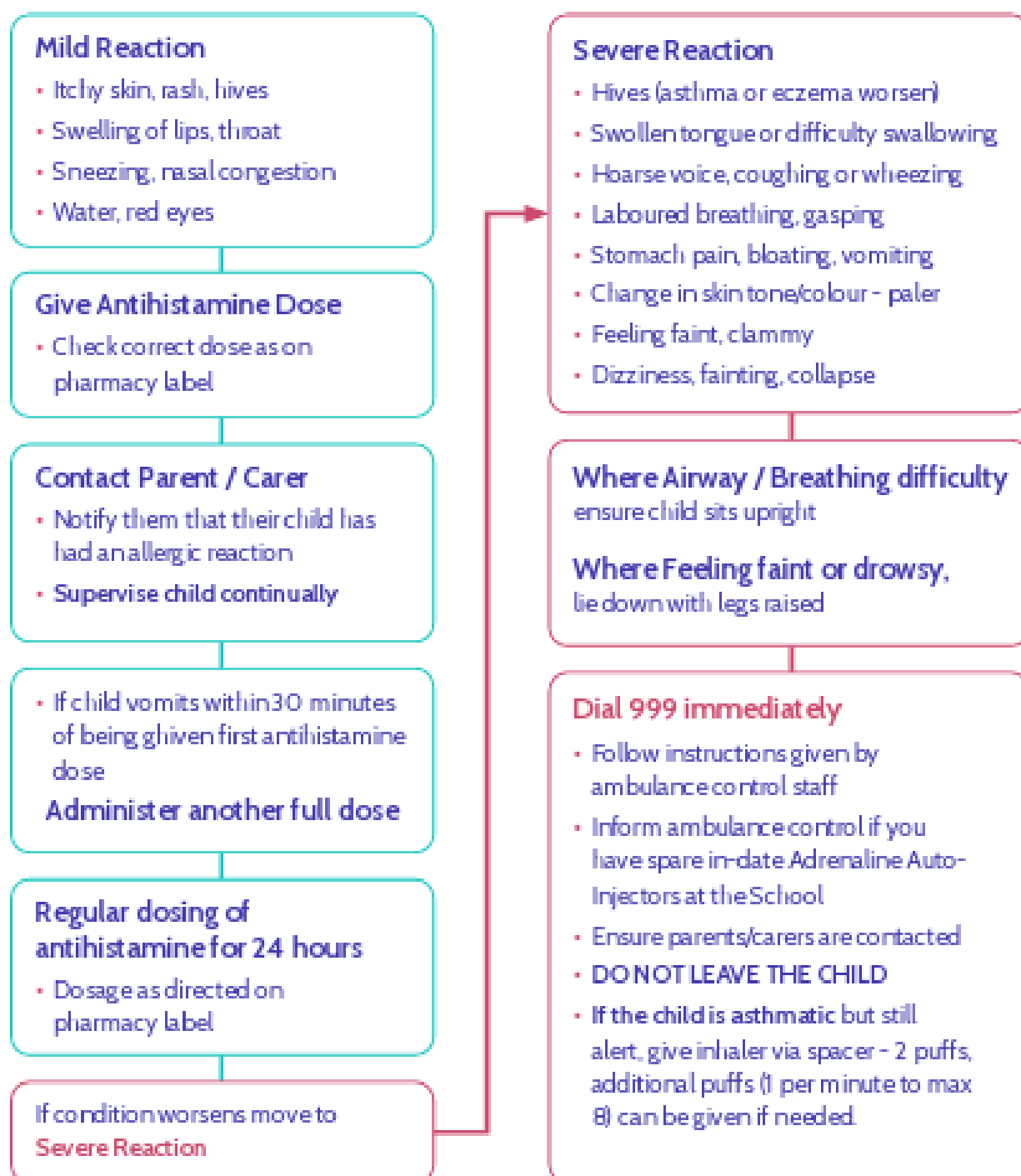


Sign up to the free expiry alert service
and receive reminders by text or email when
your Jext AAI is about to expire >>



Flowchart for Allergic Reaction without use of Adrenaline Auto-Injector.

Refer to the child's BSACI Allergy Action Plan if they have one and call for other staff help if needed





LINDEN PRIMARY SCHOOL

Growing Together To Create Lifelong Learners

Allergy Incident form

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

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

future to avoid a recurrence?			
Are there any training needs?	Yes No		
Does the policy need reviewing?	Yes No		
Have staff (and pupils) involved been offered support?	Yes No	Give details of support given:	
Does the individual have an allergy action plan?	Yes No	Has the allergy action plan been updated if needed?	Yes No
Does the individual have an IHP?	Yes No	Has the IHP been updated?	Yes No
Has replacement medication been obtained?	Yes No		
Have parents been informed?			
Parent comments			
Is this GCC SHE reportable?	Yes/No	Reported by:	
		Date:	
Date reported to Allergy Lead			
Allergy Lead's comments			
Allergy Lead' signature			
Form completer's signature			

Appendix .4.

Further support/guidance:

- **Allergy guidance for schools (England) (July 2026)**
<https://www.gov.uk/government/publications/school-food-standards-resources-for-schools/allergy-guidance-for-schools>
- **Allergy safety in schools (England) – NEW statutory guidance (July 2026)**
<https://www.gov.uk/government/publications/allergy-safety-in-schools>
- **Allergy UK Helpline**
 Tel: 01322 619898 (weekdays, 9am to 5pm)
<https://www.allergyuk.org/>
- **Early Years Foundation Stage (EYFS) Statutory Framework**
 Section 3: Safeguarding and Welfare Requirements, including Food and Drink
<https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2>
- **Example Menus for Early Years Settings in England – Part 1 Guidance**
 Includes guidance on managing food allergies, intolerances, allergen information and food labelling.
<https://www.gov.uk/government/publications/example-menus-for-early-years-settings-in-england>
- **Food Standards Agency (FSA) Food Allergy and Intolerance Online Training**
<https://allergytraining.food.gov.uk/>
- **Supporting Pupils with Medical Conditions at School (England)**
<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>
- **FSA Allergy and Intolerance Incident Reporting Tool**
<https://www.gov.uk/government/news/fsa-launches-allergy-and-intolerance-reporting-tool>
- **Using Emergency Adrenaline Auto-Injectors in Schools**
<https://www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools>

