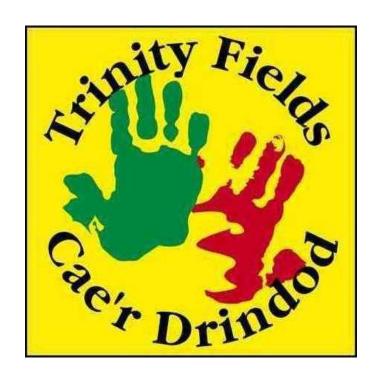
Trinity Fields School Allergy Policy



Learning together in a changing world, creating success for all.

Statement of Intent

Trinity Fields School is committed to promoting a whole-school approach to health care, welfare, and wellbeing, ensuring the safe management of members of our school community who live with specific allergies. We recognise that pupils may have diverse communication methods and varying levels of understanding, so all allergies will be taken seriously and managed professionally and appropriately. Through our actions, we will work proactively to:

- Minimise the risk of exposure within the school setting, adapting environments and routines as needed
- Encourage self-responsibility according to each pupil's ability, with tailored support and supervision
- Teach and reinforce avoidance strategies using accessible and individualized communication tools
- Develop and maintain robust, individualized emergency response plans for all pupils at risk of allergic reactions
- Ensure inclusivity and equal access for all pupils, regardless of ability or communication needs

Equalities Statement

Trinity Fields School is committed to actively supporting pupils with medical conditions, including allergies, to participate safely and fully in school life. We will make reasonable adjustments and provide appropriate support to meet individual needs, ensuring no pupil is excluded due to their condition.

Risk assessments will be conducted with input from pupils, families, healthcare professionals, and specialist staff, to identify necessary accommodations and adaptations for safety and inclusion.

Context

Food allergies are increasing globally and can be life-threatening. In an SEN school, pupils may have a range of cognitive, sensory, and communication challenges that require tailored strategies for allergy management. Approximately 5-8% of children in the UK have food allergies, and many classrooms include at least one pupil at risk of anaphylaxis. Severe allergic reactions can occur without prior warning, making staff awareness and preparedness critical.

Staff will be trained not only to recognize symptoms but also to communicate effectively with pupils who may have difficulty expressing discomfort or distress, ensuring a safe and timely response.

Additional Considerations for SEN Context

- Individual risk assessments will be developed for each pupil with allergies, detailing triggers, symptoms, and emergency procedures adapted to the pupil's communication and support needs.
- Close collaboration with parents, carers, therapists, and healthcare providers will ensure consistency in allergy management across school and home environments.
- Staff training will include modules on supporting pupils with communication difficulties and on the use of alternative communication methods during emergencies.

Principles

• To comply with all relevant environmental, health and safety legislation, regulations, and best practice guidance, including those specific to SEN settings.

- To proactively safeguard pupils/students with allergies by creating a safe and supportive environment that recognizes the varied needs and vulnerabilities of children with disabilities.
- To ensure pupils/students from diverse backgrounds, ethnicities, cultural heritages, and with different communication methods or cognitive abilities, are not disadvantaged when dealing with allergies, food labelling, or management plans.
- To collaborate closely with the catering team to ensure a robust process for menu planning, food labelling, storage, avoidance of cross-contamination, and stock control, with adaptations as necessary for special dietary needs and sensory preferences.
- To provide comprehensive staff training that includes recognising allergy symptoms (including anaphylaxis) and understanding how to communicate effectively with pupils who may have limited verbal skills or alternative communication needs.
- To develop accessible pupil awareness programmes on allergies through PHSE, life skills, and relevant curriculum areas, using visual aids, social stories, and other communication tools tailored to the pupils' abilities.

Allergy Management Checklist (Adapted)

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Does each pupil with allergies have a Risk Assessment developed with input from healthcare professionals, parents/carers, and relevant specialists?	Yes / No Yes, pupils with allergies will have a Risk Assessment developed with input from healthcare professionals, parents/carers, and relevant specialist
Has the school procured spare Adrenaline Auto-Injectors (AAIs) and other emergency medication, stored accessibly?	Yes / No Yes, this is always kept in the nurse's room.
Does each pupil have a signed Allergy Action Plan (AAP) that is easily accessible to all relevant staff?	Yes / No Yes, pupils with allergies will have a signed Allergy Action Plan (AAP), and it will be always kept in their one-page profile for easy access by all relevant staff.
Staff, including support workers, teaching assistants, therapists, and catering staff, received training in allergy and anaphylaxis management?	Yes / No Yes, staff who are working with the pupil will be aware and will have the relevant training in allergy and anaphylaxis management
Does the allergy policy include clear procedures on the storage, access, and administration of AAIs?	Yes / No Yes, storage will be stated on Risk Assessments, as each pupil's needs will be different
Has a comprehensive allergy risk assessment been completed, including for off-site activities, therapy sessions, and transport?	Yes / No Yes, Risk Assessments will be completed, including for off-site activities, therapy sessions, and transport
Does the policy explicitly include safeguarding pupils with allergies, including preventing bullying or exclusion related to their condition?	Yes / No Yes, all pupils at Trinity Fields School are treated the same, and the policy will explicitly include safeguarding pupils with allergies, including preventing bullying or exclusion related to their conditions

Policy Sign-Off

Headteacher Signature:	Date:
Chair of Governors Signature:	Date:
Next Review Date:	

FIRST AID FOR ANAPHYLAXIS



Recognise the Signs of Anaphylaxis...



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

B Breathing

- Difficult or noisy breathing
- Wheeze or persistent cough

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.

Administer an Adrenaline
 Auto Injector (AAI)
 without delay

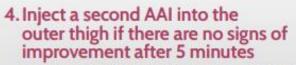


2. Dial 999 and say anaphylaxis ('ana-fill-axis')

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

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.



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.



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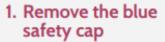
Registered charity England & Wales (181098) Scotland (SC051610). Based on BSACI and 2023 MHRA guidance.

ANAPHYLAXIS

HOW TO USE EPIPEN AAIS

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.



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!

Position the orange tip

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



Jab the EpiPen firmly into the outer thigh at a right angle. Hold firmly for 3 seconds, before removing and



4. Once the EpiPen AAI has been administered call 999

Ask for an ambulance and say "ana-fill-axis".

5. Lie the person down with legs raised immediately

If the person is not already lying down, they should do so, with

If breathing is difficult, allow them to sit. If they have vomited or feel sick, gently turn them on their side.

legs raised if possible.



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 AAIs >>



Sign up to the free expiry alert service

and receive reminders by text or email when your EpiPen is about to expire >>





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ed charity England & Wales (1181098) Scotland (SC051610), Based on BSACI and 2023 MHRA guid

ANAPHYLAXIS

HOW TO USE JEXT AAIS

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

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

 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.

2. Place the black injector tip against the outer thigh

Hold the injector at a right angles (approx. 90°) to the 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 peedle

 Massage the injection area for 10 seconds 5. Once the Jext AAI has been administered call 999

Ask for an ambulance and say "ana-fill-axis".



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.

If there are no signs of improvement after 5 minutes, use a second lext 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.

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

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Registered charity England & Wales (1181098) Scotland (SCOS1610). Based on BSACI and 2023 MHRA guidance. Source: Jext.

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

Mild Reaction

- · Itchy skin, rash, hives
- Swelling of lips, throat
- Sneezing, nasal congestion
- Water, red eyes

Give Antihistamine Dose

 Check correct dose as on pharmacy label

Contact Parent / Carer

- Notify them that their child has had an allergic reaction
- Supervise child continually
- If child vomits within 30 minutes of being ghiven first antihistamine dose

Administer another full dose

Regular dosing of antihistamine for 24 hours

 Dosage as directed on pharmacy label

If condition worsens move to Severe Reaction

Severe Reaction

- Hives (asthma or eczema worsen)
- · Swollen tongue or difficulty swallowing
- · Hoarse voice, coughing or wheezing
- Laboured breathing, gasping
- · Stomach pain, bloating, vomiting
- · Change in skin tone/colour paler
- · Feeling faint, clammy
- · Dizziness, fainting, collapse

Where Airway / Breathing difficulty ensure child sits upright

Where Feeling faint or drowsy, lie down with legs raised

Dial 999 immediately

- Follow instructions given by ambulance control staff
- Inform ambulance control if you have spare in-date Adrenaline Auto-Injectors at the School
- Ensure parents/carers are contacted
- DO NOT LEAVE THE CHILD
- If the child is asthmatic but still alert, give inhaler via spacer - 2 puffs, additional puffs (1 per minute to max 8) can be given if needed.

Flowchart for Allergic Reaction with 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

Mild Reaction

- · Itchy skin, rash, hives
- · Swelling of lips, throat
- Sneezing, nasal congestion
- · Water, red eyes

Give Antihistamine Dose

 Check correct dose as on pharmacy label

Contact Parent / Carer

- Notify them that their child has had an allergic reaction
- Supervise child continually
- If child vomits within 30 minutes of being ghiven first antihistamine dose

Administer another full dose

Regular dosing of antihistamine for 24 hours

 Dosage as directed on pharmacy label

If condition worsens move to Severe Reaction

Severe Reaction

- Hives (asthma or eczema worsen)
- Swollen tongue or difficulty swallowing
- Hoarse voice, coughing or wheezing
- Laboured breathing, gasping
- Stomach pain, bloating, vomiting
- Change in skin tone/ colour - paler
- · Feeling faint, clammy
- Dizziness, fainting, collapse

Where Airway / Breathing difficulty ensure child sits upright

Where Feeling faint or drowsy, lie down with legs raised

Administer Auto-Injector (AAI)

- Check in-date, safety cap intact
- Remove safety cap
- Hold needle firmly, inject into thigh
- AAI clicks, hold for 3 seconds
- Remove AAI carefully
- Send for 2nd AAI

Dial 999 immediately

- Follow instructions given by ambulance control staff
- Where no improvement after 5 minutes, administer a second dose
- Ensure parents/carers are contacted
- DO NOT LEAVE THE CHILD
- If the child is asthmatic but still alert, give inhaler via spacer - 2 puffs, additional puffs (1 per minute to max 8) can be given if needed.
- Hand over AAIs to ambulance crew on arrival or ambulance