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Allergy And Anaphylaxis Policy

1. Aims and Objectives

This policy outlines Uppingham School's approach to allergy management, including how the whole-school community works to reduce the risk of an allergic reaction happening and the procedures in place to respond if one does. It also sets out how we support our pupils with allergies to ensure their wellbeing and inclusion, as well as demonstrating our commitment to being an allergy aware school.

This policy applies to all staff, pupils, parents and visitors to the school and should be read alongside these other policies:

[Supporting pupils at school with medical conditions](#)

[National Minimum Standards for boarding schools](#)

Anti-Bullying Policy - <https://uppnet.fireflycloud.net/resource.aspx?id=281587&officeint=on>

Emergency Management of Anaphylaxis Guidelines -

[Emergency Management of Anaphylaxis February 2026](#)

<https://uppnet.fireflycloud.net/resource.aspx?id=270338&officeint=on>

Safeguarding (Child Protection) Policy

<https://uppnet.fireflycloud.net/resource.aspx?id=281476&officeint=on>

Pupil Mental Health Policy

<https://uppnet.fireflycloud.net/resource.aspx?id=280488&officeint=on>

Educational Visits Policy: <https://uppnet.fireflycloud.net/trips-1/educational-visits-policy>

2. What is an Allergy?

Allergy occurs when a person reacts to a substance that is usually considered harmless. It is an immune response and instead of ignoring the substance, the body produces histamine which triggers an allergic reaction.

Whilst most allergic reactions are mild, causing minor symptoms, some can be very serious and cause anaphylaxis, which is a life-threatening medical emergency.

People can be allergic to anything, but serious allergic reactions are most commonly caused by food, insect venom (such as a wasp or bee sting), latex and medication.

3. Definitions

ANAPHYLAXIS: Anaphylaxis is a severe allergic reaction that can be life-threatening and must be treated as a medical emergency.

UPPINGHAM

ALLERGEN: A normally harmless substance that, for some, triggers an allergic reaction. You can be allergic to anything. The most common allergens are food, medication, animal dander (skin cells shed by animals with fur or feathers) and pollen. Latex and wasp and bee stings are less common allergens.

Most severe allergic reactions to food are caused by just nine foods. These are eggs, milk, peanuts, tree nuts (which includes nuts such as hazelnut, cashew nut, pistachio, almond, walnut, pecan, Brazil nut, macadamia etc), sesame, fish, shellfish, soya and wheat.

There are 14 allergens required by UK law to be highlighted on pre-packed food. These allergens are celery, cereals containing gluten, crustaceans, egg, fish, lupin, milk, molluscs, mustard, peanuts, tree nuts, soya, sulphites (or sulphur dioxide), and sesame.

ADRENALINE AUTO-INJECTOR: Single-use device which carries a pre-measured dose of adrenaline. Adrenaline auto-injectors are used to treat anaphylaxis by injecting adrenaline directly into the upper, outer thigh muscle. Adrenaline auto-injectors are commonly referred to as AAI's, adrenaline pens or by the brand name EpiPen. There are two brands licensed for use in the UK: EpiPen and Jext Pen. For the purposes of this Policy we will refer to them as Adrenaline Pens.

ALLERGY ACTION PLAN: This is a document filled out by a healthcare professional, detailing a person's allergy and their treatment plan. The School uses the BSACI Action Plan.

DESIGNATED ALLERGY LEAD: The member of staff responsible for overseeing allergy management across the school and acting as the main point of contact for pupils, parents and staff.

NEFFY: Neffy (official name in the UK is EURNeffy) is a nasal spray which delivers adrenaline. It is a needle-free alternative to an adrenaline auto-injector. Neffy was approved for use in the UK in 2025.

INDIVIDUAL HEALTHCARE PLAN: A detailed document outlining an individual pupil's medical conditions, history, treatment, risks and action plan. This document should be created by schools in collaboration with parents/carers and, where appropriate, pupils. All pupils with an allergy who require active treatment should have an Individual Healthcare Plan and it should be read in conjunction with their Allergy Action Plan.

RISK ASSESSMENT: A detailed document outlining an activity, the risks it poses, and any actions taken to mitigate those risks. Allergy should be included on all risk assessments for events on and off the school site.

SPARE ADRENALINE PENS: Schools are able to purchase spare adrenaline pens. These should be held as a back-up, in case pupils' prescribed adrenaline pens are not available. They can also be used to treat a person who experiences anaphylaxis but has not been prescribed their own adrenaline.

UPPINGHAM

4. Roles and Responsibilities

Uppingham School takes a whole-school approach to allergy management.

4.1 Designated Allergy Lead

The Designated Allergy Lead is Carmela Senogles (Assistant Head: Safeguarding). They report into the Headmaster. They are responsible for:

- Ensuring the safety, inclusion and wellbeing of pupils and staff with an 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, pupils and parents with concerns or questions about allergy management;
- Ensuring allergy information is recorded, up-to-date and communicated to all staff (this is delegated to the Woodfield nursing team).
- 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, pupils and parents have a good awareness of the School's Allergy and Anaphylaxis Policy, and other related procedures.
- Reviewing the school's stock of spare adrenaline pens (check the school has an appropriate number for the setting, that they hold the correct dose, that spare adrenaline pens are stored appropriately). This is delegated to the Health Centre Nurse Manager.
- Ensuring staff know where the school keep the spare adrenaline pens.
- Promoting staff to report all allergic reactions or near-misses on EcoOnline. They are responsible for ensuring reporting these to the appropriate authority (e.g. under RIDDOR) where necessary and ensuring the circumstances are investigated and learnings shared;
- Regularly reviewing and updating the Allergy and Anaphylaxis Policy; and
- Ensuring there is an anaphylaxis drill once a year.

At regular intervals the Designated Allergy Lead will check procedures and report to the Uppingham Leadership Team (ULT).

4.2 School Nurse/ Healthcare Team / Medical Lead

Helen Bell (Health Centre Nurse Manager) is responsible for:

- Collecting and coordinating the paperwork (including Allergy Action Plans and Individual Healthcare Plans) and information from families (this is likely to involve liaising with the admissions team for new joiners);
- Supporting the Designated Allergy Lead with disseminating this information to all school staff, including the catering team, occasional staff and those running clubs
- All pupils who have an adrenaline pen will have this recorded on ECMR. Staff are able to access a full list of all pupils with allergies via pupil report server.
- Mandatory staff training is on iTrent for all staff annually and included in the first aid at work training every three years for those who hold first aid training.
- Providing on-site adrenaline pen training for staff and pupils and refresher training as requested e.g. before school trips; sports fixtures.
- Reviewing the School's stock of spare adrenaline pens (check the School has an appropriate number for the setting, that they hold the correct dose, that spare adrenaline pens are stored appropriately). A copy of this is kept in Woodfield Health Centre.
- Regularly checking spare adrenaline pens are where they should be, and that they are in date;
- Replacing the spare adrenaline pens when necessary;

UPPINGHAM

4.3 Admissions Team

The Admissions team is likely to be the first to learn of a pupil or visitor's allergy. They should work with the Designated Allergy Lead and school nursing team / Health Centre Nurse Manager to ensure that:

- There is a clear method to capture allergy information or special dietary information at the earliest opportunity (this will 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, Uppingham Surgery);
- Parents and applicants are informed of catering arrangements during admission events; *and*
- Plans are made for emergency medication if the child is to be left without parental supervision.

4.4 All Staff

All school staff, including teaching staff, support staff, occasional staff (for example sports coaches and music teachers) and embedded contractors are responsible for:

- Championing and practising allergy awareness across the School;
- Reading, understanding and putting into practice the Allergy and Anaphylaxis Policy and related procedures, and asking for support if needed;
- Being aware of pupils (and staff, when necessary) with allergies and what they are allergic to; information available on the report server and in pupils IHCPs
- Considering the risk to pupils with allergies posed by any activities and assessing whether the use of any allergen in activity is necessary and/or appropriate;
- Ensuring pupils always have access to their medication
- Being able to recognise and respond to an allergic reaction, including anaphylaxis, after appropriate training;
- Taking part in training and anaphylaxis drills as required (at least once a year). Whilst it is the School's responsibility to ensure staff have received annual training, if the member of staff is aware they have not received any allergy training in the last 12 months they should alert a manager;
- Considering the safety, inclusion and wellbeing of pupils with allergies at all times. Preventing and responding to allergy-related bullying, in line with the school's anti-bullying policy;
- Forwarding any communication or information that comes directly to them from parents regarding allergens to Woodfield Health Centre staff
- Completing any additional training required by the School relating to allergy management or anaphylaxis
- The house pastoral teams are responsible for coordinating medication with families and ensuring medication is in date. It is the responsibility of parents/carers to ensure medication is up to date when medication is brought into school. The pastoral team also have systems in place to check this and notify the parents/carers when they see the expiry dates are approaching in respect of medicines held by the School.

4.5 All Parents/Carers

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

- Providing the Admissions team, House team and/ or Woodfield 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, hay fever, rhinitis or eczema;

UPPINGHAM

- 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; and
- Encouraging their child to be allergy aware.
- Supporting the School in encouraging their children to always carry 2 AAls adrenaline pens or EURneffy spray if prescribed.

4.6 Parents of children with allergies

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

- Work with the School to fill out an Individual Healthcare Plan and provide an accompanying Allergy Action Plan;
- If applicable, provide the School or their child with two labelled adrenaline pens and any other medication, for example antihistamine (with a dispenser, ie. spoon or syringe), inhalers or creams;
- Ensure medication is in-date and replaced at the appropriate time;
- Ensure their child has access to their allergy medication, including two adrenaline pens if prescribed, on the journey to and from school;
- 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 and sign the associated permission for it to be shared appropriately as part of their allergy management; and
- 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.

4.7 All pupils

All pupils at the School should:

- Be allergy aware;
- Understand the risks allergens might pose to their peers and respect measures to support them;
- All pupils will learn how to recognise an allergic reaction and support their peers and staff in case of an emergency;

4.8 Pupils with allergies

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

- Knowing what their allergies are and how to mitigate personal risk
- Avoiding their allergen as best they can;
- Understanding the importance of following the school-specific processes of lunch and snack services and how that mitigates risk;
- Understanding that they should notify a member of staff if they are not feeling well, or suspect they might be having an allergic reaction;
- Carrying two adrenaline auto-injectors or EURneffy with them at all times, if age and capability appropriate. They must only use them for their intended purpose;
- Understanding how and when to use their adrenaline auto-injector or EURneffy
- 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;

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- When leaving the school site, pupils 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; and
- Pupils should ensure they have their medication with them on the journey to and from school, on trips and other co-curricular activities.

5. Information And Documentation

5.1 Register of pupils with an allergy

The school has a register of pupils who have a diagnosed allergy. This includes children who have a history of anaphylaxis or have been prescribed adrenaline pens or EURNeffy spray, as well as pupils with an allergy where no adrenaline has been prescribed.

5.2 Individual Healthcare Plans

Each pupil with an allergy that requires active management has an Individual Healthcare 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 pupil has been prescribed including dose, this should include adrenaline pens, adrenaline nasal sprays, antihistamine etc;
- A copy of their Allergy Action Plan.

6. Assessing Risk

Allergens can crop up in unexpected places. Staff (including visiting staff) will consider allergies in all activity planning and include it in risk assessments. Some examples include:

- Classroom activities, for example, crafts using food packaging, science experiments where allergens are present, food lessons or cooking;
- Bringing animals into the school, for example a dog or hatching chick eggs can pose a risk;
- Running activities or clubs where they might hand out snacks or food “treats”. Ensure safe food is provided or consider an alternative non-food treat for all pupils; and
- Planning special events, such as cultural days and celebrations.

Inclusion of pupils with allergies must be considered alongside safety and they should not be excluded. If necessary, adapt the activity. The School will ensure compliance with the Equality Act 2010.

7. Food, Including Mealtimes and Snacks

7.1 Catering in school

The School is committed to providing a safe meal for all students, staff and visitors, including those with food allergies.

- Due diligence is carried out with regard to 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 those with allergies will follow good hygiene practices, food safety and allergen management procedures;

UPPINGHAM

- The catering team will endeavour to get to know the pupils with allergies and what their allergies are, supported by school staff;
- The catering team will endeavour to provide varied meal options to students and staff with allergies;
- The school has robust procedures in place to identify pupils with food allergies, these are: all members of the house pastoral team are made aware of any pupil with an allergy. Each kitchen has an up to date 'think of me' sheet with a photo of the pupil and their allergy. When house swaps occur the house team will notify the receiving house verbally and electronically They will then notify the kitchen staff.
- Food containing the main 14 allergens (see Allergens definition) will be clearly labelled. Other ingredient information will be available on request via the allergen tablet in each house and or in the allergen folder.
- Pre-packaged food will comply with PPDS legislation (Natasha's Law) requiring the allergen information to be displayed on the packaging;
- Allergen information will be provided to school staff students and visitors using allergy reports via allergen folders and or allergen tablets with ingredients list created and available through the menu management tool, The Source.
- Nuts and products containing nuts are not ordered or used within the school catering department. This includes food in the school buttry and the school vending machine (not including the vending machine in the Uppingham School Sports Centre).
- Allergen reports declaring the presence of the 14 mandatory FIR allergens are available in English for all Loadstone House recipes.

7.2 Food brought into school

When bringing food into school, pupils, parents and staff should be mindful of individuals within their environment with a known allergy. Individuals should make every effort to review the ingredients for items being brought in and avoid those items with appropriate allergies.

Where food is stored in kitchen cupboards or fridges all open packaging should be wrapped/covered.

Boarding houses

- Each house will ensure they communicate known allergens with all pupils and staff
- If there is a known allergen, the house pastoral team will risk assess each house
- Birthday cakes (and similar items) provided by inhouse catering should have all allergens clearly labelled. If the cake is purchased the ingredients list must be available.
- 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 peanuts and tree nuts as much as possible on the site and check all foods coming into the kitchen

Classrooms

Eating in classrooms is prohibited.

7.3 Food hygiene for pupils

- Pupils should wash their hands before and after eating
- Sharing, swapping or throwing food is not allowed;
- Water bottles and packed lunches should be clearly labelled; and

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- The school has kitchens or food prep areas for the pupils in boarding houses. Pupils will be reminded that they should not bring in any food that contains ingredients that is listed in the list of known allergies for the house.

8. Educational Visits and Sports Fixtures

- Staff leading the trip will have a register of pupils with allergies and details of their medication in the child's IHCP.
- Allergies will be considered on the risk assessment and catering provision put in place;
- Parents, and pupils where appropriate, may be consulted if considered necessary, or if the trip requires an overnight stay;
- Staff (and some pupils, if appropriate) accompanying the trip will be trained to recognise and respond to an allergic reaction; Mandatory staff training is on iTrent for all staff annually and included in the first aid at work training every three years. Annual anaphylaxis drills will be attended by all staff. Trip leaders may contact Woodfield for additional face to face training prior to a trip if pupils on trip have a diagnosed anaphylaxis
- Allergens will be clearly labelled on catered packed lunches.
- If attending Match Tea at another school, details of their dietary requirements will be sent ahead to ensure they have a safe meal. Sports staff will liaise with house teams to collect known dietary requirements.
- All pupils with an AAI or adrenaline nasal spray will travel with two AAI pens (or EURneffy spray) and keep them on their person. In specific circumstances (for example swimming) the trip leader will hold the AAI (or EURneffy spray) whilst the child completes the activity and remain within a close proximity of the child. They will give the AAI's (or EURneffy spray) back to the child at the earliest possibility. The trip leader will ensure they have the correct medication prior to the trip leaving.
- Only food provided by Uppingham school can be consumed on the bus.

9. Insect Stings

Pupils 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; and
- Keep food and drink covered.

The school estates team will monitor the grounds for wasp or bee nests. Pupils (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.

10. Animals

It's normally the dander (flakes of skin) saliva or urine that causes a person with an animal allergy to react.

Precautions to limit the risk of an allergic reaction include:

- A pupil with a known animal allergy should avoid the animal to which they are allergic;
- If an animal comes on site a risk assessment will be done prior to the visit;
- Areas visited by animals will be cleaned thoroughly;

UPPINGHAM

- Anyone in contact with an animal will wash their hands after contact;
- If an animal lives on site, for example in a Boarding House, pupils, parents and staff will be made aware and consideration and adaptations will be made. The animal will remain on the private side of the house.
- School trips that include visits to animals will be carefully risk assessed.

11. Allergic Rhinitis / Hay Fever

Pupils with a seasonal pollen allergy and hay fever and persistent nasal allergy due to house dust mites or other allergens should have this recorded. If they require any active treatment they will have an IHCP which will be followed (which includes avoiding the allergen and taking medication as prescribed). If a pupil is unable to participate in an activity due to allergic rhinitis/ hay fever (for example they may not be able to play a sports match in a certain area), this should be recorded on their IHCP and staff should follow this plan.

12. Inclusion and Mental Health

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 should 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 House pastoral team.
- Affected pupils will be given consideration in advance of wider school discussions about allergy and school Allergy Awareness initiatives; and
- Bullying related to allergy will be treated in line with the school's anti-bullying policy.

13. Adrenaline Pens / Adrenaline Nasal Sprays

See the government guidance on Adrenaline Pens in Schools

13.1 Storage of adrenaline pens

- Pupils prescribed with adrenaline pens must carry with them their two AAI in-date pens at all times;
- During sports fixtures these may be left with the staff member directly supervising the activity.
- Spot checks will be made to ensure adrenaline pens are where they should be 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); and
- Used or out of date pens will be disposed of at Woodfield as sharps.

13.2 Spare adrenaline pens can be used in an emergency for any pupil prescribed an adrenaline nasal spray if this is not available.

This school has eight spare adrenaline pens to be used in accordance with government guidance. In addition to this, the School health centre Woodfield has additional adrenaline pens and ampules of adrenaline.

UPPINGHAM

The locations of spare adrenaline pens are clearly signposted. These are:

- New English Block
- Highfield Boarding House
- Farleigh Boarding House
- Uppingham School Sports Centre
- Woodfield Health Centre

Please note that Woodfield have additional adrenaline pens and can be called to support in any emergency after calling 999.

The Allergy Lead and Health centre Nurse Manager Lead Nurse are responsible for:

- Deciding how many spare pens are required
- What dosage is required, based on the Resuscitation Council UK's age-based guidance (see page 11);
- Which brand(s) to buy.
- The purchasing of spare adrenaline pens which can be obtained at low cost from a local pharmacy. See government guidance above; and
- Distribution around the site and clear signage. The locations of AAls and AEDs are on the school map which is accessible via UPPNET.

13.3 Adrenaline pens on off-site activities

- No child with a prescribed adrenaline pen will be able to go on a school trip without two of their own devices. It is the trip leader's responsibility to check they have them;
- Adrenaline pens will be kept close to the pupils at all times 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 pupils will be aware of pupils with allergies and be trained to recognise and respond to an allergic reaction.

14. Responding to an Allergic Reaction /Anaphylaxis

[See appendix on recognising and responding to an allergic reaction](#)

If a pupil has an allergic reaction:

- Treat the pupil in accordance with their Allergy Action Plan;
- Instigate the school's Emergency Response Plan <https://uppnet.fireflycloud.net/resource.aspx?id=270338&officeint=on>
- If anaphylaxis is suspected administer adrenaline without delay;
- Treat the pupil where they are. Lie them down with their legs raised and bring medication to them;
- Use pupil's own prescribed medication if immediately available;
- Pupil can administer the adrenaline pen/nasal spray themselves [if able to] or a member of staff can administer pen/nasal spray. Ideally the member of staff will be trained, but in an emergency, anyone can administer adrenaline;
- If the pupil's own adrenaline pen/nasal spray is not available or misfires, then use a spare adrenaline pen;
- Call 999, stating you suspect anaphylaxis and have given AAI/nasal spray
- Call Woodfield for support whilst awaiting emergency services

UPPINGHAM

- If anaphylaxis is suspected but the pupil does not have a prescribed adrenaline pen or Allergy Action Plan, lie the pupil down with their legs raised, call 999 and explain anaphylaxis is suspected. Inform the operator that spare adrenaline pens are available and follow instructions from the operator. The MHRA says that in exceptional circumstances, a spare adrenaline pen can be administered to anyone for the purposes of saving their life;
- If, after 5 minutes, there is no improvement, use a second adrenaline pen and call the emergency services again and inform them that a second dose of adrenaline has been given;
- Do not move the pupil until a medical professional/ paramedic has arrived, even if they are feeling better; and
- Be ready to commence CPR if required
- Anyone who has had suspected anaphylaxis and received adrenaline must go to hospital, even if they appear to have recovered. A member of staff should accompany them in an ambulance until a parent or guardian arrives.

15. Training

15.1 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. Staff will be given the opportunity to practise with a training adrenaline auto-injector;
- How the school manages allergy, for example Emergency Response Plan, documentation, communication etc;
- Where adrenaline pens are kept (both prescribed pens and spare pens) and how to access them;
- The importance of inclusion of pupils with food allergies, the impact of allergy on mental health and wellbeing and the risk of allergy related bullying;
- Understanding food labelling; and
- Taking part in an anaphylaxis drill.

15.2 The School will carry out an anaphylaxis drill once a year

This includes:

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

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16. Asthma

It is vital that pupils with allergies keep their asthma well controlled, because asthma can exacerbate allergic reactions.

<https://uppnet.fireflycloud.net/resource.aspx?id=270337&officeint=on>

17. Reporting Allergic Reactions

The School will log allergic reaction incidents and near-misses.

<https://uppnet.fireflycloud.net/resource.aspx?id=275827&officeint=on>

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APPENDIX ONE:



MANAGING ALLERGIC REACTIONS

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 don't always progress from mild to moderate to more serious; sometimes they are life-threatening within minutes.

MILD TO MODERATE ALLERGIC REACTIONS

Symptoms include:

- Swollen lips, face or eyes
- Itchy or tingling mouth
- Hives or itchy rash on skin
- Abdominal pain
- Vomiting
- Change in behaviour

Response:

- Stay with pupil
- Call for help
- Locate adrenaline pens
- Give antihistamine
- Make a note of the time
- Phone parent or guardian
- Continue to monitor the pupil

SERIOUS ALLERGIC REACTIONS / ANAPHYLAXIS

The most serious type of reaction is called **ANAPHYLAXIS**. Anaphylaxis is uncommon, and children experiencing it almost always fully recover.

In rare cases, anaphylaxis can be fatal. It should always be treated as a time-critical medical emergency.

Anaphylaxis usually occurs within 20 minutes of eating a food but can begin 2-3 hours later.

People who have never had an allergic reaction before, or who have only had mild to moderate allergic reactions previously, can experience anaphylaxis.

UPPINGHAM

APPENDIX TWO:



RESPONDING TO ANAPHYLAXIS

SYMPTOMS OF ANAPHYLAXIS

A – Airway

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

B – Breathing

- Difficult or noisy breathing
- Wheeze or cough

C - Circulation

- Persistent dizziness
- Pale or floppy
- Sleepy
- Collapse or unconscious

IF YOU SUSPECT ANAPHYLAXIS, GIVE ADRENALINE FIRST BEFORE YOU DO ANYTHING ELSE.

DELIVERING ADRENALINE

1. Take the medication to the patient, rather than moving them.
2. The patient should be lying down with legs raised. If they are having trouble breathing, they can sit with legs outstretched.
3. It is not necessary to remove clothing but make sure you're not injecting into thick seams, buttons, zips or even a mobile phone in a pocket.
4. Inject adrenaline into the upper outer thigh according to the manufacturer's instructions.
5. Make a note of the time you gave the first dose and call 999 (or get someone else to do this while you give adrenaline). Tell them you have given adrenaline for anaphylaxis.
6. Stay with the patient and do not let them get up or move, even if they are feeling better (this can cause cardiac arrest).
7. Call the pupil's emergency contact.
8. If their condition has not improved or symptoms have got worse, give a second dose of adrenaline after 5 minutes, using a second device. Call 999 again and tell them you have given a second dose and to check that help is on the way.
9. Start CPR if necessary.
10. Hand over used devices to paramedics and remember to get replacements.

For more information see the Government's [Guidance for the use of adrenaline auto-injectors in schools](#).