The Polesworth School
ENSURING EXCELLENCE

Allergy Management Policy

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Version Control

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Contents

1. Aims

This policy aims to:

- Set out our school's approach to allergy management, 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.
- Ensure pupils with allergies are identified and supported appropriately.
- Ensure Individual Healthcare Plans are in place where required.
- Support compliance with existing legislation, statutory guidance and official Government guidance.
- Ensure that allergy incidents and near misses are recorded, reviewed and used to improve practice across the school.

This policy will be published on the school's website and made available to staff, parents/carers and other stakeholders upon request. The policy will be reviewed annually or sooner where there are changes to legislation, statutory guidance or school procedures.

2. Legislation and guidance

This policy is based on the Department for Education (DfE)'s guidance on allergies 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

2.1 Definitions

Allergy

An allergy is an immune system reaction to a substance that is usually harmless to most people. The substance causing the reaction is known as an allergen.

Allergen

An allergen is something that can cause an allergic reaction. Common allergens include nuts, milk, egg, sesame, fish, shellfish, wheat, soya, insect stings, latex and some medicines.

Anaphylaxis

Anaphylaxis is a severe and potentially life-threatening allergic reaction. It can develop rapidly and must always be treated as a medical emergency.

Adrenaline Auto-Injector

An adrenaline auto-injector, often referred to as an AAI or adrenaline pen, is a device used to deliver adrenaline in an emergency. Common brands include EpiPen and Jext.

Individual Healthcare Plan

An Individual Healthcare Plan, or IHP, sets out a pupil's medical needs, triggers, symptoms, medication, emergency arrangements and the support required in school

Near Miss

A near miss is an event where a pupil with an allergy is exposed, or potentially exposed, to an allergen but suffers no allergic reaction due to chance, timely intervention or other circumstances. Near misses should be reported and reviewed in the same way as other safety incidents to help prevent future harm.

2.2 Benedict Law

Benedict's Law introduces a consistent national framework for allergy safety in schools. Core measures include:

- Whole-school allergy policies setting out how schools manage allergies and respond to emergencies
- Staff training so teachers and school staff can recognise and respond to anaphylaxis
- Access to emergency adrenaline auto-injectors (AAIs) where needed
- Individual healthcare or allergy action plans for pupils with diagnosed allergies
- Improved communication and record-keeping around allergies and allergic reactions
- Allergy-aware catering, curriculum, trip and event arrangements
- Regular review of allergy arrangements

These measures aim to ensure that every school has the systems in place to respond quickly and effectively to allergic emergencies.
All stakeholders have a role in ensuring that allergy management is successful, as detailed below.

Allergy guidance for schools - GOV.UK

3. Roles and responsibilities

We take a whole-school approach to allergy awareness. The Polesworth School is committed to providing a safe, inclusive and supportive environment for all pupils, staff and visitors, including those with allergies and those at risk of anaphylaxis. Allergies can be life-threatening. Anaphylaxis is a medical emergency and requires immediate action. The school recognises that effective allergy management requires clear procedures, trained staff, good communication, accurate pupil information, safe food management, suitable emergency arrangements and regular review. This policy sets out the school's minimum expectations for allergy management & roles and responsibilities in school.

3.1 Allergy lead

The nominated allergy lead is the Senior Deputy Head Teacher.

They're responsible for:

Promoting and maintaining allergy awareness across our school community

Recording and collating allergy and special dietary information for all relevant pupils (although the allergy lead has ultimate responsibility, the information collection itself may be delegated to administrative staff)

Ensuring:

- All allergy information is up to date and readily available to relevant members of staff
- All pupils with allergies have an allergy action plan completed by a medical professional
- All staff receive an appropriate level of allergy 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
- Keeping stock of the school's adrenaline auto-injectors (AAIs)
- Regularly reviewing and updating the allergy policy and publishing on the schools website.

3.2 Inclusion Manager

The school inclusion manager is responsible for:

- Co-ordinating the paperwork and information from families
- Co-ordinating medication with families
- Checking spare AAIs are in date
- Any other appropriate tasks delegated by the allergy lead
- Ensuring individual health plans are up to date

3.3 Teaching and support staff

All teaching and support staff are responsible for:

- Promoting and maintaining allergy awareness among pupils
- Maintaining awareness of our allergy policy and procedures
- Are vigilant about allergies and anaphylaxis amongst their pupils in the classroom and around school, especially in dining areas
- Being able to recognise the signs of severe allergic reactions and anaphylaxis
- Attending appropriate allergy training as required
- Being aware of specific pupils with allergies in their care
- Carefully considering the use of food or other potential allergens in lesson and activity planning
- Ensuring the wellbeing and inclusion of pupils with allergies
- Intervene to support anti-bullying of pupils with the condition

Any staff leading on a school trip must check that all pupils 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 or off-site extra curricula activity must ensure they carry all relevant emergency supplies with them and are aware of administration procedure for medication

3.4 Parents/carers

Parents/carers are responsible for:

- Being aware of our school's allergy 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
- Contribute to the provision of an IHP in partnership with the school, and relevant healthcare professional, where required
- Provide any other written medical documentation, instructions and medications as directed by a health professional

- 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
- Carefully considering the food they provide to their child as packed lunches and snacks, and trying to limit the number of allergens included
- Following the school's guidance on food brought in to be shared
- Talk with their child about allergy self-management, including what foods are safe and unsafe, how to read food labels, strategies for avoiding allergens, how to spot symptoms of allergy, how and when to tell an adult if experiencing an allergic reaction
- Updating the school on any changes to their child's condition

3.5 Pupils with allergies

These pupils are responsible for:

- Being aware of their allergens and the risks they pose
- As soon as they suspect they are experiencing signs of allergic reaction, tell an adult
- Understanding how and when to use their adrenaline auto-injector
- Be proactive in the care and management of their food allergies and reactions and medication
- Be sure not to exchange food with others and take care to avoid any foods which may cause an allergic reaction
- Avoid eating anything with unknown ingredients
- Know where their medication is kept if they have an allergic reaction
- If age-appropriate, carrying their adrenaline auto-injector on their person and only using it for its intended purpose

3.6 Pupils without allergies

These pupils are responsible for:

- Being aware of allergens and the risk they pose to their peers
- Avoid bringing into school food containing nuts
- Older pupils might also be expected to support their peers and staff in the case of an emergency.

3.7 Catering Staff & Providers

Catering staff and catering providers must:

- Comply with food safety and allergen information requirements.
- Provide accurate allergen information for food served;
- Prevent cross-contamination as far as reasonably practicable.
- Follow agreed procedures for pupils with food allergies;
- Ensure catering staff receive appropriate allergen training;
- Communicate menu changes or ingredient changes promptly;
- Liaise with the school regarding pupils with known allergies.

Where catering is provided by a third-party contractor, the school must ensure that allergy management expectations are included in contract monitoring and communication arrangements.

3.8 Governors

- 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. It is good practice to log all training and attendees.
- Ensure adequate resources for managing allergies are available
- Monitor the effectiveness of this Policy to ensure it remains fit for purpose

4. 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.

5. Managing risk

5.1 Hygiene procedures

- Pupils are reminded to wash their hands before and after eating
- Pupils have their own named water bottles

5.2 Catering

The school's catering provider has comprehensive procedures in place to support pupils with food allergies and other medically prescribed dietary requirements. These procedures are designed to minimise risk, ensure compliance with food safety legislation, and provide safe meal options for all students.

Identification and Management of Allergies

Prior to the commencement of any new catering contract, the provider works with the school to identify all pupils with dietary requirements. Allergy information is obtained from the school, pupils are risk-assessed according to their needs, and individual allergen or bespoke menus are developed where required. Dietary requirements are recorded on the till system to support safe food choices and identify allergens at the point of sale. The provider encourages pupils to take an active role in managing their dietary needs by seeking allergen information from catering staff.

Staff Training

All catering staff receive allergen management training as part of their induction. This includes training in the company's specialist allergen procedures, Benedict's Law training, practical instruction

on the school's allergen matrix, and mandatory allergen awareness training. Ongoing training and monitoring ensure staff remain competent in managing food allergies safely.

Food Preparation and Cross-Contamination Controls

The provider follows strict food safety procedures to reduce the risk of allergen cross-contamination, including:

- Thorough cleaning of work areas and equipment between tasks.
- Strict handwashing procedures.
- Separate storage of allergenic ingredients.
- Clear labelling of ingredients and prepared foods.
- Safe food handling practices during production and service.

Whilst every effort is made to minimise cross-contamination, the provider acknowledges that allergens cannot be completely eliminated from a busy catering environment except where individually managed meals are prepared for high-risk pupils.

Nut-Aware Environment

The provider supports the school's approach to managing serious nut allergies and requests that pupils do not bring products containing nuts, or foods labelled "may contain nuts", onto the school site. This helps reduce the risk of accidental exposure for individuals with severe allergies.

Allergen Information and Labelling

Accurate allergen information is maintained for all menu items through allergen matrices, which are regularly reviewed and updated. Allergen information is available to pupils, parents, and staff on request.

Where foods are pre-packed for direct sale (PPDS), such as sandwiches, wraps, salads and desserts, products are labelled in accordance with Natasha's Law, including a full ingredients list and clear identification of allergens.

Monitoring and Compliance

The catering provider undertakes regular allergen audits, management checks, and operational spot checks to ensure procedures are consistently followed. Any issues identified are addressed immediately through corrective actions and staff retraining where necessary.

Communication and Reporting

The catering provider requires any changes to a pupil's medical dietary requirements to be communicated promptly by the school and parents/carers. Any allergen-related concerns, incidents, or risks are reported and investigated in line with company procedures.

This allergen management framework forms an important part of the school's overall approach to safeguarding pupils with food allergies and supporting their health, safety, and wellbeing.

5.3 Food restrictions

We acknowledge that it is impractical to enforce an allergen-free school. However, we would like to encourage pupils and staff to avoid certain high-risk foods to reduce the chances of someone experiencing a reaction. These foods include:

- Packaged nuts
- Cereal, granola or chocolate bars containing nuts
- Peanut butter or chocolate spreads containing nuts
- Peanut-based sauces, such as satay
- Sesame seeds and foods containing sesame seeds

If a pupil brings these foods into school, they may be asked to eat them away from others to minimise the risk, or the food may be confiscated.

5.4 Insect bites/stings

When outdoors:

- Shoes should always be worn
- Food and drink should be covered

5.5 Support for mental health

Pupils with allergies will have additional support through:

- Pastoral care
- Regular check-ins with their tutor.

5.6 Events and school trips

For events, including ones that take place outside of the school, and school trips, no pupils with allergies will be excluded from taking part

The school will plan accordingly for all events and school trips, and arrange for the staff members involved to be aware of pupils' allergies and to have received adequate training

Appropriate measures will be taken in line with the schools AAI protocols for off-site events and school trips (see section 7.5).

6. Procedures for handling an allergic reaction

6.1 Register of pupils with AAIs

The school maintains a register of pupils who have been prescribed AAIs or where a doctor has provided a written plan recommending AAIs to be used in the event of anaphylaxis. The register includes:

- Known allergens and risk factors for anaphylaxis
- Whether a pupil has been prescribed AAI(s) (and if so, what type and dose)
- Where a pupil has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the pupil
- A photograph of each pupil to allow a visual check to be made (this will require parental consent)

The pupil information is recorded and accessible via the schools MIS system Arbor and can be checked quickly by any member of staff as part of initiating an emergency response.

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

6.2 Allergic reaction procedures

As part of the whole-school awareness approach to allergies, all staff are trained in the school's allergic reaction procedure, and to recognise the signs of anaphylaxis and respond appropriately

Staff are aware of how to administer AAIs (appendix 2), to minimise delays in pupil's receiving adrenaline in an emergency

- If a pupil has an allergic reaction, the staff member will initiate the school's emergency response plan, following the pupil's allergy action plan.
- If an AAI needs to be administered, a member of staff will use the pupil's own AAI, or if it is not available, a school one
- If the pupil has no allergy action plan, staff will follow the school's procedures on responding to allergy and, if needed, the school's normal emergency procedures.
- In the case of a pupil without a known history of anaphylaxis and allergy, the First Aider on duty should be contacted and appropriate first aid measures should be applied. An ambulance should be called if necessary.

In an Emergency

What to look for:

- swelling of the mouth or throat
- difficulty swallowing or speaking
- difficulty breathing
- sudden collapse / unconsciousness
- hives, rash anywhere on the body
- abdominal pain, nausea, vomiting
- sudden feeling of weakness
- strong feelings of impending doom

Anaphylaxis is likely if all of the following 3 things happen:

- sudden onset (a reaction can start within minutes) and rapid progression of symptoms
- life threatening airway and/or breathing difficulties and/or circulation problems (e.g. alteration in heart rate, sudden drop in blood pressure, feeling of weakness)
- changes to the skin e.g. flushing, urticaria (an itchy, red, swollen skin eruption showing markings like nettle rash or hives), angioedema (swelling or puffing of the deeper layers of skin and/or soft tissues, often lips, mouth, face etc.) Note: skin changes on their own are not a sign of an anaphylactic reaction, and in some cases don't occur at all. If the pupil has been exposed to something they are known to be allergic to, then it is more likely to be an anaphylactic reaction.

Anaphylaxis can develop very rapidly, so a treatment is needed that works rapidly. Adrenaline is the mainstay of treatment and it starts to work within seconds. Adrenaline should be administered by an injection into the muscle (intramuscular injection)

EMERGENCY ACTION

1. Stay with individual and call for a first aider and state that anaphylaxis is suspected
2. Administer the adrenaline auto-injector (EpiPen) immediately if anaphylaxis is suspected.
3. Call 999 for an ambulance and say that you think the individual is having an anaphylactic reaction
4. Lie the individual down – you can raise their legs, and if they're struggling to breathe, raise their shoulders or sit up slowly (if they're pregnant, lie on your left side)
5. If they have been stung by an insect, try to remove the sting if it's still in the skin
6. If the symptoms have not improved after 5 minutes, use a 2nd adrenaline auto-injector
7. If no signs of life commence CPR

8. Inform the school's Facilities and or Compliance Manager, and a member of SLT.
9. Phone parent/carer as soon as reasonably possible

The individual concerned must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can re-occur after treatment.

A school AAI device will be used instead of the pupil's own AAI device if:

- Medical authorisation and written parental consent have been provided, or
- The pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered)

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance

If the allergic reaction is mild (e.g. skin rash, itching or sneezing), the pupil will be monitored and the parents/carers informed.

6.3 School Events, Lettings and Community Use

The school will take reasonable steps to ensure that allergy risks are considered when planning and delivering school events.

This includes:

- Open evenings.
- Parents' evenings.
- Performances and productions.
- Sports events.
- Fundraising events.
- Community activities.
- Educational visits.

Where food is provided, organisers should consider allergen risks and ensure appropriate information is available.

Where school facilities are hired by external organisations, the school will make the hirer aware of relevant allergy management expectations and emergency procedures. **Responsibility for compliance during the period of hire rests with the hirer.**

6.4 Recording, Investigation and Learning from Allergy Incidents and Near Misses

The school is committed to learning from all allergy-related incidents and near misses to continually improve pupil safety.

An allergy incident includes any allergic reaction requiring first aid, medication, administration of an adrenaline auto-injector (AAI), ambulance attendance, or hospital treatment.

A near miss includes any event where a pupil was exposed, or nearly exposed, to a known allergen but no reaction occurred.

Following an allergy incident or near miss, the school will:

- Ensure the immediate safety and wellbeing of the pupil(s) involved.
- Inform parents/carers as soon as reasonably practicable.

- Record the incident in accordance with the school's reporting procedures.
- Review the circumstances surrounding the incident.
- Identify any procedural, communication, training or environmental factors that may have contributed.
- Implement any necessary corrective actions without delay.
- Share relevant learning points with staff where appropriate.
- Review risk assessments, Individual Healthcare Plans (IHPs) and control measures where necessary.

Serious incidents involving anaphylaxis, use of an AAI, ambulance attendance or hospital treatment will be reviewed by the Allergy Lead and reported to the Headteacher. Significant findings may also be shared with Governors to support strategic oversight.

7. Adrenaline auto-injectors (AAIs)

7.1 Purchasing of spare AAIs

The Facilities Manager is responsible for buying AAIs and ensuring they are stored according to the guidance.

The AAIs are purchased from Selles Medical and have to be approved by the Head Teacher before the order is confirmed and delivered.

	AAI Pen Information
Source	Selles Medical https://www.sellesmedical.co.uk/
Number of Adult Spares	6
Brand	Epi-pen
Emergency Allergy Response Kit Locations	Bramcote (near high-risk DT classrooms) Library Facilities Managers Office (near high-risk area Kitchen) Reception Nethersole Ed Visits Medical Kit

The school requires pupils with known anaphylaxis to keep a minimum of one spare AAI on their person at all times. Failure to comply could result in a pupil being sent home from school or excluded from a trip. It is the responsibility of the parent to ensure that all AAIs are in date and provide a replacement when necessary.

7.2 Storage (of both spare and prescribed AAIs)

The allergy lead will make sure all AAIs are:

- Stored at room temperature (in line with manufacturer's guidelines), protected from direct sunlight and extremes of temperature
- Kept in a safe and suitably central location to which all staff have access at all times, but is out of the reach and sight of children
- **Not** locked away, but accessible and available for use at all times

- **Not** located more than 5 minutes away from where they may be needed
- Spare AAIs will be kept separate from any pupil's own prescribed AAI, and clearly labelled to avoid confusion.
- AAIs will be located close to high risk areas such as Kitchen and Food Technology Rooms and the first aider on call will also carry a spare AAI.

Emergency anaphylaxis kit:

The school holds an emergency anaphylaxis kit. This includes:

- Spare AAIs
- Instructions for the use of AAIs
- Instructions on storage
- Manufacturer's information
- A checklist of injectors, identified by batch number and expiry date with monthly checks recorded
- A note of arrangements for replacing injectors
- A list of pupils to whom the AAI can be administered
- A record of when AAIs have been administered

Use of any AAI device should be recorded. This should include:

- Where and when the REACTION took place (e.g. PE lesson, playground, classroom).
- How much medication was given, and by whom
- Any person who has been given an AAI must be transferred to hospital for further monitoring.
- The pupil's parents should be contacted at the earliest opportunity.
- The hospital discharge documentation will be sent to the pupil's GP informing them of the reaction.

7.3 Maintenance (of spare AAIs)

The Compliance Manager & the Facilities Manager are responsible for checking monthly that:

- The AAIs are present and in date
- Replacement AAIs are obtained when the expiry date is near

7.4 Disposal

AAIs can only be used once. Once an AAI has been used, it will be disposed of in line with the manufacturer's instructions. Used AAIs can be given to the ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin for collection by the local council.

7.5 Use of AAIs off school premises

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

A First Aider should be present on all school trips; one school spare AAI pen is taken on all day trips and 2 are taken on residentials in addition to the pupils own AAI's.

8. Training

The school is committed to training all staff in allergy response. This includes:

- How to reduce and prevent the risk of allergic reactions
- How to spot the signs of allergic reactions (including anaphylaxis)
- The importance of acting quickly in the case of anaphylaxis
- Where AAIs are kept on the school site, and how to access them
- How to administer AAIs
- The wellbeing and inclusion implications of allergies
- Training will be carried out annually via smartlog.

The school will maintain records of all allergy training completed by staff. New staff, agency staff and long-term volunteers will receive appropriate allergy awareness information as part of their induction. Training requirements will be reviewed annually and following any significant allergy incident or near miss.

9. Links to other policies

This policy links to the following policies and procedures:

- First Aid Policy
- Health & Safety Policy/Induction guide

10. Other Support & Resources

- Allergy Guidance for Schools - https://www.gov.uk/government/publications/school-food-standards-resources-for-schools/allergy-guidance-for-schools
- Allergy UK Helpline: providing support, advice and information for those living with allergic disease tel. weekdays 9am-5pm 01322 619898 - www.allergyuk.org
- Food Standards Agency food allergy and intolerance online training - https://allergytraining.food.gov.uk/
- For pupils / students with Medical Conditions at School - Supporting pupils with medical conditions at school - GOV.UK (www.gov.uk)
- FSA reporting tool for allergies - https://www.gov.uk/government/news/fsa-launches-allergy-and-intolerance-reporting-tool
- Guidance on the use of adrenaline auto-injectors in schools (Department of Health, 2017) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_school
- Training for Schools - https://www.anaphylaxis.org.uk/information-training/allergywise-training/for-schools/
- Transitioning to Secondary School - https://www.anaphylaxis.org.uk/living-with-serious-allergies/serious-allergy-guidance-for-parents/preparing-for-and-managing-the-transition-to-secondary-school/

- Whole school allergy and awareness management - https://www.allergyuk.org/schools/whole-school-allergy-awareness-andmanagement

11. Complaints

Parents/carers who have concerns or wish to make a complaint regarding the management of their child's allergy should raise the matter in the first instance with a member of the school's safeguarding team. The school will listen to the concerns raised and seek to resolve the matter promptly and appropriately.

Where a concern cannot be resolved informally, or where the parent/carer remains dissatisfied with the outcome, they will be directed to the school's formal complaints procedure. Any complaint will then be managed in accordance with the school's published complaints policy.

Appendix 1

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

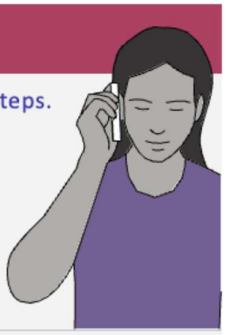
If any one or more of the above ABC symptoms are present, take these steps.

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.

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

Empower • Include • Protect
AllergySchool.org.uk

Appendix 2

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.

1. Remove the blue safety cap

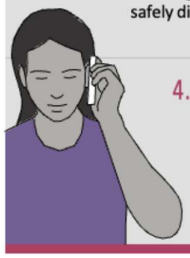
Grasp the EpiPen in your dominant hand and remove the blue safety cap by pulling straight up. Remember: Blue to the Sky, Orange to the Thigh!

2. Position the orange tip

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

3. Administer the EpiPen AAI

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



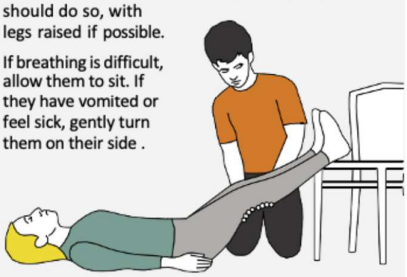
4. Once the EpiPen AAI has been administered call 999

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

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 .

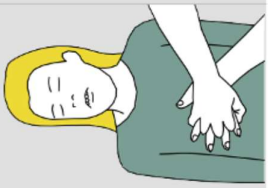


6. If there are no signs of improvement after 5 minutes, use a second EpiPen AAI

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 AAIs >>

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

Empower • Include • Protect

AllergySchool.org.uk

Natasha Allergy Research Foundation
The UK's Food Allergy Charity

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

Appendix 3


Natasha Allergy Research Foundation
Allergy School
Top 14 Allergens
Celery
Cereals containing gluten
Crustaceans
Eggs
Fish
Milk
Molluscs
Peanuts
Sesame Seeds
Soya
Sulphur Dioxide
Tree Nuts
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