



Broomwood Hall School Limited & Northcote Lodge School Limited

Allergy and Anaphylaxis Policy for

Broomwood Prep – Boys, Broomwood Prep – Girls, Broomwood Pre-Prep

Document Control

Owner: Matrons

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Policy Summary

Broomwood is committed to promoting a whole school approach to health care, welfare and wellbeing and the safe management of those members of our school community who live with specific allergies. We believe that all allergies should be taken seriously and dealt with in a professional and appropriate way.

By our actions we will work proactively to:

- minimise the risk of exposure within the school setting;
- have robust plans for an effective response to possible emergencies;
- ensure inclusivity for all pupils.

This policy sets out how Broomwood will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life. It will minimise the risk of any pupil suffering a serious allergic reaction whilst at school or attending any school-related activity. It will also ensure staff are properly prepared to recognise and manage serious allergic reactions should they arise.

The named staff members responsible for coordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy are:

Clare Evans – School matron (BG and BPP)

Christine Sheeran – School matron (BB)

[School procedure for being notified about children with allergies.](#)

A health questionnaire is sent out to all new starters in advance of them joining the school. One of the questions asks about allergies and intolerances and a further question asks about dietary requirements.

Once the questionnaire is received by the school matron, she will call the family of the child and ask further questions about management of the allergy including whether it is a severe allergy and their child has been prescribed AAs (auto adrenaline injectors) or a mild allergy where antihistamine can be used effectively.

This information is inputted into iSAMs (the pupil information management system use by Broomwood) in the health record section, and it is red flagged. It is also documented on kitchen allergy lists – photo boards, and this is then discussed with the catering team and all other relevant staff informed.

Individual Care Plans (ICPs) are written in response to the Consultant's letter/BSACI Allergy Action Plan (AAPs) These documents are written by the named consultant/hospital involved in the child's care (please see appendix 1,). Once completed, this is shared with the child's parents alongside:

- a consent form for keeping prescribed medication at school, and
- our allergy policy (once it is reviewed and countersigned by them).

The [BSACI Allergy Action Plan](#) contains personal details about the individual, what treatment to take depending on the allergic reaction and emergency contact numbers for parents and school matron (appendix 2).

Procedure at school with individual medical bags and contents.

Once the child starts at school, they are given an orange med pac. This contains the medicines – AAI pens/ antihistamine syrup or tablet/ inhalers – along with their ICPs. The bag is then clearly named on the outside. The expiry date is noted at the beginning of each term by the matron and recorded so that parents can be notified if medicines are due to expire. It is the parents' responsibility to replace medications in a timely fashion.

Our practice slightly varies at the different sites:

Broomwood Girls / Pre-Prep – the medical bag is kept with the individual at all times and when the child goes off site it is indicated on the registers that they must check they have their bag with them.

Broomwood Boys – bags are stored in matron's office, matron/sports staff/ trip leaders take responsibility for bags when off site.

Given pupil's opportunity to attend cross-site/curricular events, we also stock within each site a spare set of AAIs on all three sites for children who might require an AAI due to severe allergic reaction..

Emergency school stock AAI's are clearly labelled 'Emergency EpiPen', they must be kept safely, but not locked away and must be accessible and known to all staff. They are stored in the following locations:

Broomwood Boys – on the wall outside the school dining room

Broomwood Girls – in the front office

Pre-Prep – on the wall in reception – **Vicarage**

on the wall outside the secretary's office – **50NL**

Storage

AAIs must be stored at room temperature, protected from direct sunlight and temperature extremes.

Later Development/Cessation of Allergies If throughout the course of the child's time at our school they develop an allergy, it is the parent's responsibility to notify the school, and once this happens, we follow the same procedure as described above. This also applies if a child grows out of their allergy and no longer requires keeping medicines at school or have an ICP. Once the matron is notified this information is shared with the wider school.

Staff training

Staff training – all staff are required to complete first aid training upon appointment (unless valid training has been undertaken recently) and receive annual first aid training. In addition, the matrons provide annual face-to-face training and practice of how to recognise an allergic reaction and how to administer an AAI training. This is provided on an ad-hoc basis for any new members of staff.

Training includes:

- Knowing the common allergens and triggers of allergy;
- Spotting the signs and symptoms of an allergic reaction and anaphylaxis (early recognition of symptoms is key, including knowing when to call for emergency services);
- Administering emergency treatment (including AAI) in the event of anaphylaxis – knowing how and when to administer the medication/device;
- Measures to reduce the risk of a child having an allergic reaction e.g. allergen avoidance, knowing who is responsible for what;
- Managing allergy action plans and ensuring these are up to date;
- All staff who work within the school must be aware of the pupils in their care who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.

Emergency Treatment and Management of Anaphylaxis

How we manage allergic reactions at school:

Mild – if a child presents with signs of mild allergy

- Swollen lips, face or eyes
- Itchy/ tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

Action: Stay with child, call for help if necessary

Locate AAI

Give antihistamine

Phone parent/ emergency contact

Watch for signs of ANAPHYLAXIS (life threatening allergic reaction)

Airway: persistent cough, hoarse voice, difficulty swallowing, swollen tongue

Breathing: difficult or noisy breathing, wheeze or persistent cough

Consciousness: persistent dizziness/ pale or floppy suddenly sleepy, collapse, unconscious

If ANY of the above signs are present:

1. Lie child flat (if breathing is difficult, allow child to sit)
2. Use Adrenaline Auto Injector (eg. Epipen) without delay
3. Dial 999 for ambulance and say ANAPHYLAXIS

After giving Adrenaline:

1. Stay with child until ambulance arrives, do NOT stand child up
2. Commence CPR if there are no signs of life
3. Phone parent/ emergency contact
4. If no improvement after 5 minutes, give a 2nd adrenaline dose using a second autoinjector device, if available

Please see appendix 2 on how to use an Epipen

Documentation

After any allergic reaction happens at school it is always documented. At each site the event is documented in a slightly different way, however they are all documented on iSAMs and parents are called.

If a major allergy occurs at school, it is also documented on CPOMs, a pupil accident form is filled in and sent to HR, and it is logged and reported termly to Dukes.

These events are also raised at the H&S subcommittee meeting and reported to the governors.

Catering

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products. Please see our school catering policy.

The school's menu is on a three-week rotation and is available to view in advance on MSP (My School Portal)

The School Matron will inform the Catering Manager and Chef of pupils with food allergies.

A photo board is present in each kitchen with the child's name, class and allergy along with their photo so that they can be easily identified at mealtimes.

In the Pre-Prep, the children are given specific allergy mats which have their name and their allergen on, and which are coloured with a traffic light system depending on the

severity of their allergy i.e. Red for shellfish allergy needing an AAI and yellow for mild allergy to fruit.

At BG/ BB all allergens are labelled but the children are also encouraged to ask the kitchen staff about ingredients and to speak to the kitchen staff about their allergens.

The school adheres to the following Department of Health guidance recommendations:

- The pupil should be taught to also check with catering staff, before selecting their lunch choice.
- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (e.g. birthday parties, food treats). All food that is brought into school is checked by the school matron or the class teacher to make sure it doesn't contain any allergens in. An alternative treat is given to some children.
- Use of food in crafts, cooking classes, science experiments and special events (e.g. fetes, assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.












School trips and Sporting Excursions

Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, carry their medication. Pupils unable to produce their required medication will not be able to attend the excursion.

All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.

Overnight school trips should be possible with careful planning and a meeting for parents with the lead member of staff planning the trip should be arranged. Staff at the venue for an overnight school trip should be briefed early on that an allergic child is attending and will need appropriate food (if provided by the venue).

Appendix 1

 ALLERGY ACTION PLAN   				
Name.....				
Known Allergens.....				
Emergency Contact details..... 				
<p>Mild/Moderate Reaction</p> <ul style="list-style-type: none"> Hives (raised, red itchy rash) Itchy/tingling lips, mouth or tongue Swollen lips, face, or eyelids Abdominal pain or vomiting <p>Action to take</p> <ul style="list-style-type: none"> Take <hr style="width: 50%; margin: 5px auto;"/> <p style="text-align: center;">non-sedating antihistamine(s)</p> <ul style="list-style-type: none"> Take a second dose if you have vomited, or are no better after 30 minutes Be prepared to use your adrenaline auto-injector. 	<p style="text-align: center; color: #e67e22; font-weight: bold; font-size: 18px;">Watch for signs of ANAPHYLAXIS</p> <p style="text-align: center; font-size: 12px;">(life-threatening allergic reaction)</p> <p>Anaphylaxis may occur without skin symptoms: ALWAYS consider that you might be having anaphylaxis if you develop SUDDEN BREATHING DIFFICULTY</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-right: 1px solid #ccc; padding: 5px;"> <p style="text-align: center; font-weight: bold; color: #e67e22;">A AIRWAY</p> <ul style="list-style-type: none"> Swelling in throat, tongue or upper airway Difficulty in swallowing </td> <td style="width: 33%; border-right: 1px solid #ccc; padding: 5px;"> <p style="text-align: center; font-weight: bold; color: #e67e22;">B BREATHING</p> <ul style="list-style-type: none"> Sudden onset wheezing Breathing difficulty Noisy breathing </td> <td style="width: 33%; padding: 5px;"> <p style="text-align: center; font-weight: bold; color: #e67e22;">C CIRCULATION</p> <ul style="list-style-type: none"> Dizziness, feeling faint Sudden sleepiness, tiredness, confusion Pale clammy skin Loss of consciousness </td> </tr> </table> <p style="text-align: center; font-size: 12px; color: #e67e22; font-weight: bold;">IF YOU HAVE ANY OF THESE SIGNS OF ANAPHYLAXIS:</p> <ol style="list-style-type: none"> <li style="margin-bottom: 10px;"> 1 Lie flat with your legs raised (if breathing is difficult, you may sit up) <div style="display: flex; justify-content: center; align-items: center; gap: 10px; margin-top: 5px;">  ✓  ✓  ✗ </div> <li style="margin-bottom: 10px;"> 2 Use your Adrenaline auto-injector without delay (eg. Jext®) <li style="margin-bottom: 10px;"> 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS") <p style="text-align: center; font-size: 12px; color: #e67e22; font-weight: bold;">AFTER GIVING ADRENALINE:</p> <ol style="list-style-type: none"> <li style="margin-bottom: 5px;">1. Stay lying flat or sitting up until ambulance arrives, do NOT stand up. <li style="margin-bottom: 5px;">2. If you are no better after 5 minutes, give yourself a further adrenaline dose using a second auto-injectable device, if available. <p style="text-align: center; font-size: 12px; color: #e67e22; font-weight: bold;">You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis.</p> <ul style="list-style-type: none"> Always carry your adrenaline auto-injector(s) with you Check the expiry date regularly on your adrenaline auto-injectors Practise how to use your pen with a trainer device Download the JEXT® app 	<p style="text-align: center; font-weight: bold; color: #e67e22;">A AIRWAY</p> <ul style="list-style-type: none"> Swelling in throat, tongue or upper airway Difficulty in swallowing 	<p style="text-align: center; font-weight: bold; color: #e67e22;">B BREATHING</p> <ul style="list-style-type: none"> Sudden onset wheezing Breathing difficulty Noisy breathing 	<p style="text-align: center; font-weight: bold; color: #e67e22;">C CIRCULATION</p> <ul style="list-style-type: none"> Dizziness, feeling faint Sudden sleepiness, tiredness, confusion Pale clammy skin Loss of consciousness
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<p>How to give JEXT®</p>  <p style="font-size: 8px;">1 Grasp the Jext injector in your dominant hand (the one you use to write with) with your thumb closest to the yellow cap. Pull off the yellow cap with your other hand.</p>  <p style="font-size: 8px;">2 Place the black injector tip against your outer thigh, holding the injector at a right angle (approx 90°) to the thigh.</p>  <p style="font-size: 8px;">3 Push the black tip firmly into your outer thigh 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.</p>  <p style="font-size: 8px;">4 Massage the injection area for 10 seconds. Seek immediate medical help. Dial 999, ask for ambulance, state anaphylaxis.</p>	<p>This medical document can only be completed by a suitably trained healthcare professional. It should not be edited after completion. A new document should be completed if changes are needed, and only with a trained healthcare professional's recommendation. During travel, adrenaline auto-injector devices must be carried in hand luggage or on the person, and NOT in the luggage hold.</p> <p>This action plan and authorisation to travel with emergency medications has been prepared by:</p> <p>Sign & print name</p> <p>Hospital/Clinic</p> <p>Contact details Date</p>			

Appendix 2

BH Anaphylaxis Treatment Plan (Broomwood)

Appendix 3

How to give an EpiPen:

1 Form fist around **EpiPen®** and **PULL OFF BLUE SAFETY CAP.**

2 **POSITION ORANGE END** about 10cm away from outer mid-thigh*.
* Either clothed, or unclothed, avoiding seams and pocket areas.

3 **SWING AND JAB ORANGE TIP** into thigh at 90° angle and hold in place for 10 seconds.

4 **REMOVE EpiPen®**
Massage injection site for 10 seconds*.
*After use the orange needle cover automatically extends to cover the injection needle.