Allergen and Anaphylaxis Policy

September 2026

Version 1.1

Approval History

Approved By:	Date of Approval	Version Approved	Comments
Local Academy Committee	2nd July 2026	1.0	
Local Academy Committee		1.1	

Revision History

Revision Date	Previous Revision Date	Summary of Changes	Owner/Editor
1.0	None	New policy	Mrs G Davies, School Business Manager
25/07/26	n/a	See attached document	Mrs G Davies, School Business Manager Mrs A McDonald, Assistant Head Inclusion Mrs M Connolly, Deputy Head teacher

Contents:

Statement of intent

Whalley Range 11 - 18 High School strives to ensure the safety and wellbeing of all members of the school community. For this reason, this policy is to be adhered to by all staff members, parents and students, with the intention of minimising the risk of anaphylaxis occurring whilst at school.

In order to effectively implement this policy and ensure the necessary control measures are in place, parents are responsible for working alongside the school in identifying allergens and potential risks, in order to ensure the health and safety of their children.

The school does not guarantee a completely allergen-free environment; however, this policy will be utilised to minimise the risk of exposure to allergens, encourage self-responsibility, and plan for an effective response to possible emergencies.

1. Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Children and Families Act 2014
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- Department of Health 'Guidance on the use of adrenaline auto-injectors in schools'
- DfE 'Supporting students at school with medical conditions'
- DfE 'Allergy guidance for schools'

This policy will be implemented in conjunction with the following school policies and documents:

- GMET Health and Safety Policy
- WRHS Health and Safety procedures
- Supporting Students with Medical Conditions Policy
- GMET Educational Visits and Trips Policy

2. Definitions

For the purpose of this policy:

Allergy – is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.

Allergen – is a normally harmless substance that triggers an allergic reaction for a susceptible person.

Allergic reaction – is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms:

- Hives
- Generalised flushing of the skin
- Itching and tingling of the skin

- Tingling in and around the mouth
- Burning sensation in the mouth
- Swelling of the throat, mouth or face
- Feeling wheezy
- Abdominal pain
- Rising anxiety
- Nausea and vomiting
- Alterations in heart rate
- Feeling of weakness

Anaphylaxis – is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:

- Persistent cough
- Throat tightness
- Change in voice, e.g. hoarse or croaky sounds
- Wheeze (whistling noise due to a narrowed airway)
- Difficulty swallowing/speaking
- Swollen tongue
- Difficult or noisy breathing
- Chest tightness
- Feeling dizzy or feint
- Suddenly becoming sleepy, unconscious or collapsing

3. Roles and responsibilities

The local academy committee is responsible for:

- Ensuring that policies, plans, and procedures are in place to support students with allergies and those who are at risk of anaphylaxis and that these arrangements are sufficient to meet statutory responsibilities and minimise risks.
- Ensuring that the school's approach to allergies and anaphylaxis focusses on, and accounts for, the needs of each individual student.
- Ensuring that staff are properly trained to provide the support that students need, and that they receive allergy and anaphylaxis training at least annually.
- Monitoring the effectiveness of this policy and reviewing it on an **annual** basis, and after any incident where a student experiences an allergic reaction.

The headteacher is responsible for:

- The development, implementation and monitoring of this policy and related policies.
- Ensuring that parents/ carers are informed of their responsibilities in relation to their child's allergies.
- Ensuring that all relevant risk assessments, e.g. to do with food preparation, have been carried out and controls to mitigate risks are implemented.
- Ensuring that all staff are trained in the use of adrenaline auto-injectors (AAIs) and the management of anaphylaxis.
- Ensuring that all staff members are provided with information regarding allergic reactions and anaphylaxis, including the necessary precautions and how to respond.
- Ensuring that catering staff are aware of students' allergies and act in accordance with the school's policies regarding food and hygiene, including this policy.

The Deputy Headteacher and Assistant Headteacher (Inclusion) are responsible for:

- Ensuring that there are effective processes in place for medical information to be regularly updated and disseminated to relevant staff members, including supply and temporary staff.
- Seeking up-to-date medical information about each student via a medical form sent to parents on an annual basis, including information regarding any allergies.
- Contacting parents/carers for required medical documentation regarding a student's allergy.

All staff members are responsible for:

- Attending relevant training regarding allergens and anaphylaxis.
- Being familiar with and implementing students' individual healthcare plans (IHPs) as appropriate.
- Responding immediately and appropriately in the event of a medical emergency.
- Reinforcing effective hygiene practices, including those in relation to the management of food.
- Encouraging students not to share food and drink in order to prevent accidental contact with an allergen.

The kitchen manager is responsible for:

- Monitoring the food allergen log and allergen tracking information for completeness.
- Reporting any non-conforming food labelling to the supplier, where necessary.
- Ensuring the practices of kitchen staff comply with food allergen labelling laws and that training is regularly reviewed and updated.
- Recording incidents of non-conformity, either in allergen labelling, use of ingredients or safe staff practice, in an allergen incident log.
- Acting on entries to the allergen incident log and ensuring the risks of recurrence are minimised.

Kitchen staff are responsible for:

- Ensuring they are fully aware of the rules surrounding allergens, the processes for food preparation in line with this policy, and the processes for identifying students with specific dietary requirements.
- Ensuring they are fully aware of whether each item of food served contains any of the main 14 allergens, as is a legal obligation, and making sure this information is readily available for those who may need it.
- Ensuring that the required food labelling is complete, correct, clearly legible, and is either printed on the food packaging or attached via a secure label.

- Reporting to the kitchen manager if food labelling fails to comply with the law.

All parents/ carers are responsible for:

- Notifying the school of their child's allergens, the nature of the allergic reaction, what medication to administer, specified control measures and what can be done to prevent the occurrence of an allergic reaction.
- Ensuring that their child's prescribed allergy medication (AAI and or anti histamines or similar) is supplied to the school, is clearly labelled and within it's expiry date.
- Where a child has been assessed as able to self-carry their prescribed allergy medication, they are expected to keep it with them at all times while in school and during school related activities. Parents/ carers are responsible for ensuring that the medication is provided, within its expiry date, and that the child understands the importance of carrying it at all times.
- Keeping the school up-to-date with their child's medical information.
- Providing written consent for the use of a spare AAI.
- Providing the school with written medical documentation, including instructions for administering medication as directed by the child's doctor.
- Raising any concerns they may have about the management of their child's allergies with the headteacher.

All students are responsible for:

- Ensuring that they do not exchange food with other students.
- Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown, or have come into contact with an allergen.
- Ensuring that they have their anti allergy medication on them at all times, if applicable.

4. Food allergies

Parents/carers will provide the school with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

Information regarding all students' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the school's catering service.

When making changes to menus or substituting food products, the school will ensure that students' special dietary needs continue to be met by:

- Checking any product changes with all food suppliers
- Asking caterers to read labels and product information before use
- Using the Food Standards Agency's allergen matrix to list the ingredients in all meals.
- Ensuring allergen ingredients remain identifiable.

Kitchen staff will have a full list of allergens and will avoid using them within the menu where possible.

Where meals include allergens or traces of allergens, staff will use clear and fully visible labels, in line with this policy, to denote the allergens of which consumers should be aware.

The school will ensure that there are always dairy- and gluten-free options available for students with allergies and intolerances.

Catering staff are alerted to students' allergens through the till system. When a student scans their identification card, a pop up alerts the staff to the particular allergen affecting the student, this enables the member of staff to ensure that the student is not purchasing a food item containing their related allergen(s).

All food tables will be disinfected before and after being used.

Antibacterial cleaning fluid will be used.

Boards and knives used for fruit and vegetables will be a different colour to the rest of the kitchen knives in order to remind kitchen staff to keep them separate.

Any sponges or cloths that are used for cleaning will be colour-coded according to the areas that they are used to clean, e.g. a red sponge for an area which has been used for raw meat, to prevent cross-contamination.

There will be a set of kitchen utensils that are only for use with the food and drink of the students at risk.

There will also be a set of kitchen utensils with a designated colour. These utensils will be used only for food items that contain bread and wheat related products.

Food items containing bread and wheat will be stored separately.

The chosen catering service of the school is responsible for ensuring that the school's policies are adhered to at all times, including those in relation to the preparation of food, taking into account any allergens.

Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with students' IHPs, taking into account any known allergies of the students involved.

5. Food allergen labelling

The school will adhere to allergen labelling rules for pre-packed food goods, in line with the Food Information (Amendment) (England) Regulations 2019, also known as Natasha's Law.

The school will ensure that all food is labelled accurately, that food is never labelled as being 'free from' an ingredient unless staff are certain that there are no traces of that ingredient in the product, and that all labelling is checked before being offered for consumption.

The relevant staff, e.g. kitchen staff, will be trained prior to storing, handling, preparing, cooking and/or serving food to ensure they are aware of their legal obligations. Training will be reviewed on an **annual** basis, or as soon as there are any revisions to related guidance or legislation.

Food labelling

Food goods classed as 'pre-packed for direct sale' (PPDS) will clearly display the following information on the packaging:

- The name of the food
- The full ingredients list, with ingredients that are allergens emphasised, e.g. in bold, italics, or a different colour

The school will ensure that allergen traceability information is readily available. Allergens will be tracked using the following method:

- Allergen information will be obtained from the supplier and recorded centrally with the catering provider. Any updates are shared directly with the kitchen manager
- Allergen tracking will continue throughout the school's handling of allergen-containing food goods, including during storage, preparation, handling, cooking and serving
- The food allergen log will be monitored for completeness on a weekly basis by the kitchen manager
- Incidents of incorrect practices and incorrect and/or incomplete packaging will be recorded in an incident logging system and managed by the kitchen manager and catering provider.

Declared allergens

The following allergens will be declared and listed on all PPDS foods in a clearly legible format:

- Cereals containing gluten and wheat, e.g. spelt, rye and barley
- Crustaceans, e.g. crabs, prawns, lobsters
- Nuts, including almonds, hazelnuts, walnuts, cashews, pecan nuts, brazil nuts and pistachio nuts
- Celery
- Eggs
- Fish
- Peanuts
- Soybeans
- Milk
- Mustard
- Sesame seeds
- Sulphur dioxide and sulphites at concentrations of more than 10mg/kg or 10mg/L in terms of total sulphur dioxide

- Lupin
- Molluscs, e.g. mussels, oysters, squid, snails

The above list will apply to foods prepared on site, e.g. sandwiches, salad pots and cakes, that have been pre-packed prior to them being offered for consumption.

Kitchen staff will be vigilant when ensuring that all PPDS foods have the correct labelling in a clearly legible format, and that this is either printed on the packaging itself or on an attached label. Food goods with incorrect or incomplete labelling will be removed from the product line, disposed of safely and no longer offered for consumption.

Any abnormalities in labelling will be reported to the kitchen manager immediately, who will then contact the relevant supplier where necessary.

The kitchen manager will be responsible for monitoring food ingredients, packaging and labelling on a weekly basis and will contact the supplier immediately in the event of any anomalies.

Changes to ingredients and food packaging

The catering provider will ensure that communication with suppliers is robust and any changes to ingredients and/or food packaging are clearly communicated to kitchen staff and other relevant members of staff.

Following any changes to ingredients and/or food packaging, all associated documentation will be reviewed and updated as soon as possible.

6. Animal allergies

Students with known allergies to specific animals will have restricted access to those that may trigger a response.

In the event of an animal on the school site, staff members will be made aware of any students to whom this may pose a risk and will be responsible for ensuring that the student does not come into contact with the specified allergen.

The school will ensure that any student or staff member who comes into contact with the animal washes their hands thoroughly to minimise the risk of the allergen spreading.

7. Seasonal allergies

The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.

Students with severe seasonal allergies will be provided with an indoor supervised space (dining room/ hall) to spend their break and lunchtimes in, avoiding contact with outside allergens.

Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the school's nearby proximity, reporting any concerns to the Facilities Manager.

The Facilities Manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.

Where a student with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

8. Adrenaline auto-injectors (AAIs)

Students who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.

Under The Human Medicines (Amendment) Regulations 2017 the school is able to purchase AAI devices without a prescription, for emergency use on students who are at risk of anaphylaxis, but whose device is not available or is not working.

The school will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy.

The school will submit a request, signed by the headteacher, to the pharmaceutical supplier when purchasing AAIs, which outlines:

- The name of the school.
- The purposes for which the product is required.
- The total quantity required.

The headteacher, in conjunction with the School Business Manager, will decide which brands of AAI to purchase.

Where possible, the school will hold one brand of AAI to avoid confusion with administration and training; however, subject to the brands students are prescribed, the school may decide to purchase multiple brands.

The school will purchase AAIs in accordance with age-based criteria, relevant to the age of students at risk of anaphylaxis, to ensure the correct dosage requirements are adhered to.

Spare AAIs are stored as part of an emergency anaphylaxis kit, which includes the following:

- One or more AAIs
- Instructions on how to use the device(s)
- Instructions on the storage of the device(s)
- Manufacturer's information
- A checklist of injectors, identified by the batch number and expiry date, alongside records of monthly checks
- A note of the arrangements for replacing the injectors
- A register of pupils to whom the AAI can be administered
- Blank AAI administration record sheets to document the use of a device

Students who have prescribed AAI devices are able to keep their device in their possession.

Spare AAIs are not located more than **five** minutes away from where they may be required. The emergency anaphylaxis kit(s) can be found at the following locations:

- **Main School Reception**
- **Main School Kitchen**
- **LRC**
- **Student Services**

All staff have access to AAI devices, but these are out of reach and inaccessible to students – AAI devices are not locked away where access is restricted.

All spare AAI devices will be clearly labelled to avoid confusion with any device prescribed to a named student.

In line with manufacturer's guidelines, all AAI devices are stored at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extreme temperature.

The following staff member is responsible for maintaining the emergency anaphylaxis kit(s):

- **Mrs G Davies, School Business Manager**

The above staff member will ensure that a **monthly** check of the emergency anaphylaxis kit(s) is conducted to ensure that:

- Spare AAI devices are present and have not expired.
- Replacement AAIs are obtained when expiry dates are approaching, via the School Business Manager

The following staff member is responsible for overseeing the protocol for the use of spare AAIs, its monitoring and implementation **Mrs G Davies, School Business Manager.**

Mrs Abdulaal, PA to the Senior Leadership Team is responsible for maintaining the register of pupils to whom the AAI can be administered and ensuring that an up to date copy is provided in each of the emergency AAI kits. The list must include the following information:-

- Name of pupil
- Year and form
- Known allergens
- Risk factors for anaphylaxis
- Whether written parental consent has been received for the use of an emergency AAI
- Dosage requirements

Any used or expired AAIs are disposed of after use in accordance with manufacturer's instructions.

Used AAIs may also be given to paramedics upon arrival, in the event of a severe allergic reaction, in accordance with this policy.

A sharps bin is utilised where used or expired AAIs are disposed of on the school premises.

Where any AAIs are used, the following information will be recorded on the administration record sheet to document the use of a device:

- Where and when the reaction took place
- How much medication was given and by whom
- Record of communication with parents and emergency services

9. Access to spare AAIs

A spare AAI can be administered as a substitute for a student's own prescribed AAI, if this cannot be administered correctly, without delay.

Spare AAIs are only accessible to students for whom medical authorisation and written parental/ carer consent has been provided – this includes students at risk of anaphylaxis who have been provided with a medical plan confirming their risk, but who have not been prescribed an AAI.

Consent will be obtained as part of the introduction or development of a student's IHP.

If consent has been given to administer a spare AAI to a student, this will be recorded in their IHP.

The school uses a register of pupils to whom the AAI can be administered which is contained within emergency AAI kits. SIMS linked documents will also be used to store scanned consent documents for students to whom spare AAIs can be administered. IHPs are also available in SIMS which include the following:

- Name of student
- Form
- Known allergens
- Risk factors for anaphylaxis
- Whether written parental consent has been received
- Dosage requirements

Parents/ carers are required to provide consent on an annual basis to ensure the register remains up-to-date.

Parents/ carers can withdraw their consent at any time. To do so, they must write to the headteacher.

If a parent/ carer withdraws their consent but there is a medical emergency school will follow clinical advice, the duty to act in the child's best interests is paramount.

Mrs Abdulaal, PA to the Senior Leadership Team will check the register is up-to-date on an annual basis and will also update the register relevant to any changes in consent or a pupil's requirements.

10. School trips

Pupils with allergies will be enabled to participate in school trips and educational visits wherever reasonably practicable. A trip-specific risk assessment will be completed, by the trip leader taking account of the pupil's allergy, activities, food provision and access to emergency medical care. The pupil's prescribed adrenaline auto-injector(s) and Allergy Action Plan or IHCP will accompany them at all times.

Where a pupil has been assessed as competent to self-carry, they will keep their medication with them throughout the visit. At least one accompanying member of staff will be trained in recognising and managing anaphylaxis and will know how to administer an adrenaline auto-injector in accordance with the pupil's Allergy Action Plan/ IHCP.

The trip leader will be responsible for ensuring that the student has their required medication prior to leaving for the trip.

The school will speak to the parents of students with allergies where appropriate to ensure their co-operation with any special arrangements required for the trip.

A designated adult will be available to support student(s) at all times during a school trip, this may be at an agreed meeting point.

Where the venue or site being visited cannot assure appropriate food can be provided to cater for students' allergies, the student will take their own food or the school will provide a suitable packed lunch.

11. Medical attention and required support

Once a student's allergies have been identified, a meeting will be set up between the student's parents and any other relevant staff members, in which the student's allergies will be discussed and a plan of appropriate action/support will be developed.

All medical attention, including that in relation to administering medication, will be conducted in accordance with the Administering Medication Policy and the Supporting Students with Medical Conditions Policy.

Parents will provide the school with any necessary medication, ensuring that this is clearly labelled with the student's name, class, expiration date and instructions for administering it.

Students will not be able to attend school or educational visits without any life-saving medication that they may have, such as AAIs.

All members of staff are aware of the location of emergency medication and the necessary action to take in the event of an allergic reaction.

Any specified support which the student may require will be outlined in their IHCP.

All staff members providing support to a student with a known medical condition, including those in relation to allergens, will be familiar with the student's IHCP.

Mrs McDonald, Assistant Headteacher (Inclusion) is responsible for working alongside relevant staff members and parents in order to develop IHCPs for students with allergies, ensuring that any necessary support is provided and the required documentation is completed, including risk assessments being undertaken.

Mrs Connolly, Deputy Headteacher has overall responsibility for ensuring that IHCPs are implemented, monitored and communicated to the relevant members of the school community.

12. Staff training

All staff members will be trained in how to administer an AAI, and the sequence of events to follow when doing so.

In accordance with the Supporting Students with Medical Conditions Policy, staff members will receive appropriate training and support relevant to their level of responsibility, in order to assist students with managing their allergies.

The school will arrange specialist training on an annual basis where a student in the school has been diagnosed as being at risk of anaphylaxis.

The relevant staff, e.g. kitchen staff, will be trained on how to identify and monitor the correct food labelling and how to manage the removal and disposal of PPDS foods that do not meet the requirements set out in Natasha's Law.

The relevant members of staff will be trained on how to consistently and accurately trace allergen-containing food routes through the school, from supplier delivery to consumption.

All staff members will be taught to:

- Recognise the range of signs and symptoms of severe allergic reactions.
- Respond appropriately to a request for help from another member of staff.
- Recognise when emergency action is necessary.

- Administer AAIs according to the manufacturer's instructions.
- Make appropriate records of allergic reactions.
- Understand how quickly anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis can occur with prior mild to moderate symptoms.
- Understand that AAIs should be administered without delay as soon as anaphylaxis occurs.
- Understand how to check if a student is on the register of pupils to whom the AAI can be administered
- Understand how to access AAIs.
- Be aware of the provisions of this policy.

13. Mild to moderate allergic reaction:

Mild to moderate symptoms of an allergic reaction include the following:

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

If any of the above symptoms occur in a student, the nearest adult will stay with the student and refer to their IHCP to determine appropriate next steps.

The student's parents will be contacted immediately if a student suffers a mild to moderate allergic reaction, and if any medication has been administered.

In the event that a student without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

For mild to moderate allergy symptoms, the student's IHCP will be followed and the student will be monitored closely to ensure the reaction does not progress into anaphylaxis.

Should the reaction progress into anaphylaxis, the school will act in accordance with this policy. Where the student is required to go to the hospital, an ambulance will be called.

14. Managing anaphylaxis

In the event of anaphylaxis, the nearest adult will take the following actions immediately:

1. Support the student with the administration of their AAI. Spare AAIs will only be administered if appropriate consent has been received. Inject through the outer middle of the thigh (through clothing if necessary). If the student doesn't have a prescribed AAI go to step 2.
2. Call emergency services immediately 999.
3. Lay the student flat on the floor and try to ensure the student suffering an allergic reaction remains as still as possible; if the student is feeling weak, dizzy, appears pale and is sweating their legs will be raised; if they are vomiting or unconscious put them in the recovery position. Do not let them stand or walk.
4. If symptoms don't improve after 5 minutes, a second AAI if available to be administered.
5. Monitor breathing and responsiveness. If they stop breathing normally start CPR and or follow emergency dispatcher instructions.
6. Call for help to another adult.

A member of staff will stay with the student until the emergency services arrive – the student will remain lying flat and still. If the student's condition deteriorates after initially contacting the emergency services, a second call will be made to ensure an ambulance has been dispatched.

In the event that a student without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

A staff member will contact the student's parents as soon as is possible.

Upon arrival of the emergency services, the following information will be provided:

- Any known allergens the student has

- The possible causes of the reaction, e.g. certain food
- The time the AAI was administered – including the time of the second dose, if this was administered

Any used AAIs will be given to paramedics.

Staff members will ensure that the student is given plenty of space, moving other students to a different room if possible and where necessary.

Staff members will remain calm, ensuring that the student feels comfortable and is appropriately supported.

If a student is taken to hospital by ambulance, a member of staff will accompany them, in the absence of their parent.

Following the occurrence of an allergic reaction, the SLT, in conjunction with the school nurse, will review the adequacy of the school's response and will consider the need for any additional support, training or other corrective action.

15. Monitoring and review

The headteacher is responsible for reviewing this policy **annually**.

The effectiveness of this policy will be monitored and evaluated by all members of staff. Any concerns will be reported to the headteacher immediately.

Following each occurrence of an allergic reaction, this policy and students' IHPs will be updated and amended as necessary.

Student allergy declaration form

Name of student			
Date of birth		**Year and form group**	
Name of GP			
Address of GP			

Nature of allergy	
Severity of allergy	

Has your child been prescribed an epipen (Adrenaline auto injector)	Please circle: Yes No
Symptoms of an adverse reaction	
Details of required medical attention	
Instructions for administering medication	

Control measures to avoid an adverse reaction	

Spare AAIs

I understand that the school has spare AAIs to be used in the event of an emergency allergic reaction. I also understand that, in the event of my child's prescribed AAI not working, it may be necessary for the school to administer a spare AAI, but this is only possible with medical authorisation and or my written consent.

In light of the above, I provide consent for the school to administer a spare AAI to my child.

Yes	☐	**No**	☐

Name of parent/carer	
Relationship to child	
Contact details of parent/carer	
Parent/carer signature	

AAI Administration Record Sheet – complete both sides

1. Injection details	
Date of Injection	
Exact Time of Injection	
2. Patient Details	
Name	
Age	
3. AAI Device Details	
Brand of AAI Used	
Dosage Administered	
Batch Number	
Expiry Date	

4. Reason for Injection

Suspected Anaphylaxis – Brief Description of Symptoms:

PLEASE COMPLETE BOTH SIDES OF THIS FORM

5. Action Taken

Please record actions taken following identification of symptoms:

☐ 999/112 called

☐ Parent/Carer informed

☐ School First Aider informed

☐ Other (specify): _____

6. Response to Injection

Describe the patient's response following administration of the AAI:

☐ Symptoms Improved ☐ Symptoms Unchanged ☐ Symptoms Worsened

7. Second Dose Information	**Details**
Was a Second Dose Required?	Yes / No
Time Second Dose Given	
Brand/Dosage (if different)	

8. Staff Record	
Name of Person Administering AAI	
Position/Role	
Signature	
Date	